

**STAMP
DUTY
PAID**

BILL PROTECT MASTER POLICY

This is **Your** Bill Protect Master Policy. Please read it carefully and if **You** find any information contained herein as incorrect, immediately return it to **Us** for correction.

Your Policy comprises this document and any endorsement. They should be read as one document and any word or expression which has a particular meaning shall have the same meaning wherever it may appear throughout the Policy.

The written proposal and the declaration submitted by **You** shall form the contract of this insurance. The conditions appearing in this Policy or in any endorsement are part of this contract and must be complied with by **You** and/or the **Insured Person** before **We** pay a claim.

Our Agreement

STATEMENT Pursuant to Schedule 9 of the Financial Services Act 2013

A 'consumer insurance contract' is a contract of insurance entered into, varied or renewed by an individual wholly for purposes unrelated to **Your** trade, business or profession.

Consumer Insurance Contract (Insurance wholly for purpose unrelated to **Your** trade, business or profession)

This Policy is issued in consideration of the payment of premium as specified in the Policy Schedule and pursuant to the answers given in **Your** Proposal Form (or when **You** applied for this insurance) and any other disclosures made by **You** between the time of submission of **Your** Proposal Form (or when **You** applied for this insurance) and the time this contract is entered into. The answers and any other disclosures given by **You** shall form part of this contract of insurance between **You** and **Us**. However, in the event of any pre-contractual misrepresentation made in relation to **Your** answers or in any disclosures given by **You**, the remedies in Schedule 9 of the Financial Services Act 2013 will apply.

If **You** are required by **Us**, before this Policy is renewed or varied, to answer questions or if **You** are required to confirm or amend any matter previously disclosed by **You** to **Us** in relation to this Policy, it is **Your** duty not to make a misrepresentation when answering the questions or confirming or amending any matter previously disclosed.

You must inform **Us** of any change to the information given to **Us** in **Your** answers or in respect of any matter previously disclosed to **Us** in relation to this Policy if such changes had taken place after **You** have submitted the application for renewal or variation but before this Policy is renewed or varied.

This Policy reflects the terms and conditions of the contract of insurance as agreed between **You** and **Us**.

A 'non-consumer insurance contract' is a contract of insurance other than a consumer insurance contract.

Non - Consumer Insurance Contract (Insurance for purposes related to **Your** trade, business or profession)

This Policy is issued in consideration of the payment of premium as specified in the Policy Schedule and pursuant to the answers given in **Your** Proposal Form (or when **You** applied for this insurance) and any other disclosures made by **You** between the time of submission of **Your** Proposal Form (or when **You** applied for this insurance) and the time this contract is entered into. The answers and any other disclosures given by **You** shall form part of this contract of insurance between **You** and **Us**. In the event of any pre-contractual misrepresentation made in relation to **Your** answers or in any disclosures made by **You**, it may result in avoidance of **Your** contract of insurance, refusal or reduction of **Your** claim(s), change of terms or termination of **Your** contract of insurance.

If **You** are required by **Us**, before this Policy is renewed or varied, to answer questions or if **You** are required to confirm or amend any matter previously disclosed by **You** to **Us** in relation to this Policy, it is **Your** duty not to make a misrepresentation when answering the questions or confirming or amending any matter previously disclosed.

You must inform **Us** of any change to the information given to **Us** in **Your** answers or in respect of any matter previously disclosed to **Us** in relation to this Policy if such changes had taken place after **You** have submitted the application for renewal or variation but before this Policy is renewed or varied.

This Policy reflects the terms and conditions of the contract of insurance as agreed between **You** and **Us**.

DEFINITION

For the purpose of this Policy, the following definitions apply:

“Accident” shall mean a sudden, unforeseen and fortuitous external event happening during the Period of Insurance anywhere in the world.

“Accidental Death” shall mean any death that is due to an **Accident** and not from any natural causes.

“Boost Credit” shall mean Your digital micro-financing platform.

