Group Personal Accident Maximum Protection

CHUBB



Introduction

As the saying goes, employees are the most important assets of a company. Their welfare is your priority and you want to ensure that your employees are provided with the best available care and financial assistance should an accident befall upon them so that they can focus on getting well.

Having a comprehensive group personal accident plan in place is necessary to address your employees' welfare needs and to take care of the financial obligations you may be faced with, should an unexpected event happen to one of your employees.

Chubb's Group Personal Accident Maximum Protection offers one of the broadest range of group personal accident coverage in the market, for all employees up to the age of 75 years old. Every single benefit can be tailored to suit your budget and requirements in providing the ultimate welfare plan for your employees.

Chubb's Group Personal Accident Maximum Protection Package is underwritten by Chubb Insurance Malaysia Berhad, a general insurer licensed under the Financial Services Act 2013 in Malaysia and regulated by Bank Negara Malaysia.

Benefits

- Lump sum benefits for Accident Death & Disablement
- Lump sum benefits for Medical Expenses & Hospital Income
- Add on options for Temporary Total Disablement and Temporary Partial Disablement
- 20 Additional Free Benefits
- Age Limit of 75 Years

Product Highlights

- 24 Hours Worldwide Coverage
- On Unnamed Basis
- 4 Pre-Underwritten Plan Options
- No medical examination required
- Coverage provided up to Age 75 Years.
- Minimum Group Size of 3
- Minimum Premium MYR500 will be waived if insured has a valid Fire/SME policy with Chubb

Schedule of Benefits

Plan Type	Max. Sum Insured Per Person (MYR)		Premium Per Person Based on Total No. of Employees (MYR)*			
	Accidental Death & Disablement (Scale II)	Accidental Medical Expenses	3-15 employees		16 employees and above	
			Non-Manual	Manual	Non-Manual	Manual
500	500,000	10,000	443	N/A	407	N/A
250	250,000	5,000	222	N/A	204	N/A
100	100,000	3,000	103	146	94	134
50	50,000	1,000	51	72	47	66

*Minimum Premium MYR500

20 Additional Free Benefits

Additional Free Benefit	Max. Sum Insured Per Person (MYR)	
Accidental Hospital Income (Maximum 60 Days)	50 per Day	
Alternative Medical Expenses	500	
Death due to Dengue	10% Sum Insured up to maximum of 50,000	
Dengue Recuperation	1,000	
Additional Indemnity for Public Conveyance	Double Indemnity of Accidental Death Sum Insured	
Burns (2 nd & 3 rd degree)	5,000	
Fractured Bones	5,000	
Recruitment Costs	5,000	
Visitor's Benefit	5,000	
Funeral Expenses/Repatriation of Remains	5,000	
Coma Benefit	1,000	
Mobility/Home Renovation Expense	1,000	

Get Well Benefit	500
Snatch Theft/Robbery	250
Ambulance Cost	500
Dependent Child Supplement	5,000 per child/10,000 per family
Trauma Counselling Compensation	1,000 per session/5,000 per policy period
Credit Card Indemnity	1,000
Corporate Events Cover for Family – AD	25,000
Corporate Events Cover for Family – Medical	1,000

Optional Add-On : Temporary Total Disablement and Temporary Partial Disablement (Accident Only)

Plan Type	Max. Sum Insured Per Person (MYR)		Additional Premium Per Person Based on Total No. of Employees (MYR)		
-5120	Temporary Total Disablement	Temporary Partial Disablement	Non - Manual	Manual	
500	500 Per Week	250 Per Week	70	N/A	
Others	200 Per Week	100 Per Week	30	40	

- Benefit Period of 52 Weeks / Excess Period of 14 Days
- Regardless of the number of employees taking up the plan. there is no difference in premium.

Please note, this offer is not available to the following occupations/industries:

- Emergency Services and Armed Forces
- Drivers (Taxi's, public transport, couriers/freight short & long haul)
- Pilots, Aircrew and Ships' Crew
- Forestry, Logging & Saw Mills
- Mining & Extraction, Oil and Gas Rigs
- Professional Sportspersons
- Racing (motor, aircraft, boat, horse, etc)
- Diving and related occupations
- Fishing/Aquaculture

Policy Terms & Conditions

Automatic Addition And Deletion Of Insured Person

- Any additional Insured Person will be automatically covered by this Policy from the first day of qualification for coverage. Automatic addition will only be applicable to designations or categories that have been declared at the inception of the Policy and where the Sum Insured for any additional Insured Person does not equal to or exceed RM1 million and will not be subject to additional premium. No refund will be accorded for any Insured Person who ceases to be qualified for coverage under this Policy.
- Any new designation or category or inclusions from any new acquisition or subsidiary must be declared to Us and may be subject to additional premium.
- Any increase in the total number of employees and /or increase in total Sum Insured by more than 10% of current headcount and/or total Sum Insured will be subject to additional premium.

