

Qaseh Bakti Plus

Master policy



The benefit(s) payable under eligible certificate/policy/product is(are) protected by PIDM up to limits. Please refer to PIDM's TIPS Brochure or contact FWD Insurance Berhad or PIDM (visit www.pidm.gov.my).



Need help? Call our Customer Careline:

1300 22 6262

Company : FWD Insurance Berhad (“FWD Insurance”)
Master Policy Owner : Bank Simpanan Nasional
Master Policy No. : FWD10354
Plan Name : Qaseh Bakti Plus
A Non-Guaranteed Yearly Renewable Non-Participating Group Term Life Assurance with:

- Non-*Accidental* Death Benefit; and
- *Accidental* Death Benefit; and
- Daily Hospital Cash Benefit for Non-*Accidental* related causes; and
- Daily Hospital Cash Benefit for *Accidental* related causes; and
- Additional Daily Hospital Cash Benefit if admitted to *Intensive Care Unit*.

In exchange for paying the *premium* amount as specified in the *master policy*, and, subject to the terms and conditions in this *master policy*, *certificate* and any attached *endorsements*, FWD Insurance will pay the benefits stated in the *master policy* when we approve a claim with the right proof of the event at claim.

Dated this 25 March 2024

.....
Authorised Signatory



FWD Insurance Berhad 199301022976 [27774-A]
Level 21, Mercu 2,
KL Eco City,
No. 3 Jalan Bangsar,
59200 Kuala Lumpur.

Policy Information Page

<i>Master Policy Number</i>	:	FWD10354
<i>Master Policy Owner</i>	:	Bank Simpanan Nasional
<i>Master Policy Owner's Registered Address</i>	:	Wisma BSN, 117, Jalan Ampang, 50450, Kuala Lumpur
<i>Master Policy Commencement Date</i>	:	25 March 2024
<i>Master Policy Anniversary</i>	:	On 25 March of every year
Plan Name	:	Qaseh Bakti Plus
Schedule of Benefits	:	refer to page 10
Schedule of <i>Premium</i>	:	refer to page 21
Coverage Effective Date of a <i>Certificate</i>	:	<i>Issue date</i> as stated in the <i>certificate</i>

Important Clause: This *master policy* may be renewed for another term if we agree in writing and if the terms and conditions in this *master policy* are met.

Quick reference

This is your *master policy* for your insurance *certificate*. Read it to understand your benefits as well as the important terms and conditions that apply to your insurance cover. Don't worry, we've made it as easy to read as possible.



About *master policy*

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Insurance benefits in this *master policy*

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What we don't cover

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Starting and ending the insurance coverage

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Making changes to the *master policy*

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The *certificate owner's* responsibilities under this *master policy*

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General terms and conditions applying to this *master policy*

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What the key terms in this *master policy* mean

See page 28



About *master policy*

Thank you for choosing FWD as your insurer. We want you to understand the protection you receive and feel confident about how it works.

Your Qaseh Bakti Plus insurance *certificate*

Qaseh Bakti Plus is a non-guaranteed yearly renewable non-participating group term life plan which offers insurance protection as stated in the Schedule of Benefit.



This *master policy* is in force from the *master policy commencement date*. This is stated in the Policy Information Page. Each *certificate* is in force from the *commencement date* until the *expiry date*. Those dates and other key dates are stated in the *certificate*.

If you need help, please:



contact us on our Customer Careline
1300-22-6262



refer to our website
fwd.com.my; or



get in touch by email
ask@fwd.com

This *master policy* document is part of the *certificate owner's* overall insurance contract

This *master policy* document sets out how the insurance works.

Read it to understand the benefits we provide, the things we exclude, and the terms and conditions. We recommend keeping this in a safe place, so you can find it again if you need it.

This document is only one part of the overall contract between you and us. Your contract is also made up of any *endorsements* that modify this *master policy*.

Other important documents related to your contract include:

- certificate of insurance; and
- application form from you; and
- application form from *certificate owner*; and
- policy information statements; and
- product disclosure sheets.