“Biological Agent” shall mean any pathogenic (disease producing) micro-organism(s) and/or biologically produced toxin(s) (including genetically modified organisms and chemically synthesized toxins) which causes illness and/or death in humans, animals or plants.

“Chemical Agent” shall mean any compound which, when suitably disseminated, produces incapacitating, damaging or lethal effects on people, animals, plants or material property.

“Eligible Utility Bills” shall refer to the charges incurred for electricity, water, mobile phone charges and broadband services, for which under the name of the **Insured Person** and this refers to the 1st day of billing date that falls within the Period of Insurance regardless whether the charges has been paid or unpaid by the Insured Person.

“Effective Date of Insurance” refers to the next day from the date of purchase, from which the cover under this Policy has become effective in respect of the said **Insured Person**.

“Endorsement” shall mean any alteration made to this Policy that has been agreed by **Us** in writing.

“Hospitalisation” shall mean an admission to a **Hospital** as a registered in-patient for medically necessary treatments as a result on an Accident upon recommendation of a **Physician**. A patient shall not be considered as an in-patient if the patient does not physically stay in the **Hospital** for the whole period of confinement.

“Hospital” shall mean an establishment lawfully constituted and registered as a **Hospital** for the care and treatment of sick and injured persons, and which:

- (a) has facilities for diagnosis and major surgery;
- (b) provides a twenty-four (24) hours daily nursing service by registered and graduate nurses;
- (c) is under the supervision of one or more **Physicians**; and
- (d) is not primarily a clinic, a place for alcoholics or drug addicts, a nursing, rest or convalescence home or a home for the aged or similar establishments.

“Injury” shall mean bodily injury which is caused solely and directly by an **Accident**, and independent of any other cause and excludes sickness, disease or any naturally occurring condition or degenerative disease.

“Insured Person” shall mean the Boost Credit user who is eligible to participate in this Policy and who fulfils the eligibility requirements and declared by **You** to **Us** as the subject of this insurance.

“Limb” shall mean the entire limb between the shoulder and the wrist or between the hip and the ankle.

“Loss” as used in reference to limbs shall mean physical severance or total and irrecoverable loss of use.

“Loss of hearing” shall mean total and irrecoverable loss of hearing which is medically certified as beyond remedy by surgical or other treatment.

“Loss of Limb” shall mean permanent physical severance or permanent total loss of use of the limb which caused by Injury.

“Loss of sight of eye” shall mean the total and irrecoverable loss of sight of the eye which is medically certified as beyond remedy by surgical or other treatment.

“Loss of speech” shall mean total and permanent inability to communicate verbally which is medically certified as beyond remedy by surgical or other treatment.

“Loss of Use” shall mean permanent and total loss of the use of the limb in terms of physical incapacity or disability in all aspects of daily living and not only in terms of professional or occupational incapacity or disability in the Insured Person.

“Medical Practitioner” or “Physician” or “Surgeon” shall mean a person qualified by a degree in western medicine and legally registered to practice western medicine in the geographical area of practice, and who also possess a current Annual Practising Certificate issued by the Malaysian Medical Council.

“Nuclear, chemical or biological terrorism” shall mean the use of any nuclear weapon or device or the emission, discharge, dispersal, release or escape of any solid, liquid or gaseous chemical agent and/or biological agent during the period of this insurance by any person or group(s) of persons, whether political, religious or ideological purposes or reasons including the intention to influence any government and/or to put the public, or any section of the public, in fear.

“Period of Insurance” shall mean thirty (30) days period, which starts on the Effective Date of Insurance for the respective Insured Person.

“Permanent Disablement” shall mean an Injury which:

- (a) falls into any of the injuries listed under Benefit (2) in the Scale of Compensation payable in percentage; and
- (b) where applicable, has lasted for a continuous period of three hundred and sixty-five (365) days from the date of the Accident with no hope of improvement at the end of that period.

“Policy” shall mean the policy wording and any other documents that may be subsequently issued to the **Policyholder** and which **We** advise as forming part of the **Policy**.

