

| B. Certificate Information | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|--|--------------------------------|--|--------------|---------|--------------------------------|-------------------|--------------|--|-----------|--|--|--|--|------------|--|--|--|--|------------------|--|--|--|--|---------------------------|--|--|--|--|----------------------|--|--|--|--|--------------|--|--|--|--|----------------------|--|--|--|--|
| Period of Coverage | From (dd/mm/yyyy): | | To (dd/mm/yyyy): | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Location of Risk / Territorial Limit | Postcode: Town: State: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Latitude: | | Longitude: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Interest Covered | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Applicant is | <input type="checkbox"/> Owner <input type="checkbox"/> Lessor <input type="checkbox"/> Lessee <input type="checkbox"/> tenant of the cold-storage house | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Claims History for the past three (3) years | <table border="1"> <thead> <tr> <th>Year</th> <th>Contribution/Premium Paid (RM)</th> <th>Claim(s) Incurred</th> <th>No. of Claim</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> | | | | Year | Contribution/Premium Paid (RM) | Claim(s) Incurred | No. of Claim | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Year | Contribution/Premium Paid (RM) | Claim(s) Incurred | No. of Claim | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Details on Cold Storage House | <table border="1"> <thead> <tr> <th>Room No</th> <th></th> <th></th> <th></th> <th></th> </tr> </thead> <tbody> <tr> <td>Area (m2)</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Height (m)</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Temperature (°C)</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Relative Air Humidity (%)</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Carbon Dioxide (%)**</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Oxygen (%)**</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Air Pressure (bar)**</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> | | | | Room No | | | | | Area (m2) | | | | | Height (m) | | | | | Temperature (°C) | | | | | Relative Air Humidity (%) | | | | | Carbon Dioxide (%)** | | | | | Oxygen (%)** | | | | | Air Pressure (bar)** | | | | |
| | Room No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Area (m2) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Height (m) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Temperature (°C) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Relative Air Humidity (%) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Carbon Dioxide (%)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Oxygen (%)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Air Pressure (bar)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | In Operation <input type="checkbox"/> All year round <input type="checkbox"/> _____ months in the year | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Type Of Insulation Material <input type="checkbox"/> Cork <input type="checkbox"/> Mineral Wool <input type="checkbox"/> Foam Plastic | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Last Check Date | | | Last Replacement Date | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| State Alternative Storage Facilities Address: | | | Percentage of Storage: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Have these facilities been used in earlier instances? | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Details on Refrigerating Plant | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Does a Machinery Breakdown Certificate/Policy exists? | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| If YES, please specify with which Takaful/Insurance Provider and since when | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| When the refrigerating plant was first put into operation? (dd/mm/yyyy) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Table: Specification of Refrigerating Plant

| Item No. | Quantity | Description of Items <i>Full description of all items including name of manufacturer, type, cooling capacity, speed, pressure, etc</i> | Remarks <i>gives details of spare units or spare parts available, internal repair facilities, replacement period, etc</i> | Year of Manufacture | Replacement Value <i>State the current cost of replacing the equipment by new equipment of the same kind and capacity plus freight charges, custom duties, costs of erection</i> |
|----------|----------|---|--|---------------------|---|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

C. Beneficial Owner

Other than the participant and nominated beneficiary, is there any individual or entity that have control over this certificate or will receive benefits from this certificate?

Yes No

(Mandatory if the question above is answered "Yes")

| | | | |
|---|-------------------|-----------------|-----------------|
| Name | | | |
| NRIC/Passport No. | | | |
| Mailing address | Postcode : | Town : | State : |
| Residential Address (If different from Mailing Address) | Postcode : | Town : | State : |
| Date of Birth | | | |
| Nationality | | | |
| Occupation | | | |
| Name of Employer | | | |
| Contact No. | Home : | Office : | Mobile : |

D. Authorised Contact Person(s) of Applicant

| | Contact Person 1 | Contact Person 2 |
|--|-------------------------|-------------------------|
| *Name (As per NRIC or Passport) | | |
| *Gender | | |
| *ID Type Number ID Type (Old NRIC / Birth Cert / Army ID / Police ID / Passport) | | |
| *New NRIC Number | | |
| *Nationality | | |
| *Date of Birth | | |

| | | |
|-----------------------------|--|--|
| *Country of Birth | | |
| *Designation | | |
| *Office Phone Number | | |
| Mobile Number | | |
| Email Address | | |
| *This field is mandatory. | | |

E. Declaration

- I/We have read and understand the contents of this application, including all notices therein.
- I/We understand and agree that the contract of Takaful that I/We have applied for shall only take effect on the date the contract of Takaful has been issued by Etiqa General Takaful Berhad. I/We understand that the contract of Takaful will only be issued following the assessment by Etiqa General Takaful Berhad, and provided that the full contribution has been received by Etiqa General Takaful Berhad. I/We understand that if the initial contribution is paid by cheque, the contract of Takaful will only take effect once the cheque has been cleared.
- I/We understand that failure to take reasonable care in answering the questions may result in avoidance of my/our contract of Takaful, refusal or reduction of my/our claim(s), change of terms or termination of my/our contract of Takaful.
- I/We understand that the above duty of disclosure shall continue until the time my/our contract of Takaful is entered into, varied or renewed with Etiqa General Takaful Berhad.
- I/We understand that I/We have a duty to inform Etiqa General Takaful Berhad immediately that this contract of Takaful has been entered into, varied or renewed, whether any of the information given in this Application is inaccurate or has changed.
- I/We agree to notify Etiqa General Takaful Berhad of any change in my/our business which would affect the risk profile during the period of Takaful.
- I/We confirm that the intermediary has fully explained the terms and conditions of the contract of Takaful in a language that I/We understand and has presented and provided me/us with a product disclosure sheet.
- I/We agree that any payment by Etiqa General Takaful Berhad to the account details provided by me/us in "Bank Account Details" of this Application, will be deemed as full payment and Etiqa General Takaful Berhad shall be released and fully discharged from further liability and demand in relation to the payment. I/We confirm that the bank account details are active and maintained in Malaysia.
- I/We understand that contributions will be subjected to relevant charges or taxes as deemed necessary by the Malaysian tax authorities.
- Personal Data Protection Act 2010 (PDPA)

I/We agree to allow Etiqa General Takaful Berhad to process my/our personal data, including sensitive personal data, with the intention of entering into a contract of Takaful in compliance with the provisions of the Personal Data Protection Act 2010.

