

# Declaration and Authorization

I hereby declare and agree: -



- (a) that all information provided by me in this page, any formal questionnaire or other confirmation signed by me in conjunction with this application, including any statements as well as answers, are so made to Chubb Insurance Malaysia Berhad, Registration Number : 197001000564 (9827-A) (“Chubb”) are complete, true and correct, and I understand and agree that Chubb will rely and act on them to decide whether to accept this insurance. Otherwise, any policy issued may be void at the discretion of Chubb;
- (b) That I have a duty to take reasonable care:
  - (i) not to make a misrepresentation to Chubb when answering any questions Chubb asks in this page; and
  - (ii) to disclose to Chubb any matter, other than what Chubb has asked in (i) above, that I know to be relevant to Chubb’s decision on whether to accept the risk or not and the rates and terms to be applied.

My duty to take reasonable care for (i) above shall be based on what a reasonable person in my circumstances would have known. This duty of disclosure above shall continue until the time the contract is entered into, varied or renewed.

- (c) that if I purchase Chubb’s insurance on behalf of a proposed Insured Person, I confirm that the proposed Insured Person is fully aware of all applicable terms and conditions of such insurance including but not limited to policy exclusions and the duty to take reasonable care, and I have gotten the proposed Insured Person’s consent to do so;
- (d) that Chubb needs to deal with my personal data to administer my Policy and offer me 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 my personal data, or for any other queries or complaints;
- (e) to receive marketing, advertising and promotional information, materials and/or documents about Chubb’s products and/or services. I understand that I can choose to unsubscribe at any time if I no longer wish to receive any marketing/promotions from Chubb by writing to [Inquiries.MY@chubb.com](mailto:Inquiries.MY@chubb.com);
- (f) that 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; and

I hereby irrevocably authorize any organization, institution or individual that has any records or knowledge of my/the proposed Insured Person's health and medical history and any treatment or advice to disclose such information to Chubb. This information shall bind me/the proposed Insured Person, successors and assigns, and remain valid, notwithstanding my/the proposed Insured Person's death or incapacity.