The English version of this *master policy* prevails over the Malay version

This *master policy* is available in both English and Malay. If there's any ambiguity or uncertainty between the two versions, we'll follow the wording in this version.



Clarity is our official language

We know that insurance can be a complicated subject. That's why we've written this *master policy* in plain language – to make it as clear as possible. It's designed to be intuitive, precise, and unambiguous.

This way, you can find what you need, understand it, and take any action you need to with confidence.

We use italics to highlight defined terms

Some of the words in this *master policy* are written in italics, *like this*. These are defined terms – they have a specific meaning when we use them in this document.



You can find a list of defined terms and their meanings on **page 28**.

When we say 'we', 'you', or 'life assured', here's who we mean

In this document, here's what we mean when we refer to different people.

- We, us, our, or ours means FWD Insurance Berhad
- You, your, or yours means the *master policy owner* as stated on the Policy Information Page in this *master policy* and *certificate* or any *endorsements*
- Life assured means the person whose life is covered under this *master policy*. This person is also the *certificate owner* as stated on the *certificate*



Insurance benefits in this *master policy*



This section describes the five benefits for this *master policy*. It sets out how they work when the *certificate owner* makes a claim.

Your insurance benefits



A benefit refers to a payment or advantage available to the *certificate owner* under certain circumstances.

While the *certificate* is in force, we'll provide the benefits outlined below. These are subject to the terms and conditions in this document and in any *endorsements* that apply.

This document is the Qaseh Bakti Plus *master policy*.

The five benefits we include in this *master policy*

Here are the five benefits included in the *master policy* and what they do.



Non-Accidental Death Benefit

we'll pay the non-*accidental* death benefit if the life assured dies not because of an *accident*



Accidental Death Benefit

we'll pay the *accidental* death benefit if the life assured dies because of an *accident*



Daily Hospital Cash Benefit for Non-Accidental related causes

we'll provide the daily cash allowance for *hospitalisation* due to non-*accidental* related causes when the life assured stays in the hospital not because of an *accident*



Daily Hospital Cash Benefit for Accidental related causes

we'll provide the daily cash allowance for *hospitalisation* due to *accidental* related causes when the life assured stays in the hospital because of an *accident*



Additional Daily Hospital Cash Benefit if admitted to Intensive Care Unit

we'll provide an additional daily cash allowance when the life assured stays in the *intensive care unit*





Non-Accidental Death Benefit

If the life assured dies not because of an *accident* while the *certificate* is in force, we'll pay the *non-accidental* death benefit based on the selected plan as stated in the *certificate* following the schedule of benefit.

We'll reduce the amount we pay by any *premium* due for the full *certificate* year if the *certificate* owner owes us.



After we've paid this benefit, we'll terminate the *certificate*.

The *certificate* owner can nominate someone to receive the Death Benefit

The *certificate* owner can nominate another person to receive the Death Benefit payment. To find out how this works, see **page 19**.



Accidental Death Benefit

If the life assured dies because of an *accident* while the *certificate* is in force, we'll pay the *accidental* death benefit based on the selected plan as stated in the *certificate* following the schedule of benefit.

We'll reduce the amount we pay by any *premium* due for the full *certificate* year if the *certificate* owner owes us



After we've paid this benefit, we'll terminate the *certificate*.





Daily Hospital Cash Benefit for *Non-Accidental* related causes

If the life assured stays in the hospital not because of an *accident* while the *certificate* is in force, we'll pay the daily hospital cash benefit for *non-accidental* related causes for each day of admission based on the selected plan as stated in the *certificate* following the schedule of benefit.



Additional Daily Hospital Cash Benefit for *Intensive Care Unit*

If the life assured stays in the *intensive care unit* while the *certificate* is in force, we'll pay an additional daily hospital cash benefit for each day of admission in *intensive care unit* based on the selected plan as stated in the *certificate* following the schedule of benefit.