“Policyholder” shall mean Axiata Digital Capital Sdn Bhd (Company No. 201601006143 (1177069-D)). The **Policyholder** shall also be referred to as the **Insured**.

“Sum Insured” shall mean the amount payable for **Accidental Death, Permanent Disablement** and/or **Bill Pay Protect** as specified in the Schedule of Benefits.

“Terrorism” shall mean an act or acts, of any person, or group(s) of person, committed for political, religious, ideological or similar purposes with the intention to influence any government and/or to put the public, or any section of the public, in fear. **Terrorism** can include, but not be limited to, the actual use of force or violence and/or the threat of such use. Furthermore, the perpetrators of **Terrorism** can either be acting alone, or on behalf of, or in connection with any organisation(s) or government(s).

“Use of any Nuclear Weapon” shall mean the use of any explosive nuclear weapon or devise or the emission, discharge, dispersal, release or escape of fissile material emitting a level of radioactivity capable of causing incapacitating disablement or death amongst people or animals.

“We/Us/Our/The Company” shall mean Great Eastern General Insurance (Malaysia) Berhad (Company No. (198301007025 (102249-P)) a company incorporated in Malaysia, registered under Financial Services Act 2013 and regulated by Bank Negara Malaysia.

“You/Your/Insured” shall mean the **Policyholder**.

ELIGIBILITY

The Insured Person must fulfill the following eligibility requirements:

- a) Aged not less than sixteen (16) years old and not more than eighty (80) years old;
- b) A Malaysian citizenship or foreigners legally residing in Malaysia; and
- c) Boost Credit user as declared by the Policyholder to the Company.

SCOPE AND LIMITS OF COVER

Termination of Coverage

An insurance coverage in respect of an Insured Person under this Policy shall automatically cease when any of the following events takes place: -

- (a) Upon cancellation of the coverage by the Insured Person to Us in writing;
- (b) When this Policy is terminated in accordance with the terms and conditions of this Policy;
- (c) Upon expiry of a Period of Insurance;
- (d) When the Insured Person ceased to satisfy the eligibility requirements as set out herein; or
- (e) When Benefit (1) or (2) becomes payable under this Policy.

SCHEDULE OF BENEFITS

No	Benefits	Sum Insured (RM)
1	Accidental Death	10,000
2	Permanent Disablement	10,000
3	Bill Pay Protect in the event of: a) Accidental Death; or b) Permanent Disablement; or c) Hospitalisation for more than four (4) days due to an Accident. <i>(Reimbursement under Bill Pay Protect is subject to the utility bill(s) being registered under the name of the Insured Person and the 1st day of billing date falling within the Period of Insurance)</i>	Up to 1,000

Benefit (1) - Accidental Death

We will pay the Sum Insured as stipulated in the Schedule of Benefits in one lump sum payment if, during the Period of Insurance, an Insured Person sustains an Injury which results in Accidental Death within three hundred and sixty-five (365) days from the date of Accident.

Benefit (2) - Permanent Disablement

We will pay the Sum Insured as stipulated in the Schedule of Benefits in one lump sum payment if, during the Period of Insurance, an Insured Person sustains an Injury which results in Permanent Disablement within three hundred and sixty-five (365) days from the date of Accident. The benefits payable as described in the Scale of Compensation below.

SCALE OF COMPENSATION

Description	Percentage (%) of Compensation Amount Shown in the Schedule of Benefits
Loss of sight of both eyes	100%
Loss of two limbs	100%
Loss of both hands, or of all fingers and both thumbs	100%
Loss of speech and hearing	100%
Loss of arm at shoulder	100%
Loss of arm between shoulder and elbow	100%
Loss of arm between elbow and wrist	100%
Loss of arm at wrist	100%
Loss of leg at hip	100%
Loss of leg between knee and hip	100%
Loss of leg below knee	100%

Benefit (3) – Bill Pay Protect

We will reimburse the Insured Person up to RM1,000 for any Eligible Utility Bills upon occurrence of the following event during the Period of Insurance:

- a) Accidental Death; or
- b) Permanent Disablement; or
- c) Hospitalisation for more than four (4) days due to an Accident.

