



**MSIG Insurance (Malaysia) Bhd**  
 Registration No. 197901002705 (46983-W)  
 Head Office: 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)  
[www.msig.com.my](http://www.msig.com.my)  
 A Member of **MS&AD** INSURANCE GROUP

**PERSONAL ACCIDENT INSURANCE NOMINATION FORM**

Policy No.	
Name of Proposer / Insured	

**IMPORTANT NOTICE - PLEASE READ BEFORE YOU MAKE YOUR NOMINATION**

Pursuant to Schedule 10 of Financial Services Act 2013:

- a. a nomination made by a non-Muslim policy owner creates a trust in favour of the nominee of the policy moneys payable upon the death of the policy owner, if (i) the nominee is his spouse or child; or (ii) the nominee is his parent (if there is no spouse or child living at the time making the nomination);
- b. if your intention is for your nominee (other than spouse, child or parent) to receive the policy benefits, you have to assign the policy benefits beneficially. You may request for an Assignment Form from MSIG;
- c. a nominee of a Muslim policy owner upon receipt of the policy moneys shall distribute the policy moneys in accordance with Islamic law;
- d. the nomination must be witnessed by a witness who must be 18 years old and above, of sound mind and not a named nominee herein;
- e. the nomination you made will be carried forward on subsequent renewal(s) of this policy unless changed by you;
- f. for full details on power to make nomination, please refer to Schedule 10 of Financial Services Act 2013.

Where a trust is created, you should appoint someone other than yourself as trustee for the policy moneys. Where no trustee is appointed, the nominee(s) competent to contract shall be the trustee(s). Where the nominee(s) is/are not competent to contract, the parent of the incompetent nominee other than yourself as Proposer / Insured shall be the trustee. If no surviving parent, the Public Trustee or a trust company nominated by you shall be the trustee.

No trust is created for a Muslim Insured/policyholder, therefore, a nominee of a Muslim Insured/policyholder shall distribute the policy moneys according to Islamic Law.

**This Nomination Form must be fully completed, signed, witnessed and returned to MSIG, failing which, the nomination may be deemed invalid and may eventually result in a delay in the payment of policy moneys.**

I, the above named Proposer/Insured hereby nominate the following individual(s) as my nominee(s) to receive the policy moneys payable upon my death under the above Policy including renewal (if the above Policy is renewed):

NOMINEE 1	
Name	_____
NRIC No.	_____ - _____ Old IC No. / Others _____
Date of Birth	<input type="text" value="D"/> <input type="text" value="D"/> / <input type="text" value="M"/> <input type="text" value="M"/> / <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="checkbox"/> Male <input type="checkbox"/> Female Nationality _____
Relationship	_____ % of Share _____
Address	_____ _____ _____ Postcode _____

**NOMINEE 2**

Name

NRIC No.

Old IC No. / Others

Date of Birth

D | D | / | M | M | / | Y | Y |

 Male Female

Nationality

Relationship

% of Share

Address

Postcode

**NOMINEE 3**

Name

NRIC No.

Old IC No. / Others

Date of Birth

D | D | / | M | M | / | Y | Y |

 Male Female

Nationality

Relationship

% of Share

Address

Postcode

**NOMINEE 4**

Name

NRIC No.

Old IC No. / Others

Date of Birth

D | D | / | M | M | / | Y | Y |

 Male Female

Nationality

Relationship

% of Share

Address

Postcode

**APPOINTMENT OF TRUSTEE(S)**

I hereby appoint the following Trustee(s)/additional Trustee(s) to receive such money payable under this policy upon my death and the receipt by the Trustee(s) shall be a complete discharge to MSIG from all liability in respect of the policy moneys so paid to them. I reserve the right to revoke and reappoint the Trustee(s) at any time at my sole discretion without the consent of the Trustee(s).

IMPORTANT: Proposer / Insured is not allowed to appoint himself/herself as the Trustee.

**TRUSTEE 1**

Name

NRIC No.

Old IC No. / Others

Date of Birth

| D | D | / | M | M | / | Y | Y |

 Male Female

Nationality

Relationship

Address

Postcode

I/We hereby agree to act as Trustee(s) and my/our appointment is subject to the absolute right of revocation of my/our appointment by the Proposer / Insured of the above mentioned policy.

Signature

Date

**TRUSTEE 2**

Name

NRIC No.

Old IC No. / Others

Date of Birth

| D | D | / | M | M | / | Y | Y |

 Male Female

Nationality

Relationship

Address

Postcode

I/We hereby agree to act as Trustee(s) and my/our appointment is subject to the absolute right of revocation of my/our appointment by the Proposer / Insured of the above mentioned policy.