Daily Hospital Cash Benefit for *Accidental* related causes

If the life assured stays in the hospital because of an *accident* while the *certificate* is in force, we'll pay the daily hospital cash benefit for *accidental* related causes for each day of admission based on the selected plan as stated in the *certificate* following the schedule of benefit.



Schedule of Benefits in this *master policy*

Benefit	RM		
	Plan 1	Plan 2	Plan 3
Non- <i>Accidental</i> Death Benefit	1,000	2,000	2,500
<i>Accidental</i> Death Benefit	2,000	4,000	5,000
Daily Hospital Cash Benefit for Non- <i>Accidental</i> related causes	40 / day	80 / day	100 / day
Daily Hospital Cash Benefit for <i>Accidental</i> related causes	80 / day	160 / day	200 / day
Additional Daily Hospital Cash Benefit if admitted to <i>Intensive Care Unit</i>	40 / day	80 / day	100 / day



What we don't cover



It's important to understand that we don't cover every kind of condition and risk. This section describes the situation and risks that we won't cover under this *master policy*.

This means we won't pay any benefit if the *certificate owner* makes a claim in these conditions or risks.

When we won't cover

Claims due to non-accidental related causes – we won't cover claims in the first 30 days of the certificate.

A 30-day waiting period applies to the *certificate*.

This means we won't pay death benefit nor daily hospital cash benefit for non-accidental related causes if death or *hospitalisation* for non-accidental related causes happen in the first 30 days after the *commencement date* as stated in the *certificate*.

Claims due to accidental related causes – we won't cover claims after 30 days of the accident.

Death or *hospitalisation* for *accidental* related causes must happen within 30 days after the *accident*.

This means we won't pay *accidental* death benefit nor daily hospital cash benefit for *accidental* related causes if death or *hospitalisation* for *accidental* related causes happens after 30 days from the *accident*.

Daily hospital cash benefit – we won't cover claims after 14 days in a year.

We apply an annual limit for hospital cash benefit up to 14 days in a year.

This means we won't pay hospital cash benefit from the 15th day of *hospitalisation* during the year.

If the *certificate owner* renews the *certificate*, the 14-day limit will start fresh in every *certificate anniversary*. The benefit doesn't add up if the *certificate owner* doesn't use the 14-day limit within a year, so it doesn't carry over to the next *certificate anniversary*.



Risks we won't cover for all benefits

We won't cover any claims related to suicide, attempted suicide, or self-inflicted acts within 1 year

We won't pay any benefit under the *certificate* if the claim arises from suicide, attempted suicide, or a self-inflicted act by the life assured within 1 year of the *commencement date* as stated in the *certificate*.

This exclusion applies regardless of the life assured's mental state.

However, if this circumstance occurs, we'll avoid the *certificate* and refund the *premium* paid, without interest.

We won't cover any claims related to unlawful acts

We won't pay any benefit under the *certificate* if the claim results from the life assured unlawfully acting or unlawfully failing to act.

We won't cover claims related to war

We won't pay any benefit under the *certificate* if the claim results from:

- war (whether or not it has been declared);
- coup;
- revolution;
- riot; or
- any similar event.



Risk we won't cover for hospital cash benefit

We won't pay daily hospital cash benefit for any *hospitalisation* that is directly or indirectly, wholly, or partly caused by or results from any of the following.

Pre-existing illness — we won't cover disabilities the life assured had before the *certificate* began

We won't cover pre-existing illnesses. A pre-existing illness is a disability affecting the life assured that he or she had reasonable knowledge of before the *certificate's commencement date*.

We consider the life assured to have reasonable knowledge of a pre-existing illness if:

- the life assured has received or is currently receiving treatment;
- a doctor has given medical advice or a diagnosis, or recommended care or treatment;
- the life assured has or previously had clear and distinct symptoms of the disability; or
- a reasonable person in the circumstances would have recognised its existence.