• You have a duty to take reasonable care not to make any misrepresentation in answering all the questions in this application.

Failure to take reasonable care in answering the questions may result in the avoidance of your coverage, refusal or reduction of Your claim(s), change of terms or termination of your coverage in accordance with the remedies of Schedule 9 of the Financial Services Act 2013.

You are also required to disclose any other matter that You know to be relevant to Our decision in accepting the risks and determining the rates and terms to be applied. Such duty shall continue during the term of your coverage or when it is varied or renewed.

- All the features and exclusions above are for your quick and easy reference only and do not reflect the full terms of the policy. For full terms, conditions and exclusion of your coverage under the policy, kindly refer to the policy wordings.
- If this offer is not completely suitable to your needs, or the occupation/ industry is excluded from the offer, we are more than happy to provide a crafted solution with variable benefits for which a separate submission will be required.

Application Form

Company Details		
Company Name:		
Contact Person (incl. email):	Name:	Email:
Address:		
Business Nature:		
Total Number of Employees:		
Occupation:	Non Manual (Class 1 / 2)	Manual (Class 3)
	Plan 500:	Plan 500:
Number of Employees Covered	Plan 250:	Plan 250:
Per Plan	Plan 100:	Plan 100:
	Plan 50:	Plan 50:
Optional Add-Ons	☐ Temporary Total Disablement & Temporary Partial Disablement	
Period of Insurance: (DD/MM/YY)	From:	То:
Annual Premium (MYR):	MYR:	SST:
Fire/SME Policy Number:		

Declaration

I hereby acknowledge and agree that:

- I am the authorised respresentative of the company stated above and am duly authorised to apply for insurance on behalf of the company stated above and execute this Application Form.
- The answer/information given to Chubb Insurance Malaysia Berhad ("Chubb") in this Application Form will be relied upon by Chubb to decide whether to accept your risk. If it results in a conract of insurance with Chubb that is not for a consumer purpose, the statements and declarations shall be the basis of the Policy. Chubb reserves the right to decline any claim if any declaration found incorrect or missing in this Application Form.Chubb needs to deal with my personal data to administer the Policy and offer the Company insurance products and services. To achieve these purposes, I allow Chubb to collect, use and disclose my personal data to selected third parties in or outside Malaysia, in accordance with Chubb's Personal Data Protection Notice, which can be found in Chubb's website http://www.chubb.com/my-privacy/. I may contact Chubb for access to or correction of personal data, or for any other queries or complaints;
- where I have given personal data that is of the proposed Insured Person, I confirm that I have informed the proposed Insured Person that I am providing the proposed Insured Person's personal data to Chubb, and have gotten the proposed Insured Person's consent to do so. I have explained what is stated in Chubb's Personal Data Protection Notice to the proposed Insured Person, and ensured then proposed Insured Person understands, agrees and authorises Chubb to deal with the proposed Insured Person personal data according to what is stated in Chubb's Personal Data Protection Notice. In addition, I have also obtained the proposed Insured Person's consent to continue having the Insured Person's personal data including but not limited to receiving policy document, viewing policy details and receiving notification;
- I confirm that this product is suitable for the Company and it meets the Company's insurance needs, financial objectives and priority. On behalf of the Company, I hereby agree to purchase this product; and
- No insurance is in force until this Application Form is accepted by Chubb and a Policy is issued pursuant thereon.

Signature

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Applicant's Signature:	Company Name:
Date (DD/MM/YY):	Account Handler & Contact Phone Number:

About Chubb in Malaysia

Chubb is the world's largest publicly traded property and casualty insurer. Chubb's operation in Malaysia (Chubb Insurance Malaysia Berhad) provides a comprehensive range of general insurance solutions for individuals, families and businesses, both large and small through a multitude of distribution channels. With a strong underwriting culture, the company offers responsive service and market leadership built on financial strength. Chubb in Malaysia has an extensive branch network and more than 2,600 independent distribution partners (agents).

More information can be found at www.chubb.com/my.

Contact Us

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