



MSIG HOME INSURANCE ADD-ON

HOSPITALISATION INCONVENIENCE BENEFIT*

*MANFAAT KESULITAN
PENGHOSPITALAN**

Member of PIDM

The benefit(s) payable under eligible product is protected by PIDM up to limits. Please refer to PIDM's TIPS Brochure or contact MSIG Insurance (Malaysia) Bhd or PIDM (visit www.pidm.gov.my).

**Terms and conditions apply*



MSIG

Insurance
that sees
the heart in
everything

Home is where family is, a place for loved ones to live, relax and be themselves after a long working day. However, home is also the most common place for accidents to happen, especially among young children and seniors. Thankfully, these accidents are usually minor, but they could also cause serious injuries that require hospitalisation. MSIG is now offering an add-on to your Houseowner/Householder Insurance that provides a daily cash benefit for up to a maximum of 30 consecutive days of hospitalisation for injuries resulting from an accident that occurred in your home, from insured perils or events under your Houseowner/Householder Insurance, or from dengue fever. This **Hospitalisation Inconvenience Benefit** add-on covers up to a maximum of six named family members (domestic helpers included) who are between the ages of 15 days and 75 years residing in your home.

The **Hospitalisation Inconvenience Benefit** has a 14-day waiting period. It is only applicable for a single occurrence of hospitalisation for each insured person during the period of insurance. It comes with a choice of three plans at very affordable premiums, from as low as RM15:

Hospitalisation Inconvenience Benefit (per day, up to a maximum of 30 consecutive days)	PLAN 1 (RM)	PLAN 2 (RM)	PLAN 3 (RM)
Daily cash benefit from hospitalisation arising out of: - Injuries from accidents - Injuries from insured perils/events - Dengue fever	175	275	375
NO. OF PERSONS PER HOUSEHOLD	ANNUAL PREMIUM (EXCLUSIVE OF 8% SERVICE TAX)		
1	15	30	45
2	25	50	75
3	35	75	110
4	50	95	145
5	60	115	175
6	70	140	210

Example Scenario:



Marina was already protected by the Houseowner/Householder Insurance policy and had recently extended her policy to include Plan 1 of the **Hospitalisation Inconvenience Benefit** for herself, her husband, and her daughter, at an additional premium of RM35 for the add-on.

One day, Marina was up on a ladder cleaning a ceiling fan in the dining room while her daughter was seated at the dining table doing her homework. Suddenly, Marina lost her balance and fell onto her daughter, who was knocked out of her seat and hit her head on the floor. At the hospital, it was revealed that Marina had a broken hip that required surgery, while her daughter suffered a concussion. Both had to be hospitalised for 7 days.

Since the hospitalisation was due to injuries resulting from the accident that occurred in the insured home, both Marina and her daughter were eligible to receive the hospitalisation benefit each for the 7 days they were hospitalised.

Total claims payout: RM175 per day for 7 days for 2 insured persons = RM2,450

With the **Hospitalisation Inconvenience Benefit** Add-on, Marina and her family members were able to get some financial relief throughout the period they were hospitalised.

For more information on MSIG Hospitalisation Inconvenience Benefit, please contact your MSIG Insurance Adviser or visit www.msig.com.my.

The description of covers is a brief summary for quick and easy reference. The precise terms and conditions that apply are in the Policy Document.

Note: In the event of a conflict between the English and the translated versions of this leaflet, the English version shall prevail.

MSIG Insurance (Malaysia) Bhd
Registration No.197901002705 (46983-W)
Customer Service Centre:
Level 15, Menara Hap Seng 2, Plaza Hap Seng
No. 1, Jalan P. Ramlee
50250 Kuala Lumpur
Tel : (603) 2050 8228
Fax : (603) 2026 8086
Customer Service Hotline: 1-800-88-MSIG (6744)
Email: myMSIG@my.msig-asia.com
Website: www.msig.com.my
 www.facebook.com/MSIGMY

For more information, please call MSIG
or contact your Insurance Adviser at:



MSIG HOME INSURANCE ADD-ON

HOSPITALISATION INCONVENIENCE BENEFIT*

MANFAAT KESULITAN PENGHOSPITALAN*

Ahli PIDM

Manfaat-manfaat yang dibayar di bawah produk yang layak adalah dilindungi oleh PIDM sehingga had perlindungan. Sila rujuk Brosur Sistem Perlindungan Manfaat Takaful dan Insurans PIDM atau hubungi MSIG Insurance (Malaysia) Bhd atau PIDM (layari www.pidm.gov.my).

