



**HEAD OFFICE:** Syarikat Takaful Malaysia Berhad (131646-K)  
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## TAKAFUL *my*SME PARTNER PROPOSAL AND DECLARATION FORM (FORM A)

### Important Notes:

- Pursuant to Section 141 of the Islamic Financial Services Act 2013, you are obliged to answer all the questions required in this TAKAFUL *my*SME Partner Proposal and Declaration Form and disclose any other matter that you know to be relevant to our decision in accepting the risk and determining the rates and terms to be applied, otherwise it will result in avoidance of contract, refusal of claims or change of terms. This duty of disclosure shall continue until the time the contract is entered into, varied or renewed. You are also obligated to take reasonable care not to make a misrepresentation in answering the questions and in making the disclosure.
- You are advised to study the product disclosure sheet and marketing material in respect of the plan benefits and pay particular attention to the guaranteed and non-guaranteed benefits and your duties as a Master Certificate Owner. It is compulsory for Takaful Malaysia Sales Officer / Agent / Broker to provide a copy of the product disclosure sheet to you before you decide to participate in the plan.
- You are at liberty to participate or not to participate in any of the several products covered by this TAKAFUL *my*SME Partner Proposal and Declaration Form.
- Proof of age is required prior to payment of benefits under the plan.
- Acceptance of this proposal shall be subject to underwriting assessment and guidelines, or any other criteria that Takaful Malaysia at its discretion may impose from time to time. Upon receipt of completed document (including all additional documents arising from underwriting assessment (if any)), a certificate will be issued within thirty (30) days after your application to this proposal is accepted by Takaful Malaysia.

**INSTRUCTIONS:** Please complete this form in **CAPITAL LETTERS** and tick (✓) in boxes as appropriate. Use **BLACK INK** only.

### IMPORTANT NOTE :

In accordance with the Anti-Money Laundering, Anti-Terrorism Financing and Proceeds of Unlawful Activities Act 2001 and related Guidelines issued by Bank Negara Malaysia, the Company is required to verify the identity of its customers. In the event of insufficient proof of identification, it may result to non-acceptance of the proposal.

### PART 1: COMPANY DETAILS

Name of Employer																																																																																																					
Business/ Company Registration No.																					Type of Business																																																																																
Address of Employer																																																																																	Postcode																				
Authorised Contact Person & Designation ( 1 )																																																																																																					
Email Address																																									Tel No.																																																												
Authorised Contact Person & Designation ( 2 )																																																																																																					
Email Address																																									Tel No.																																																												

### PART 2: TAKAFUL BENEFITS

Please tick (✓) the appropriate plan(s) or benefits applied.

- |  |   |
|--|---|
| <input type="checkbox"/> Group Medical Takaful           | <input type="checkbox"/> Group Term Takaful   |
| <input type="checkbox"/> Hospitalisation & Surgical Care | <input type="checkbox"/> Death, Permanent Partial Disability & Partial Permanent Total Disability |
| <input type="checkbox"/> Outpatient Care                 | <input type="checkbox"/> Critical Illness   |

### PART 3 : DETAILS OF THE COVERAGE AND PAYMENT

- i. Period of Takaful From 

d	d	/	m	m	/	y	y	y	y
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 To Midnight 

d	d	/	m	m	/	y	y	y	y
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- ii. Contribution is to be paid annually.