GENERAL EXCLUSIONS

1. Unless the consent of the Company shall have previously been obtained and recorded by endorsement hereon, this Policy does not cover Accidental Death, Permanent Disablement or Bill Pay Protect consequent upon the Insured Person:
 - (a) engaging in winter sports, ice hockey, yachting, sky diving, horse riding, hang-gliding, hunting, steeple-chasing, mountaineering, parachuting, polo, boxing, wrestling, racing of any kind including rallies, motorcross or any form of racing competition (except any form of racing on foot), speed demonstration or trial tests of any form of motor vehicle or aircraft or vessel, go-karting, scuba or skin diving of any kind including the use of aqua-lungs;
 - (b) engaging in or taking part in professional or semiprofessional sports;
 - (c) whilst serving in any branch of the armed forces (whether voluntary or otherwise) including police of any country or international authority (whether in time of peace or war);
 - (d) whilst serving in any firefighting services or agencies (whether voluntary or otherwise);
 - (e) whilst committing or attempting to commit any criminal act or illegal activities; or
 - (f) any field operation, undertaken by the military, police or security services, fire-fighting, airline as pilot or aircrew or mining of miners (whether voluntarily or otherwise).
2. This Policy does not cover Accidental Death, Permanent Disablement or Bill Pay Protect directly or indirectly caused by:
 - (a) war, invasion, act of foreign enemy, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection, riot, strike, civil commotion, military or usurped power and in the event of any claim hereunder the Insured shall when so required by the Company prove that the claim arose independently of and was in no way connected with or occasioned by or contributed to by or traceable to any of the said occurrences or any consequence thereof and in default of such proof the Company shall not be liable to make any payment in respect of such a claim;
 - (b) the Insured Person being in or upon or entering or descending from aircraft of any kind or caused by or resulting from a descent or fall from such aircraft except in respect of the Insured Person's journeys as a fare-paying passenger (the word 'passenger' does not include any member of the aircrew or any person involved in any technical operation or navigation in or upon an aircraft) over established air routes in fully licensed standard type aircraft owned and/or operated by recognised commercial airlines;
 - (c) self-inflicted injury, suicide or attempted suicide (whether felonious or not), provoked murder or assault, intoxication by alcohol or drugs, insanity, any illness or diseases;
 - (d) pregnancy, child-birth, miscarriage or any complications thereof notwithstanding that such event may have been accelerated or induced by accident;
 - (e) pre-existing physical or mental defect or infirmity; or
 - (f) HIV (Human Immunodeficiency Virus) and/or HIV related illness including AIDS (Acquired Immune Deficiency Syndrome) and/or any mutant derivatives or variation thereof.
3. This Policy does not cover Accidental Death, Permanent Disablement or Bill Pay Protect directly or indirectly caused or contributed by or arising from:
 - (a) ionising radiations or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel. Solely for the purpose of this exclusion combustion shall include any self-sustaining process of nuclear fission;
 - (b) nuclear weapons material.

(c) any act of Terrorism; or

(d) any Nuclear, chemical or biological terrorism.

PROVIDED FURTHER that the due observance and fulfilment of the terms conditions and endorsements of this Policy in so far as they relate to anything to be done or complied with by the Insured and/or the Insured Person shall be conditions precedent to any liability of the Company to make any payment under this Policy.