**Tertakluk kepada terma-terma dan syarat-syarat*



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Rumah ialah tempat untuk keluarga, di mana orang tersayang tinggal dan berehat setelah seharian bekerja. Namun, rumah juga tempat yang biasa berlakunya kemalangan, terutamanya dalam kalangan kanak-kanak dan warga tua. Kemalangan ini biasanya kecil, tetapi berkemungkinan menyebabkan kecederaan serius yang memerlukan rawatan di hospital. MSIG kini menawarkan perlindungan tambahan kepada Insurans Empunya Rumah/Isi Rumah anda yang memberikan manfaat tunai harian maksimum sehingga 30 hari berturut-turut penghospitalan untuk kecederaan akibat kemalangan yang berlaku di rumah anda, kemalangan daripada peril atau kejadian yang diinsuranskan di bawah Insurans Empunya Rumah/Isi rumah anda, atau daripada demam denggi. Perlindungan tambahan **Manfaat Kesulitan Penghospitalan** ini melindungi maksimum sehingga enam ahli keluarga (termasuk pembantu rumah) yang berumur antara 15 hari hingga 75 tahun yang tinggal di rumah anda.

Manfaat Kesulitan Penghospitalan mempunyai tempoh menunggu 14 hari. Manfaat ini hanya boleh dituntut untuk satu kejadian penghospitalan bagi setiap orang yang diinsuranskan semasa tempoh insurans. Perlindungan tambahan ini dilengkapi dengan tiga pilihan pelan dengan premium yang sangat berpatutan, dari serendah RM15:

Manfaat Kesulitan Penghospitalan (Sehari, sehingga maksimum 30 hari berturut-turut)	PELAN 1 (RM)	PELAN 2 (RM)	PELAN 3 (RM)
Manfaat tunai penghospitalan harian disebabkan oleh: - Kecederaan akibat kemalangan - Kecederaan akibat peril/kejadian yang diinsuranskan - Demam denggi	175	275	375
BILANGAN ORANG DI SETIAP RUMAH	PREMIUM TAHUNAN (TIDAK TERMASUK CUKAI PERKHIDMATAN 8%)		
1	15	30	45
2	25	50	75
3	35	75	110
4	50	95	145
5	60	115	175
6	70	140	210

Senario Contoh:



Marina telah dilindungi oleh polisi Insurans Empunya Rumah/Isi Rumah dan baru-baru ini telah mempertingkatkan polisinya dengan perlindungan tambahan Pelan 1 **Manfaat Kesulitan Penghospitalan** bagi dirinya, suaminya, dan anak perempuannya, dengan premium tambahan sebanyak RM35.

Suatu hari, Marina menaiki tangga untuk membersihkan kipas siling di ruang makan sementara anak perempuannya duduk di meja makan sambil membuat kerja sekolah. Tiba-tiba, Marina hilang keseimbangan dan jatuh menimpa anak perempuannya, yang turut terjatuh dari tempat duduknya dan kepalanya terhantuk di lantai. Di hospital, Marina didapati mengalami patah pinggul dan memerlukan pembedahan, sementara anak perempuannya mengalami gegaran di kepala. Kedua-duanya terpaksa dimasukkan ke hospital selama 7 hari.

Oleh sebab penghospitalan ini adalah berpunca daripada kecederaan yang disebabkan oleh kemalangan yang berlaku di rumah yang diinsuranskan, Marina dan anak perempuannya masing-masing layak menerima manfaat penghospitalan selama 7 hari mereka berada di hospital.

Jumlah pembayaran tuntutan: RM175 sehari selama 7 hari untuk 2 orang yang diinsuranskan = RM2,450

Dengan Perlindungan Tambahan **Manfaat Kesulitan Penghospitalan**, Marina dan ahli keluarganya mendapat bantuan kewangan sepanjang tempoh penghospitalan mereka.

Untuk maklumat lebih lanjut tentang **Manfaat Kesulitan Penghospitalan MSIG**, sila hubungi Penasihat Insurans MSIG anda atau layari www.msig.com.my.

Penerangan tentang perlindungan adalah ringkasan pendek untuk rujukan cepat dan mudah. Terma dan syarat tepat yang tertakluk terdapat dalam Dokumen Polisi.