I/We agree that any personal data collected or held by Etiqa General Takaful Berhad, whether contained in this application or subsequently obtained, may be held, used, processed and disclosed by Etiqa General Takaful Berhad to individuals or organizations related to and associated with Etiqa General Takaful Berhad, or any selected third parties (within or outside Malaysia, including medical institutions, retakaful operators, reinsurers, claim adjusters, claim investigators, solicitors, industry associations, regulators, statutory bodies, and government authorities), for the purpose of processing this application, providing subsequent service related to it, and to communicate with me for such purposes.

I/We understand that I/We have a right to obtain access to, and to request correction of any personal data held by Etiqa General Takaful Berhad concerning me/us. I/We understand that such a request can be made by completing the Access Request Form available at all Etiqa General Takaful Berhad branches or contacting Etiqa General Takaful Berhad via email at pdpa@etiqa.com.my. I/We understand that in accordance with the provisions of the PDPA, I/We may contact the Customer Service Centre at Etiqa Online 1300 13 8888 for the details of my/our personal data and that such information shall only be granted upon verification of my/our identification.

I/We agree that Etiqa General Takaful Berhad may share my/our personal data within Maybank Group and selected third parties, as Etiqa General Takaful Berhad deems fit, and I/We may receive marketing communication from Etiqa General Takaful Berhad or from these other third parties about products and services that may be of interest to Me/Us (please tick your choice below).

Yes No

Declaration (Cont.)

11. Takaful Aqad

I/We agree to participate in this General Takaful scheme based on the principle of Takaful. I/We agree to pay the contribution on the basis of Tabarru' (donation) for the purpose of mutual support of other participants and upon payment of the contribution to the General Takaful Fund (Fund), I/We am/are entitled to the Takaful cover as per the terms and conditions contained in the Takaful Certificate. Payment of sum covered to participants is payable from the Fund based on the concept of Tabarru'.

This scheme also applies the Wakalah (agency) concept, whereby I/We appoint Etiqa General Takaful Berhad to act on My/Our behalf to invest and manage the Fund. The Fund is collectively owned by the Participants where Tabarru' portion of the contribution is placed for the purpose of takaful. Accordingly, I/We agree to pay the upfront Wakalah Fee (as shown in the Product Disclosure Sheet and the Takaful Certificate) to Etiqa General Takaful Berhad, as a deduction of certain amount from contribution, to cover the expenses of investing and managing the Fund.

I/We agree to authorize Etiqa General Takaful Berhad to delegate its rights, duties and obligations to any third party as Etiqa General Takaful Berhad deems fit for the purpose of achieving the objective to invest and manage the Fund, provided that, Etiqa General Takaful Berhad will remain liable and responsible for all such rights, duties and obligations towards Me/Us.

I/We understand that at the end of each financial year, the distributable surplus (if any) from the Fund will be determined annually and will only be payable for annual Certificate. The distribution, if any, makes allowance for contingency provisions, and is subject to the surplus policy approved by Shariah Committee of Etiqa General Takaful Berhad. I/We agree that 50% of the distributable surplus (if any) will be paid to Etiqa General Takaful Berhad for operating and managing the Fund based on the contract of Ju'alah (wage). The balance of 50% will be shared amongst participants whose Takaful certificates have not terminated and who have not made any claim prior to the expiry of their takaful certificates.

I/We further agree that if the surplus or any sum payable is less than Ringgit Malaysia Ten (RM10.00), it will automatically be credited to charitable fund which will be utilized as Amal Jariah on My/Our behalf. The fund will be distributed to eligible recipients as approved by Etiqa General Takaful Berhad's Shariah Committee for charitable purposes.

Definitions:

“**Tabarru**” means contribution, donation or gift. In relation to the Takaful contract, it means Contribution for the purpose of Takaful. This portion is placed in the General Takaful Fund.

“**Ju'alah**” is a wage contract. It is an exchange contract for a known or unknown task, that is difficult to precisely determine and for which payment is due only once the work has been completed. In relation to the Takaful contract, it refers to the reward given to Etiqa General Takaful Berhad agreed upfront by the Participant and Etiqa General Takaful Berhad for good management of the Fund.

“**Wakalah**” refers to a contract where a party, as principal authorizes another party as his agent to perform a particular task on matters that may be delegated with or without imposition of a fee. In relation to the Takaful contract, this means that the Participant have appointed Etiqa General Takaful Berhad to invest and manage the General Takaful Fund on his/her behalf.

Signature of Applicant / Company's Stamp

Date : _____

Signature of Witness

Date : _____

*Witness must be at least 18 years of age and sound mind

F. Document Checklist*To be completed by Intermediaries*

| No | Document | Document Availability | |
|----|---|------------------------------|-----------------------------|
| 1. | Duly Completed Application Form | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 2. | Documentation to support the information needed requested in the Application Form | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

*Note: This list is not exhaustive, additional requirement may be required if deemed necessary.***G. For Office Use Only**

| | | | |
|---------------------------|--|---------------------------|--|
| Source | | Channel | |
| Distribution Channel Name | | Distribution Channel Code | |