Signature

Date

(To be completed only if the Proposer / Insured is a non-Muslim and the nominee(s) is/are the Proposer / Insured's husband, wife and/or child, or parent when there is no husband or wife or child living at the time of making this nomination).

**SIGNATURE OF PROPOSER / INSURED**

Signature of Proposer / Insured

Signature of Witness\*

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

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

NRIC No. : \_\_\_\_\_

NRIC No. : \_\_\_\_\_

Contact No. : \_\_\_\_\_

Contact No. : \_\_\_\_\_

Date : \_\_\_\_\_

Date : \_\_\_\_\_

\*Note: A witness shall be of age 18 years and above, of sound mind and not the nominee.

IMPORTANT NOTICE: THIS FORM HAS TO BE RECEIVED BY **MSIG Insurance (Malaysia) Bhd** DURING THE LIFETIME OF THE PROPOSER / INSURED. A copy of this form has this day been filed at the Head Office of MSIG Insurance (Malaysia) Bhd.



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## BORANG PENAMAAN UNTUK INSURANS KEMALANGAN DIRI

Nombor Polisi	
Nama Pencadang / Pihak Diinsurankan	

### NOTIS PENTING - SILA BACA SEBELUM MEMBUAT PENAMAAN ANDA

Menurut Jadual 10 Akta Perkhidmatan Kewangan 2013:

- suatu penamaan yang dibuat oleh pemunya polisi yang bukan beragama Islam hendaklah mewujudkan suatu amanah atas penama bagi wang polisi yang kena dibayar atas kematian pemunya polisi, sekiranya (i) penama itu adalah suaminya atau isterinya, atau anaknya, atau (ii) penama itu adalah ibu bapanya (jika tiada suami atau isteri atau anak yang masih hidup pada masa membuat penamaan);
- sekiranya niat anda adalah bagi penama anda (selain suami atau isteri, anak atau ibu bapa anda) untuk menerima manfaat polisi, anda perlu menyerahkan manfaat polisi itu secara benefisial. Anda boleh meminta Borang Penyerahhakkan daripada MSIG;
- seorang penama pemunya polisi yang beragama Islam apabila menerima wang polisi hendaklah mengagihkan wang polisi mengikut undang-undang Islam;
- penamaan ini hendaklah disaksikan oleh seorang saksi yang mesti berumur 18 tahun dan ke atas, yang sempurna akal dan bukanlah seorang penama yang dinamakan di sini;
- penamaan yang anda buat akan dibawa ke hadapan untuk pembaharuan polisi berikutnya kecuali diubah oleh anda;
- untuk maklumat lengkap tentang kuasa untuk membuat penamaan, sila rujuk kepada Jadual 10 Akta Perkhidmatan Kewangan 2013.

Di mana amanah diwujudkan, anda harus melantik seseorang selain diri anda sebagai pemegang amanah untuk wang polisi. Jika tiada pemegang amanah dilantik, penama yang kompeten untuk membuat kontrak hendaklah menjadi pemegang amanah. Jika penama tidak kompeten untuk membuat kontrak, ibu bapa kepada penama yang tidak kompeten selain daripada anda sebagai pemilik polisi hendaklah menjadi pemegang amanah. Jika tiada ibu bapa yang masih hidup, Pemegang Amanah Awam atau syarikat amanah yang dicalonkan oleh anda hendaklah menjadi pemegang amanah.

Tiada amanah diwujudkan untuk Orang Diinsurankan/pemegang polisi Islam, oleh itu, penama Orang Diinsurankan/pemegang polisi Islam hendaklah mengagihkan wang polisi mengikut Undang-undang Islam.

**Borang Penamaan ini hendaklah dilengkapkan sepenuhnya, ditandatangani, disaksikan dan dikembalikan kepada MSIG, jika tidak, penamaan itu dianggap tidak sah dan akhirnya boleh menyebabkan kelewatan dalam membayar wang polisi.**

Saya, Pencadang / Pihak Diinsurankan yang dinamakan di atas dengan ini menamakan individu berikut sebagai penama saya untuk menerima wang polisi yang kena dibayar atas kematian saya di bawah Polisi di atas termasuk pembaharuan (jika Polisi di atas diperbaharui):

PENAMA 1	
Nama	
No. KP	No. KP Lama/ Lain-lain
Tarikh Lahir	<input type="checkbox"/> Lelaki <input type="checkbox"/> Perempuan Kewarganegaraan
Hubungan	% Bahagian
Alamat	
	Poskod