Nota: Sekiranya terdapat sebarang konflik mengenai kandungan di antara versi Bahasa Inggeris dengan terjemahannya, versi Bahasa Inggeris adalah sah di sisi undang-undang.

MSIG Insurance (Malaysia) Bhd
No. Pendaftaran 197901002705 (46983-W)
Pusat Khidmat Pelanggan:
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50250 Kuala Lumpur
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Laman Web: www.msig.com.my
 www.facebook.com/MSIGMY

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MSIG HOSPITALISATION INCONVENIENCE BENEFIT ADD-ON FORM

Home Insurance Policy No. / No. Polisi Insurans Rumah:

Tick (✓) whichever applicable. / Tandakan (✓) untuk yang berkaitan.

Hospitalisation Inconvenience Benefit*/ Manfaat Kesulitan Penghospitalan*	Plan 1 / Pelan 1 RM175 a day / sehari	Plan 2 / Pelan 2 RM275 a day / sehari	Plan 3 / Pelan 3 RM375 a day / sehari
No. of persons per household / Bilangan orang di setiap rumah	Annual Premium inclusive of 8% Service Tax (RM) / Premium Tahunan termasuk Cukai Perkhidmatan 8% (RM)		
1	RM 16.20	RM 32.40	RM 48.60
2	RM 27.00	RM 54.00	RM 81.00
3	RM 37.80	RM 81.00	RM 118.80
4	RM 54.00	RM 102.60	RM 156.60
5	RM 64.80	RM 124.20	RM 189.00
6	RM 75.60	RM 151.20	RM 226.80

	Name (Underline Surname) / Nama (Gariskan Nama Keluarga)	I.C. No. (New) / Passport No. / No. K.P. (Baharu) / No. Pasport	Date of Birth / Tarikh Lahir	Mobile / Telefon Bimbit
1.				
2.				
3.				
4.				
5.				
6.				

I confirm that the abovementioned family members are residing in the insured home and every member is between the ages of 15 days and 75 years. / Saya mengesahkan bahawa ahli keluarga yang dinamakan tinggal di rumah yang diinsuranskan dan setiap orang berumur antara 15 hari hingga 75 tahun.	☐ Yes / Ya
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* Terms and conditions apply. / Tertakluk kepada terma-terma dan syarat-syarat.

PAYMENT BY CREDIT CARD / BAYARAN DENGAN KAD KREDIT

If paying by Credit Card / Jika membayar dengan Kad Kredit

Visa or MasterCard only / Visa atau MasterCard sahaja

Card No. / No. Kad

Name on Credit Card / Nama atas Kad Kredit

☐ Visa ☐ MasterCard

Expiry / Tarikh Luput

Total to charge / Jumlah yang akan dicaj RM

Name / Nama

I.C. No. (New) / No. K.P. (Baharu)

Signature /Tandatangan

Date / Tarikh



DECLARATION BY PROPOSER/INSURED / PENGAKUAN OLEH PENCADANG/PIHAK DIINSURANSKAN

I/We have read and fully understand the product benefits, key terms and conditions, exclusions, premium, fees and charges that I/we have to pay.

I/We to the best of my/our knowledge hereby confirm that the statements contained in this proposal form are true and correct and I/we have not concealed, misrepresented or misstated any material fact.

I/We agree to accept insurance subject to the terms and conditions of the Company's policy and that the insurance will not be in force until the proposal has been accepted by the company, except to the extent of any official cover note which may be issued.

I/We hereby declare that any of my/our personal information collected or held by the Company is provided with my/our consent for it to be used, processed and disclosed to individuals or organisations related or associated with MS&AD Insurance Group (in and outside of Malaysia) including inter-departments within the Company or any selected third party service providers such as insurance or reinsurance companies, broking firms, loss adjusting companies, claims or forensic investigations companies, law firms, credit reference companies, any service provider appointed by governing authority/association/federation of insurance companies, association or federation of insurance companies or any corporate entities or governmental and judicial bodies or regulators to whom the Company is obliged to disclose under the requirement of any law relating to the Company or any of its affiliates or partners.

I/We further declare and confirm that I/we have obtained the consent of the person(s) named herein and that he/she/they has/have authorised me/us to disclose his/her/their personal information on his/her/their behalf.

I/We understand that I am/we are entitled to obtain access to and to request correction of my/our personal information held by the Company. I/We also understand that I am/we are entitled to inform the Company to cease processing my/our personal information concerning me/us for the purpose of future cross marketing exercises and that such request can be made to the Company.