CONDITIONS APPLYING TO THE WHOLE POLICY

1. No payment in respect of any premium shall be deemed to be payment to the Company unless there is a confirmation of payment transaction made through payment gateway and such premium collected must be received by the Company within thirty (30) days from the Effective Date of Insurance.
2. All notices required to be given by the Insured and/or Insured Person to the Company must be in writing addressed to the nearest local branch and no alteration in the terms of this Policy nor any endorsement thereon, will be held valid unless the same is signed or initialed by an authorised representative of the Company.
3. An Insured Person may nominate a natural person or a registered trustee corporation to receive the policy moneys payable upon his/her death. A nomination may be made at any time during the Period of Insurance. The nominee named in the nomination form or any future amendments the Insured Person makes, will receive the death benefits in accordance with the provision of Financial Services 2013. The Insured Person may revoke or change the nominee at any time by giving the Company a written notice. The written notice must be received and registered by the Company during the Insured Person's lifetime before any loss occurrence. The revocation and change of nominee will take effect from the date the Company has received the new nomination.
4. We reserve the right to amend the terms and provisions of this Policy by giving a thirty (30) days prior notice in writing by ordinary post to Your last known address in Our records, and such amendment will be effective after thirty (30) days from our notification date.
5. This Policy may be cancelled at any time by the Policyholder or Us by giving the other party thirty days (30) written notice of cancellation at the last known business address. The insurance coverage in respect of an Insured Person may be cancelled at any time by giving the Company notice in writing, in which case, the insurance coverage on the Insured Person shall continue until the end of the Period of Insurance. Any cancellation of the insurance coverage shall not be entitled to a refund of premium
6. If the premium for this Policy has been calculated on any estimates furnished by the Insured and/or Insured Person, the Insured and/or Insured Person shall keep an accurate record containing all particulars relative thereto and shall at all times allow the Company to inspect such record. The Insured shall within one (1) month from the expiry Period of Insurance furnish to the Company such particulars and information as the Company may require. The premium for such period shall thereon be adjusted and the difference paid by or to the Insured and/or Insured Person, as the case may be.
7. The Company shall unless otherwise expressly provided by endorsement on this Policy be entitled to treat the Insured as the absolute owner of the Policy and shall not be bound to recognise any equitable or other claim to or interest in the Policy and the receipt of the Insured alone shall be an effectual discharge.
8. If the proposal or declaration of the Insured Person is untrue in any respect or if any material fact affecting the risk be incorrectly stated therein or omitted therefrom or if this insurance or any renewal thereof shall have been obtained through any misstatement, misrepresentation or suppression or if any claim made shall be fraudulent or exaggerated or if any false declaration or statement shall be made in support thereof then in any of these cases the insurance for the respective Insured Person under this Policy shall be void.
9. Upon the happening of any Accident likely to give rise to a claim under this Policy, the Insured Person shall within thirty (30) days after the happening of the Accident give notice to the Company with full particulars of the Accident and injuries and shall as soon as possible instruct the Insured Person to procure and act on proper medical or surgical advice.

The Insured Person shall at the expense of the Insured Person furnish to the Company all such certificates information and evidence as may be required by the Company and the Insured Person shall whenever reasonably required to do so

submit to medical examination on behalf of the Company. In the event of the Accidental Death of the Insured Person the Company shall be entitled to have a post mortem examination at its own expense and notice shall when practicable be given to the Company before interment or cremation stating the time and place of any inquest appointed.

10. All the benefits payable under this Policy shall be paid to the Insured Person. In the event of Insured Person's Accidental Death, where the Insured Person has currently valid nominee(s) with or without trustee(s) under this Policy, the Sum Insured for Accidental Death will be paid in accordance with the provisions of the Financial Services Act 2013.
11. For the avoidance of doubt, in the event the Insured Person becomes entitled for reimbursement of all or part of the benefit under this Policy from any other source, or if there is in place any other insurance against the events covered under this Policy, The Company will only be liable for the excess of the amount recoverable from such other source or insurance.
12. If any difference arises as to the amount of the Company's liability under this Policy, such difference shall independently of all other questions be referred to the decision of an arbitrator to be appointed in writing by both parties or if they cannot agree upon a single arbitrator, to the decision of two arbitrators of whom one shall be appointed in writing by each of the parties within two (2) calendar months after having been required to do so in writing by the other party and in case of disagreement between the arbitrators, the difference shall be referred to the decision of an umpire who shall have been appointed in writing by the arbitrators before entering on the reference, and an award by arbitration shall be a condition precedent to any right of action against the Company as regards any dispute regarding the amount of the Company's liability under this Policy.
13. If the Company shall disclaim liability to the Insured Person for any claim hereunder, in no case shall the Company be liable in respect of such claim after the expiration of twelve (12) months from the date of such disclaimer unless the claim is the subject of pending court action or arbitration.
14. The Company shall only be liable and recognised one (1) insurance coverage at any one time, for each Insured Person.
15. This Policy is governed by and shall be construed in accordance with the laws of Malaysia.