Pregnancy and childbirth — we won't cover pregnancy, childbirth, or pregnancy-related conditions or treatments

We won't cover for pregnancy or pregnancy-related conditions, including:

- childbirth (including surgical delivery)
- complications arising from pregnancy, such as miscarriage
- abortion
- pre- or post-natal care and surgical
- contraception
- infertility treatment and its complications
- erectile dysfunction

- tests or treatment related to impotence or sterilisation

Reasonable and medically necessary — we won't cover *hospitalisation* that is not reasonable and medically necessary

The life assured's treatment is reasonable and medically necessary if it meets some or all of the following criteria:

- It is consistent with the diagnosis and customary medical treatment of a covered disability
- It aligns with the standards of good medical practice, the current standard of professional medical care, and proven medical benefits
- It can't be reasonably provided outside of a hospital (if it involves the life assured being admitted as an inpatient)
- It provides treatment directly related to the covered disability.

Treatment is not reasonable and medically necessary if it's:

- done for the convenience of the life assured or medical practitioner;
- of an experimental, investigational, or research nature;
- for cosmetic, prevention or screening;
- a medical technology or procedure that has not been proven effective, based on established medical practice; or
- not approved by a recognised body in the country where the life assured receives it.

For clarification, the following situations are not reasonable and medically necessary:

- organ and/or tissue donation;
- routine physical examinations, or health check-ups or tests
- inpatient treatment for diagnostic purposes, experimental treatment, not incident to treatment or diagnosis of the life assured's sickness or *injury*;



- cosmetic surgery, or elective surgery performed only at the choice of the life assured;
- sex transformation surgery;
- refractive error correction surgery;
- any other treatment in the absence of sickness or *injury* or medical symptoms.

Congenital conditions — we won't cover disorders and diseases present from birth

We won't cover congenital disorders or diseases. We also won't cover deformities. This includes any hereditary or developmental conditions.

Venereal disease - we won't cover sexually-transmitted diseases

We won't cover the life assured for any venereal (sexually-transmitted) diseases, or conditions that result from them.

Sleep or snoring disorders – we won't cover sleep or snoring disorders

We won't cover the life assured undergoing investigation, treatment, alternative therapy or alternative treatment for sleep or snoring disorders.

Mental illness – we won't cover mental or nervous disorders

We won't cover the life assured for psychotic, mental or nervous disorders.

These include any neuroses and their effects in the life assured's body or mind

HIV, AIDS and diseases requiring quarantine - we won't cover HIV, AIDS, AIDS-related diseases or diseases that require the life assured to quarantine

We won't cover the life assured for:

- Human Immunodeficiency Virus (HIV)
- Acquired Immune Deficiency Syndrome (AIDS)
- AIDS Related Complex (ARC)
- any communicable diseases requiring quarantine by law

Circumcision - we won't cover circumcision

We won't cover the life assured for:

- circumcision
- any surgery on the foreskin

Dental treatment - we won't cover dental treatment, unless it's required after an accidental injury

We won't cover any of the following:

- Dental care
- Dental surgery

However, we'll cover treatment that the life assured requires because of an *injury* from an *accident* that occurred while the *certificate* is in force.



Starting and ending the insurance coverage



This section describes when each *certificate* starts and some of the ways it may end. It also sets out the terms of the 15-day free look period.

When the *certificate* starts and cover begins

Each *certificate* is in force from the *commencement date* on the *certificate*. From that date, the terms and conditions in this *master policy* apply.

The insurance coverage is in force from the *commencement date* on the *certificate* or any *endorsements*. From that date, we'll provide the cover and benefits described in this *master policy*.

The insurance won't start until these things happen:

- The *certificate* is given when the life assured is alive and healthy.
- The first *premium* for the insurance is made.
- We will conduct a *customer assessment* on the life assured. This is to comply with the Anti-Money Laundering, Anti-Terrorism Financing and Proceeds of Unlawful Activities Act 2001 and Anti-Money Laundering and Counter Financing of Terrorism (AML/CFT) Insurance and Takaful (Sector 2). The *customer assessment* will be conducted within 30 days from the *issue date* as stated in the *certificate*. We are happy with the assessment if 30 days pass and we do not send a rejection notice. However, if we do not accept the results of the assessment, we will refuse to provide insurance.

