



# MUI Continental Insurance Berhad

Head Office / KL Branch

(29213-D)

Mezzanine Floor & 1st Floor, Plaza See Hoy Chan, Jalan Raja Chulan, 50200 Kuala Lumpur, Malaysia.  
Tel: 03-2070 9226 Fax: 03-2070 4226 / 2070 5226 E-mail: gpa@muicna.com

## NEW DRIVER'S & PASSENGERS PERSONAL ACCIDENT INSURANCE PROPOSAL FORM

STATEMENT PURSUANT TO SECTION 149(4) OF THE INSURANCE ACT, 1996, you are to disclose in this proposal form, fully and faithfully, all the facts which you know or ought to know, otherwise the Policy issue hereunder may be invalidated.

### PERSONAL AND VEHICLE'S PARTICULARS

Name : \_\_\_\_\_

Address : \_\_\_\_\_

Post Code : \_\_\_\_\_

NRIC No. / Company Registration No : \_\_\_\_\_ Date of Birth : \_\_\_\_\_

Occupation : \_\_\_\_\_ Tel No : \_\_\_\_\_

Sex : \_\_\_\_\_ Period Of Insurance : \_\_\_\_\_

Make Of Vehicle : \_\_\_\_\_ Vehicle Registration No : \_\_\_\_\_

Type Of Body : \_\_\_\_\_ Seating Capacity Incl. Driver : \_\_\_\_\_  
( as per Registration Card )

### CHOICE OF PLAN

Seating Capacity		Annual Premium		
		Plan A	Plan B	Plan C
		Sum Insured ( RM20,000 per person )	Sum Insured ( RM30,000 per person )	Sum Insured ( RM40,000 per person )
Private Car & Private Van	Driver and 4 passengers	<input type="checkbox"/> RM150.00	<input type="checkbox"/> RM225.00	<input type="checkbox"/> RM300.00
	Each Additional Passenger	<input type="checkbox"/> RM 30.00	<input type="checkbox"/> RM 45.00	<input type="checkbox"/> RM 60.00
Commercial Vehicle	Driver Only	<input type="checkbox"/> RM300.00	<input type="checkbox"/> RM375.00	<input type="checkbox"/> RM500.00
	Driver and Attendant	<input type="checkbox"/> RM400.00	<input type="checkbox"/> RM475.00	<input type="checkbox"/> RM600.00

### PAYMENT INSTRUCTION / ARAHAN PEMBAYARAN

I /We enclose a cheque number \_\_\_\_\_ for RM \_\_\_\_\_ being premium inclusive of Service Tax (if any) and Stamp Duty made payable to MUI Continental Insurance Berhad

Please charge RM \_\_\_\_\_ being premium inclusive of Services Tax ( if any ) and Stamp Duty to my Credit Card

Credit Card Number : \_\_\_\_\_

Card Expiry Date : \_\_\_\_\_  Master card  Visa

Cardmember's Signature ( Signature as per card )

### DECLARATION OF PROPOSER / PENGAKUAN PENCADANG

I/We do here by declare that the above answer and statement are true and accurate in every respect and no information has been withheld which is likely to affect acceptance of this proposal.

Signature of Proposer / Date



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## NEW DRIVER'S & PASSENGERS PERSONAL ACCIDENT INSURANCE

### SCOPE OF COVER

This policy is specially designed to cover you and your passengers whilst traveling (include entering in or alighting from) in a private cars, private vans, and goods carrying vehicles against loss of life and bodily injury arising from a motor accident

### BENEFITS

Item No.	Description of Benefits	Compensation		
		Sum Insured for each Insured Person		
		Plan A	Plan B	Plan C
1	Accidental Death	RM20,000	RM30,000	RM40,000
2	a) Loss of both hands or both feet or sight of both eyes	RM20,000	RM30,000	RM40,000
	b) Loss of one hand and one foot	RM20,000	RM30,000	RM40,000
	c) Loss of either hand or foot and sight of one eye	RM20,000	RM30,000	RM40,000
	d) Loss of either hand or foot	RM10,000	RM15,000	RM20,000
	e) Loss of sight of one eye	RM10,000	RM15,000	RM20,000
3	Actual medical expenses reasonably and necessarily incurred for medical and surgical treatment as a result of motor accident	RM1,000 per accident	RM1,500 per accident	RM2,000 per accident
	The Aggregate of all benefits payable in respect of anyone accident shall not exceed	RM20,000 per occupant	RM30,000 per occupant	RM40,000 per occupant
Note: If the actual number of passengers being carried exceed the number stated in the Registration Card during an accident, the sum insured payable per insured person shall be reduced proportionately.				

### PERSONS COVERED

You, your family, friend or other person riding in or driving your private vehicle, provided they are within the age of 3 to 70 years old.

### GEOGRAPHICAL AREA

Within Malaysia and Singapore

### GENERAL EXCLUSIONS

This insurance shall not apply to loss bodily injury death or disablement caused directly or indirectly, wholly or partly due to:

- War, invasion, act of foreign enemy, hostility ( whether war be declared or not ), warlike operation, any act of terrorism.
- Self - inflicted injury, insanity, suicide or attempted suicide (whether sane or insane), deliberate exposure to needless danger
- Bacterial infection (unless occur through an accidental cut or wound from motor accident), viral infection, parasites, or any kind of diseases including AIDS or AIDS related complications however this syndrome has been acquired or may be named.
- Pre - existing physical defect or infirmity, childbirth, miscarriage, pregnancy or any complications thereof.
- Whilst the driver is under influence ( temporarily or otherwise ) by alcohol or drug.
- While the vehicle is used for illegal business pursuit or as an unlicensed common carrier.
- While the vehicle is used for hiring, racing road rally peacemaking speed testing or use for any purpose in connection with Motor Trade.
- The driver if such driver does not hold a valid driver's license to drive the vehicle under the Road Transport Act 1987 or any regulations made there under or any other regulations of the Malaysian Road Transport Department.
- Any bodily injury which resulted in hernia.