

POLICY SCHEDULE (JADUAL POLISI)

Personal Accident - Group Personal Accident Master

The Insured / Pihak Diinsuranskan
KOPERASI GEMILANG MALAYSIA BERHAD
BLOCK C-05, SUNWAY
PJ 51A, SS9A/19
SS9A
PETALING JAYA
47300 SELANGOR

Date of Issue / Tarikh Keluaran 11/05/2023

Intermediary No. / No. Wakil Insurans

A/L A AMALDASS

Policy No. / No. Polisi 2023-HM-PA087805-PGM
Period of Insurance / Tempoh Perlindungan 01/01/2023 To 31/12/2025

PREMIUM DETAILS /BUTIRAN PREMIUM	RM
Gross Premium / Premium Kasar	
Services Tax / Cukai Perkhidmatan (6.00%)	
Stamp Duty / Duti Setem	
Premium Payable / Premium Perlu Dibayar	

Subject to the following Clauses, Warranties, and Endorsements as printed herein or attached hereto:-/ Tertakluk kepada Fasal, Waranti dan Perubahan yang dicetak di bawah atau dilampirkan bersama:-

ANNUAL PREMIUM (PER PERSON) : RM20.00. AGE LIMIT: BETWEEN 16 TO 80 YEARS OLD.

COMMENCEMENET OF COVER: COVER TO COMMENCE FROM THE DATE OF ACCEPTANCE OF EACH APPLICATION FOR TWELVE (12) MONTHS PERIOD SUBJECT TO THE DECLARATION ARE SUBMITTED TO THE COMPANY WITHIN THIRTY (30) DAYS FROM THEIR DATE OF APPLICATION.

COVERAGE/SUM INSURED PER PERSON:

- 1. ACCIDENT DEATH: RM50,000.00
- 2. PERMANENT TOTAL DISABLEMENT: RM50,000.00
- 3. DAILY HOSPITAL INCOME UP TO 120DAYS: RM100.00
- 4. MOBILITY EXPENSES DUE TO ACCIDENT: RM3,000.00
- 5. AMBULANCE SERVICE (SUB LIMIT): RM300.00
- 6. BURN DUE TO ACCIDENT: RM2,000.00
- 7. FUNERAL EXPENSES: RM2,000.00
- 8. REPATRIATION EXPENSES: RM2,000.00

MOBILITY EXPENSES:

WHEN, AS RESULT THE OF A COVERED ACCIDENT OCCURING DURING THE PERIOD OF INSURANCE, AN INSURED PERSON SUFFERS FRON PERMANENT TOTAL DISABLEMENT CAUSING THE INSURED PERSON TO REQUIRE THE USE OF:

A) A WHEELCHAIR, AND/OR

B) A MOTOR VEHICLE WITH THE CONTROL SUITABLY ADJUSTED; AND/OR

C) A LIFT, NECESSARY RAMP, RAILINGS AND HOLDS TO HIS OR HER USUAL PLACE OF RESIDENCE.

ACCIDENT BURNS.

WHEN, AS THE RESULT OF A COVERED ACCIDENT OCCURING DURING THE PERIOD OF INSURANCE, AN INSURED PERSON SUFFERS FORM BURNS SET OUT IN THE COMPENSATION TABLE PROVIDED BELOW, BERJAYA SOMPO INSURANCE BHD WILL PAY UP TO THE AMOUNT SPECIFIED IN THE SCHEDULE OF BENEFIT SUBJECT TO THE APPLICATION PERCENTAGE OF PAYABLE SUM INSURED SET OUT IN THE SAID COMPENSATION.

COMPENSATION TABLE.

AREA / DAMAGE AS A % OF TOTAL BODY SURFACE AREA / % OF SUM INSURED:

HEAD:

EQUAL TO OR GREATER THAN 2% BUT LESS THAN 5% / 50%

EQUAL TO OR GREATER THAN 5% BUT LESS THAN 8% / 75%

EQUAL TO OR GREATER THAN 8% / 100%

EQUAL TO OR GREATER THAN 10% BUT LESS THAN 15% / 50%



EQUAL TO OR GREATER THAN 10% BUT LESS THAN 15% / 50% EQUAL TO OR GREATER THAN 20% / 100%

TERRORISM CLAUSE.

NOTWITHSTANDING ANYTHING CONTAINED HEREIN TO THE CONTRARY IT IS HEREBY DECLARED AND AGREED THAT THIS POLICY IS HEREBY EXTENDED TO COVER DEATH OR LOSS OR DISABLEMENT AS HEREIN DEFINED DUE TO AN ACT OF TERRORISM PROVIDED THE LIFE INSURED IS NOT DIRECTLY OR INDIRECTLY PARTICIPATING IN SUCH ACTIVITIES.