EXTENSION OF COVERAGE

The benefits of this Policy are extended to include the following circumstances:

STRIKE, RIOT AND CIVIL COMMOTION CLAUSE

It is agreed and understood that subject to the terms, exclusions, limitations and conditions contained in the Policy or endorsed thereon and subject to the Insured Person having paid the agreed extra premium, this Policy shall be extended to cover Accidental Death, Permanent Disablement and Bill Pay Protect or any other loss as within defined directly or indirectly caused by persons taking part in labour disturbances, riots or civil commotions or by persons of malicious intent acting on behalf of or in connection with any political organisation, provided always that this extension shall not apply whilst the Insured Person is taking part in any disturbance of public peace.

MOTORCYCLING CLAUSE

In consideration of premium having been charged, the insurance under this Policy extends to cover Accidental Death, Permanent Disablement or Bill Pay Protect resulting from use or riding as pillion on a motorcycle, but excluding Accidental Death, Permanent Disablement or Bill Pay Protect directly or indirectly as a result of participating in any motor sports, racing or competition, speed tests and/or reliability trails.

It is a condition precedent to any liability of the Company to make payment under this clause that the Insured Person at the time of accident wears an approved crash helmet and possesses a valid driving licence if he or she is the rider of the motorcycle.

AGE WARRANTY

Warranted that this Policy does not cover Accidental Death, Permanent Disablement or Bill Pay Protect to any Insured Person hereby insured who at the time of accident occurring:

- (a) has not attained the age of sixteen (16) years or
- (b) has attained the age of eighty (80) years.

Subject to the terms and conditions of this Policy.

DISAPPEARANCE CLAUSE

It is agreed and understood that subject to the terms, exclusions, limitations and conditions contained in the Policy or endorsed thereon, if after a period of one (1) year has elapsed and the Company having examined all evidence available, shall have no reason to suppose other than that an Accident has occurred and that a Court of Law has pronounced such Insured Person to be missing and legally found dead, the disappearance shall be considered to constitute a claim under this Policy. It is further agreed and understood that if at any time after payment has been made and the Insured Person is found to be alive, any sums paid by the Company in settlement of claim shall be refunded to the Company.

EXPOSURE CLAUSE

It is agreed and understood that subject to the terms exclusions limitations and conditions contained in the Policy or endorsed thereon, this Policy covers claims arising out of accidental Injury caused by exposure to the elements of nature as a result of an Accident insured hereunder, provided that in the event of death of the Insured Person caused by exposure to the elements, a properly constituted judicial body of enquiry shall affirm that the Insured Person has died of exposure after having sustained accidental Injury arising from an insured event..

HARMFUL INSECTS/SNAKES/ANIMAL BITES CLAUSE

It is hereby declared and agreed that this Policy is extended to cover Accidental Death, Permanent Disablement or Bill Pay Protect to Insured Person arising from harmful insects, snakes or animal bites.

UNPROVOKED MURDER, ASSAULT OR ATTEMPTED MURDER CLAUSE

It is hereby declared and agreed that this Policy is extended to cover the risk of unprovoked Accidental Death, Permanent Disablement or Bill Pay Protect to the Insured Person directly or indirectly caused by any Act of Violence by any person against the Insured Person provided that the Insured Person has not in any way caused and/or contributed to the Act of Violence.

For the purpose of this clause, "Act of Violence" means murder, attempted murder or physical assault.