Please tick (✓) if you want to receive information about future product launches/promotions as well as those of selected third parties.

- ☐ Yes, please send me information about future product launches/promotions by:
- ☐ Telephone
 - ☐ E-mail
 - ☐ Post
 - ☐ SMS
- ☐ No, please do not send me any information about future product launches/promotions.

Saya/Kami telah membaca dan memahami sepenuhnya manfaat produk, terma dan syarat utama, pengecualian, premium, yuran dan caj yang harus saya/kami bayar.

Saya/Kami sepanjang pengetahuan saya/kami mengesahkan bahawa segala kenyataan yang terkandung di dalam borang cadangan ini adalah benar dan betul dan saya/kami tidak menyembunyikan, memutarbelitkan atau menyalahnyatakan sebarang fakta material.

Saya/Kami bersetuju menerima perlindungan insurans ini bergantung kepada syarat-syarat dan peraturan polisi Syarikat dan perlindungan insurans ini tidak akan dikuatkuasakan sehingga diluluskan oleh pihak Syarikat, kecuali sehingga notis perlindungan rasmi diisukan.

Saya/Kami dengan ini mengaku bahawa mana-mana maklumat peribadi saya/kami yang dikumpul atau dipegang oleh Syarikat diperuntukkan kepada individu atau organisasi yang berkaitan atau dikaitkan dengan MS&AD Insurance Group (di dalam dan di luar Malaysia) termasuk antara jabatan dalam Syarikat atau mana-mana penyedia perkhidmatan pihak ketiga yang dipilih termasuk insurans atau syarikat yang diinsuranskan semula, firma broker, syarikat pelaras kerugian, tuntutan atau syarikat penyiasatan forensik, firma guaman, syarikat-syarikat rujukan kredit, mana-mana penyedia perkhidmatan yang dilantik oleh pihak berkuasa/persatuan atau syarikat insurans bersekutu, persatuan/persatuan syarikat insurans bersekutu atau mana-mana entiti korporat atau badan-badan kerajaan dan kehakiman atau pengawal selia dengan siapa Syarikat dimestikan untuk mendedahkan di bawah keperluan mana-mana undang-undang berkaitan dengan Syarikat atau mana-mana sekutu atau rakan kongsi.

Saya/Kami mengaku dan mengesahkan bahawa saya/kami telah memperolehi persetujuan penama yang dinamakan di sini dan yang beliau/mereka telah membenarkan saya/kami mendedahkan maklumat peribadi beliau/mereka bagi pihak beliau/mereka.

Saya/Kami faham bahawa saya/kami berhak memperoleh akses kepada dan meminta pembetulan maklumat peribadi saya/kami seperti yang dipegang oleh Syarikat. Saya/Kami juga faham bahawa saya/kami berhak memberitahu Syarikat untuk menghentikan pemprosesan mana-mana maklumat peribadi berkenaan saya/kami untuk tujuan latihan pemasaran di masa hadapan dan permintaan sedemikian boleh dibuat kepada Syarikat.

Sila tandakan (✓) sekiranya anda ingin menerima maklumat mengenai pelancaran/promosi produk pada masa hadapan dan mengenai pihak ketiga yang telah dilantik.

- ☐ Ya, sila hantar kepada saya maklumat mengenai pelancaran/promosi produk pada masa akan datang.
- ☐ Telefon
 - ☐ E-mel
 - ☐ Pos
 - ☐ SMS
- ☐ Tidak, sila jangan hantar kepada saya maklumat mengenai pelancaran/promosi produk pada masa akan datang.

Signature of Proposer/Insured
Tandatangan Pencadang/Pihak Diinsuranskan

Date / Tarikh

Name of Proposer/Insured
Nama Pencadang/Pihak Diinsuranskan

Privacy Notice: Kindly read our Privacy Notice at www.msia.com.my for details.

Notis Privasi: Sila Baca Notis Privasi kami di www.msia.com.my untuk maklumat lanjut.

Note: In the event of a conflict between English and the translated versions of this Proposal Form and Declaration, the English version shall prevail.

Catatan: Jika terdapat sebarang konflik di antara versi Bahasa Inggeris dengan terjemahannya, Borang Cadangan dan Pengakuan Pencadang versi Bahasa Inggeris akan diutamakan.