If we refuse to provide insurance, we will send a rejection notice to the *certificate owner* within 30 days of the *issue date* as stated in the *certificate* and refund any paid *premium* without interest.

Free look period – the *certificate owner* can cancel the *certificate* in the first 15 days at no charge

The *certificate owner* has a 15-day free look period. This means the *certificate owner* can cancel the *certificate* by returning it to us within the first 15 days after receiving it and we'll refund any amount of the *premium* paid, without interest.

If the *certificate owner* decides to cancel the *certificate* after the first 15 days from receiving it, the *certificate* will end on the next *premium* due date. The *certificate owner* won't get any amount of *premium* paid in return.



When the *certificate* ends

The *certificate* can end in several different ways. See the relevant sections for more information about each of the ways the *certificate owner* or we can end it.

The *certificate* ends when the first of these occurs.

- We have paid the *Non-Accidental Death Benefit* claim (see **page 8**)
- We have paid the *Accidental Death Benefit* claim (see **page 8**)
- On the *expiry date* as stated in the *certificate* or any *endorsements* that apply, amending the *expiry date*;
- The *certificate owner* cancels the *certificate* (once we approve the cancellation)
- The *certificate owner* does not pay the renewal *premium* at the end of the grace period
- The life assured takes up a risky occupation that we do not cover (we will refund the *premium* paid without interest from the date they started the riskier occupation).



Making changes to the *master policy*



We can change some aspects of this *master policy*.



If we modify any terms and conditions of this *master policy*, we'll send you a signed *endorsement*, which records the change and forms part of your insurance contract with us.

Changes we can make to the *master policy or certificate*

We can make changes, revisions, or amendments to the *master policy or certificate* by letting you or the *certificate owner* know in writing 30 days in advance.

We may make changes because of the introduction of new laws, rules, regulations, or other relevant terms and conditions.

Changes require a signed *endorsement*

No changes or waivers of any terms and conditions in the *master policy or certificate* are valid unless we let you or the *certificate owner* know 30 days in advance and record them in an *endorsement* signed by our authorised officer.



The *certificate owner's* responsibilities under this *master policy*



This section sets out the *certificate owner's* responsibilities under this *master policy*. Each of these responsibilities is detailed below. The *certificate owner* must:

- pay the *premium* on time
- notify us of a claim within 30 days
- provide proof when making a claim
- live in Malaysia when the *certificate* begins
- give us complete and correct information
- let us know if his or her occupation changes

How ownership of this *master policy* works

As the *master policy owner* specified in this *master policy* and the *certificate*, and subject to any *endorsements* affecting ownership, you own this *master policy*.

This means that you can decide not to offer the product to new *eligible members* by giving 30 days' notice prior to the effective stop offer date. We also reserve the same right as you.

As the *certificate owner* specified on the *certificate*, and subject to any *endorsements* affecting the ownership, the *certificate owner* owns the *certificate*.

This means that, throughout the lifetime of the life assured, as stated in the *certificate*, only the *certificate owner* can exercise any right or privilege under the *certificate*, subject to applicable law.

Who can be the covered under this *master policy*

To be able to get insurance under this *master policy*, the person must be an *eligible member* on or after the *commencement date* as stated in the *certificate*.





The *certificate owner* can nominate someone to receive the Death Benefit

The *certificate owner* can nominate another person to receive the Death Benefit payment by completing the nomination form. If they do, we'll pay the person or people on the nomination form, in accordance with the Financial Services Act 2013 or any other applicable Malaysian law.

The *certificate owner* can change the nominee or nominees at any time by completing the nomination form, but the request is subject to those laws and any other relevant legal requirements.

If the *certificate owner* is a non-Muslim, nominating certain family members may create a trust for the Death Benefit

If the *certificate owner* is a non-Muslim and nominates someone to receive the Death Benefit, trust may be created in favour of their name to receive the Death Benefit.