### FOR OFFICE USE ONLY

#### TYPE OF APPLICATION

- New Business  
 Renewal Business

#### CHANNEL

- Corporate Agent  
 Corporate Broker  
 Corporate Direct  
 Others \_\_\_\_\_

**PART 4 : DECLARATION / CONSENT AND AQAD**

- i. I, to the best of my knowledge, hereby declare and confirm that the statements in this form are true and complete and I have not concealed, misrepresented or misstated any material fact.
- ii. I hereby acknowledge that the medical benefits attached to this proposal are subject to a 6% Goods and Services Tax (GST).
- iii. Contribution & Charges  
I hereby appoint Takaful Malaysia under this Wakalah contract to manage and invest my contribution in the manner deemed fit by Takaful Malaysia in accordance with the Shariah. I hereby acknowledge and allow Takaful Malaysia to deal with my contribution in the following manner:
  - a. To deduct a certain percentage of the contribution as Wakalah Fee to Takaful Malaysia as stated in the Schedule of Wakalah Fee below; and
  - b. To credit the balance of contribution as Tabarru' to the Group Family Takaful Account ("GFTA").
- iv. Schedule of Wakalah Fee  
Wakalah Fee : 40% of contribution  
Takaful Malaysia will charge for wakalah fee up to the percentage (%) as stated above. For the actual wakalah fee charged, please refer to the Quotation.
- v. Surplus and Deficit  
I hereby consent and acknowledge that any surplus arising from the GFTA will be determined and distributed at Takaful Malaysia's sole and absolute discretion. Distribution of surplus is not guaranteed and shall take into account the overall surplus position of the GFTA. The surplus will be distributed in form of Experience Refund to eligible Participants with good claims experience, where the Experience Refund amount (if any) distributed to each Participant shall depend on the overall claims experience of eligible certificates. Any undistributed surplus will then be kept in GFTA to provide for any unfavorable claim experience. There shall be no distribution of surplus to Takaful Malaysia. The eligibility criteria, and other terms and conditions of the Experience Refund are stated in the Quotation.  
If the GFTA is in deficit, and after having exhausted all available avenues, an interest free loan from Takaful Malaysia on Qardh will be taken. The Qardh will be repaid when the GFTA returns to surplus position and before any surplus is distributed.
- vi. Treatment of Small Payment Amounts  
I hereby agree that Takaful Malaysia will donate any amount due and payable to me including but not limited to the amount arising from claim and cancellation which is less than Ringgit Malaysia Twenty Five (RM25.00) to charity as approved by its Shariah Advisory Body. However, if I decide otherwise, then I shall submit a formal request to Takaful Malaysia.
- vii. I agree that all my personal information provided to Takaful Malaysia is provided with my consent for it to be stored, processed and disclosed by Takaful Malaysia to third parties necessary for the further processing of this proposal and any claims which may occur. I understand that I may access, amend or limit processing of my personal information by contacting Takaful Malaysia's Customer Service Centre.
- viii. I acknowledge that all the terms and features of the product have been fully explained to me and I fully understand all the said terms and features.

**This aqad will from part of the takaful contract.**

**Authorized signature for and on behalf of the Company**

Witness's Signature _____	Signature _____
Name _____	Name _____
Designation _____	Designation _____
Date _____	Date _____



**Company Stamp**

**PART 5: DECLARATION BY TAKAFUL MALAYSIA'S SALES OFFICER / AGENT / BROKER**

- i. I hereby declare that all the information contained in this form is the only information given to me by the Proposed Master Certificate Owner and I have not withheld any other information which might influence the acceptance of this proposal by Takaful Malaysia.
- ii. I have provided to the Proposed Master Certificate Owner the product disclosure sheet together with this form.
- iii. I have not made any statement, representation or promise to the Person to be Covered / Proposed Master Certificate Owner which is contrary to and/or misrepresents the terms of the certificate. Furthermore, I have not acted or conducted myself in such a way that amount to misrepresenting the terms of the certificate.
- iv. In compliance with Section 16 (2) of the Anti-Money Laundering, Anti-Terrorism Financing and Proceeds of Unlawful Activities Act 2001, I confirm that:-
  - a. Where the person is an individual, I have sighted the original myKad or valid Passport and verified the identity and details of the Proposed Master Certificate Owner; or
  - b. Where the person is a corporate body / club / society / charity, I have sighted the original constituent and identified documents; and have verified the beneficial owners and details of the Proposed Master Certificate Owner.

Signature _____	Intermediary code _____
Name _____	Email Address _____
Designation _____	Office Address _____
Date _____	_____