AN ACT OF TERRORISM FOR THE PURPOSE OF THIS CLAUSE SHALL MEANS AN ACT, INCLUDING BUT NOT LIMITED TO THE USE OF FORCE OR VIOLENCE AND/OR THE THREAT THEREOF, OF ANY PERSON OR GROUP(S) OF PERSONS, WHETHER ACTING ALONE OR ON BEHALF OF OR IN CONNECTION WITH ANY ORGANISATION(S) OR GOVERNMENT(S), COMMITTED FOR POLITICAL, RELIGIOUS, IDEOLOGICAL OR ETHNIC PURPOSES OR REASONS INCLUDING THE INTENTION TO INFLUENCE ANY GOVERNMENT AND/OR TO PUT THE PUBLIC, OR ANY SECTION OF THE PUBLIC, IN FEAR.

PROVIDED THIS CLAUSE DOES NOT COVER ANY CLAIM(S) IN ANY WAY CAUSED OR CONTRIBUTED TO BY AN ACT OF TERRORISM INVOLVING THE USE OR RELEASE OR THE THREAT THEREOF OF ANY NUCLEAR WEAPON OR DEVICE OR RELEASE OR THE THREAT THEREOF OF ANY NUCLEAR WEAPON OR DEVICE OR CHEMICAL OR BIOLOGICAL AGENT.

THE MAXIMUM COMPENSATION PAYABLE FOR THIS CLAUSE ARISING OUT OF ANY ONE LIFE INSURED AND ANY ONE ACCIDENT SHALL NOT EXCEED RM50,000.00.

IF THE COMPANY ALLEGES THAT BY REASON OF THIS EXCLUSION ANY CLAIM IS NOT COVERED BY THIS POLICY THE BURDEN OF PROVING THE CONTRARY SHALL BE UPON THE INSURED.

SUBJECT OTHERWISE TO THE TERMS EXCEPTIONS AND CONDITIONS OF THIS POLICY.

MEMO

IT IS HEREBY DECLARED AND AGREED THAT A LIFE INSURED CAN ONLY BE INSURED FOR ONE TIME IN THIS SCHEME/POLICY.

EXCLUDED OCCUPATION LIST.

- 1) ACROBAT OR ANY CIRCUS WORKER.
- 2) AIRLINE PERSONNEL AND AIRCREW.
- 3) ANIMAL TRAINER.
- 4) EXPLOSIVE HANDLER.
- 5) DETECTIVE POLICE FORCE OR PRIVATE INVESTIGATOR.
- 6) DIVER, STEVEDORE AND WORKS ON OIL RIG.
- 7) FIREMAN.
- 8) HORSE TRAINER AND/OR JOCKEY.
- 9) MOTOR RACING OF ANY KIND.
- 10) NAVAL, MILITARY OR AIR FORCE SERVICES OR OPERATIONS.
- 11) PERSONS WORKING IN ACID/CHEMICAL FACTORIES.
- 12) PROFESSIONAL ATHLETES AND ENTERTAINERS INCLUDING MUSICIANS, PERSON ENGAGED IN THE THEATRICAL PROFESSION.
- 13) RAILWAY MANUAL WORKERS.
- 14) SAWYER, TIMBER LOGGING WORKERS, DRIVERS AND/OR ATTENDANTS OF TIMBER LORRIES AND WINCHES.
- 15)SECURITY GUARD OR BODYGUARD.
- 16)SHIP CREWS INCLUDING FISHERMAN.
- 17)STEEPLEJACK.
- 18) THE USE OR HANDLING OF NUCLEAR AND RADIO-ACTIVE MATERIALS.
- 19) UNDERGROUND TUNNELING AND MINING WORKERS.
- 20) WINDOW CLEANER (MORE THAN 3 STOREY BUILDING).
- 21)WOODWORKING MACHINIST.

IMPORTANT/ PENTING

This Schedule should be read in conjunction with the Terms & Conditions of the Policy/ Jadual ini perlu dibaca bersama-sama dengan terma-terma dan syarat-syarat Polisi.

For environmental conservation, Policy documents will no longer be printed(unless necessary or upon request) but may be produced and delivered to you in an electronic form or provided and displayed to you online through our website at www.berjayasompo.com.my. Please check our website for any updates or changes to your insurance Policy which may be published from time to time. For more information please call our customer service at 1-800-889-933. / Untuk kepentingan alam sekitar, dokumen dokumen Polisi tidak akan dicetak (kecuali sekiranya perlu atau atas