This applies if the *certificate owner's* nominee is:

- the spouse or child; or
- the parent, if the *certificate owner* doesn't have a living spouse or child when the *certificate owner* nominates someone.

If the nominee is not the *certificate owner's* spouse, child, or parent, we'll pay the Death Benefit to the nominee under the capacity as the executor of the *certificate owner's* estate. This will fulfil our obligations under the *certificate*.

If the *certificate owner* is a Muslim, we'll pay the nominee as executor

If the *certificate owner* is Muslim and nominates someone to receive the Death Benefit, we'll pay the Death Benefit to the nominee under the capacity as the executor of the *certificate owner's* estate. This will fulfil our obligations under the *certificate*.

The *certificate owner* must pay the premium on time

The *certificate owner* must pay all *premium* under the *certificate* to us by electronic means, on or before the date it's due.

The *certificate owner* must pay the *premium* in the currency and amount specified in the *certificate* or any *endorsements*.

After the payment of first *premium*, if the *certificate owner* fails to pay renewal *premium* on or before the date it's due, it will represent a default in payment of *premium*.

Grace Period - the *certificate* remains in force for 31 days if the *certificate owner* hasn't paid the renewal *premium*

The *certificate owner* has 31 days from *premium* due date to pay their renewal *premium*. During this time, the *certificate* will still provide coverage. If the *certificate owner* doesn't pay the *premium* by the end of this grace period, the *certificate* will lapse.





The *certificate owner* must notify us of a claim within 30 days if possible

The *certificate owner* (or someone representing the *certificate owner*) must notify us in writing about any claims within 30 days after the event of the claim.

We'll still consider a claim after 30 days if the *certificate owner* can show that:

- it was not reasonably possible for the *certificate owner* to notify us within 30 days; and
- the *certificate owner* notified us as soon as reasonably possible.



The *certificate owner* must provide proof of the event when making the claim

At the *certificate owner's* expense, the *certificate owner* must send us proof of the event of claim and any relevant documents we ask for within 30 days after the *certificate owner* notifies us of the claim.

We may ask the *certificate owner* to send further medical reports or other supporting documents, if we require them.





Schedule of *Premium* in this *master policy*

The annual *premium* for age next birthday 18 to 57 years old is specified in the table. The following annual *premium* applies to both male and female.

<i>Premium</i>	RM		
	Plan 1	Plan 2	Plan 3
Annual <i>Premium</i>	60	120	150

The *premium* payable is non-guaranteed. This means we can change the *premium* rates on the *master policy anniversary* by giving 90 days' notice in writing. We'll change the *premium* on the next *certificate anniversary* after the 90 days' notice period.

We apply relevant taxes as they apply to the *certificate*

We'll charge the *certificate owner* the relevant taxes in connection with any goods or services we supply or are deemed to supply to the *certificate owner* under the *certificate*. This includes:

- any existing applicable tax, at the current rate
- any other duties, taxes, levies, or imposts that are introduced in future under Malaysian law.



The *certificate owner* must pay relevant tax in addition to any other *premiums*, fees, charges, or other outstanding payments.

The life assured must live in Malaysia when the *certificate* begins

The life assured must live in Malaysia at the *certificate's commencement date*.

However, this *certificate* doesn't stop the life assured from traveling or living outside Malaysia after the *commencement date*.



The *certificate owner* must notify us in writing if the life assured becomes a resident in any country other than Malaysia while the *certificate* is in force. Changing residency may affect our ability to continue the *certificate*.

Seek independent advice on how changing the residence may impact tax

We recommend the *certificate owner* to seek independent financial or tax advice to understand how changing the residency may affect their tax payment.

What we may do if the *certificate owner* becomes a taxpayer in another country

Despite any other parts of this *master policy*, if the *certificate owner* becomes a taxpayer in another country, and that country sets compliance requirements on foreign financial institutions through legislation, we may do any or all of the following.