NATURAL DISASTER

It is hereby declared and agreed that this Policy is extended to cover the Insured Person as within mentioned caused as a result of natural disasters including flood, fire, lighting, tidal waves, hurricane, cyclone, earthquake, windstorm, volcanic eruption and typhoon.

PREMIUM WARRANTY

It is a fundamental and absolute special condition of this contract of insurance that the premium due must be paid and received by the Company within thirty (30) days from the inception date of this Policy/Endorsement/Renewal Certificate/Insurance Coverage.

If this condition is not complied with then this contract is automatically cancelled and the Company shall be entitled to the pro rata premium for the period they have been on risk.

Subject otherwise to the terms and conditions of this Policy.

GOVERNMENT TAX

Please be informed that the premiums on this policy are subject to the Government tax prevailing during the term of this policy.

Your obligation to pay the prevailing Government tax shall form part of the terms and conditions in Your insurance policy.

SANCTION LIMITATION AND EXCLUSION CLAUSE (SANC)

At the sole discretion of the Company, the Company shall not be deemed to provide cover and shall not receive any payment(s) under the policy; or be liable to pay any sums (including but not limited to payment of claims, refund of premiums, surrender or cancellation payments); or provide any benefit under the policy; to the extent that the provision of such cover, payment of such sum or provision of such benefit would expose the Company to any sanction, prohibition or restriction under any laws and/or regulations, administered by any governmental, regulatory or competent authority, or any law enforcement in any country.

COMPLAINT HANDLING UNIT

You may refer your complaint pertaining to any insurance related matters to Our Complaint Handling Unit for an amicable resolution before referring to the Ombudsman for Financial Services (OFS) (664393P) (formerly known as Financial Mediation Bureau) or BNMLINK/BNMTELELINK, Bank Negara Malaysia (BNM). In order to resolve Your complaint, it is important that You provide Us with as much information as possible when contacting Us, i.e. Your full name, address, contact number, policy number and the nature of Your complaint.

The following are the contact details of Our Complaint Handling Unit:-

Complaint Handling Unit

GREAT EASTERN GENERAL INSURANCE (MALAYSIA) BERHAD
Level 18, Menara Great Eastern, 303 Jalan Ampang, 50450 Kuala Lumpur
Telephone No. : 03-4259 7828
Fax No : 03-4813 2737
Email : gicare-my@greateasterngeneral.com

RESPONSE TO COMPLAINTS

For non-complicated case, We will respond within fourteen (14) working days from the date of receipt of the complaint.

For complicated case, We will respond within fourteen (14) days from the date of receipt of the complaint and the complainant will be updated of the progress every subsequent thirty (30) calendar days until it is resolved.

OMBUDSMAN FOR FINANCIAL SERVICES OR BANK NEGARA MALAYSIA

If You are not satisfied with the response or the decision of Our Complaint Handling Unit, You may submit Your complaint either to OFS within six (6) months from the date of Our Complaint Handling Unit's final decision, or to BNM. Kindly check with Our Complaint Handling Unit on the proper avenue for dealing with Your complaint. The following are the contact details of OFS or BNM:-

Authority	BNMLINK/BNMTELELINK, Bank Negara Malaysia (BNM)	Ombudsman for Financial Services (OFS)
Address	Laman Informasi Nasihat dan Khidmat (BNMLINK) (Walk-in Customer Service Centre) Ground Floor, D Block. Jalan Dato' Onn, 50480 Kuala Lumpur. Contact Centre (BNMTELELINK) Corporate Communication Department, Bank Negara Malaysia P.O. Box 10922, 50929 Kuala Lumpur.	Level 14, Main Block, Menara Takaful Malaysia, No. 4, Jalan Sultan Sulaiman, 50000 Kuala Lumpur
Telephone No	1-300-88-5465	03-2272 2811
Fax No	03-2174 1515	03-2272 1577
Email	bnmtelelink@bnm.gov.my	enquiry@ofs.org.my