- Comply with information requests from its governmental or regulatory bodies;
- Withhold tax; and
- Terminate the *certificate*





The *certificate owner* must give us complete and correct information

We issue the *certificate* to the *certificate owner* based on the material information the *certificate owner* provides and the *premium* the *certificate owner* pays. The *certificate owner* must take reasonable care not to make any misrepresentations in the material information the *certificate owner* provides.



A misrepresentation is where the *certificate owner* gives us incomplete or incorrect information, whether intentionally or unintentionally.

Material information forms part of the *certificate* between us and the *certificate owner*. It includes:

- the answers the *certificate owner* provides us in their application form
- any information the *certificate owner* discloses to us between submitting the application and entering into the *certificate*

What happens if the *certificate owner* gives us incorrect information

We'll avoid the *certificate* if the *certificate owner* does any of the following:

- supply any untrue information regarding the *certificate owner* or life assured in an application or declaration
- incorrectly state or omit any material facts affecting the life assured's insurance risk
- obtain the *certificate* or a *certificate* renewal by misstating, misrepresenting, or suppressing information
- make any fraudulent or exaggerated claim or support a claim using a false declaration or statement.

What happens if the *certificate owner* misrepresents information before insurance begins

If the *certificate owner* misrepresents any material information prior to the insurance *certificate* beginning until the time the *certificate* is issued, we'll do one of the following, depending on the nature and effect of the misrepresentation:

- avoid the *certificate* and refuse all claims the *certificate owner* makes
- avoid the *certificate* and refuse all claims the *certificate owner* makes, but refund any *premium* the *certificate owner* paid
- treat the *certificate* as entered into or renewed on different terms
- reduce the amount we pay for a claim.

What happens if the life assured is not of sound mind upon entering into *certificate*

If the life assured is not of sound mind when they enter into the *certificate*, we will avoid the *certificate* and refuse all claims the *certificate owner* makes, but refund any *premium* the *certificate owner* paid.

What happens if we avoid a *certificate*

If we avoid a *certificate*, it means we cancel it and treat it as having never existed. We'll also refund, without interest, any amount of the *premium* the *certificate owner* has paid.

The *certificate owner* must take reasonable care not to make a misrepresentation during renewal or variation

Before we renew or vary the *certificate*, we may require the *certificate owner* to confirm or amend any information the *certificate owner* has previously sent us.



When the *certificate owner* confirms or amends information, the *certificate owner* has a duty to take reasonable care not to misrepresent any information.



The *certificate owner* must let us know if information changes

The *certificate owner* must inform us if any change affects information:

- that the *certificate owner* has previously sent us; or
- after the *certificate owner* has submitted the application for renewal or variation, but before the renewal or variation takes effect.

We may change the benefits or *premium* if the life assured's age or gender is different from the application

We issue the *certificate* based on the age and gender of the life assured in the *certificate*.

We calculate the life assured's age using the date of birth stated in the application form. The *certificate owner* must provide us proof of the life assured's age before we'll pay any claims under this *master policy*.

If the *certificate owner* has given us incorrect information about the life assured's age or gender, then we may, based on their actual age or gender:

- change any benefits in the *certificate*;
- charge the *certificate owner* the correct *premium*; or
- require the *certificate owner* to complete additional formalities, such as providing proof of age, in keeping with any laws that apply.

We won't contest the *certificate* on the basis of incorrect information after 2 years

After 2 years, we won't contest the validity of the *certificate* on the basis that a statement or omission has been inaccurate, false, or misleading in the following documents leading to us issuing the *certificate*.

- The application for insurance
- Any report from a doctor, referee, or any other person
- Any other document

This applies if the *certificate* has been in effect for more than 2 years from the *issue date*.

However, this doesn't apply if:

- the statement or omission is related to a material matter or fact; or
- the *certificate owner* or life assured fraudulently made or omitted the statement that suppress a material fact.



A matter or fact is material if it's relevant to our decision to cover the life assured, or the rates and terms we apply to the cover.





The *certificate owner* must let us know if the life assured changes occupation

The *certificate owner* must let us know if, while the *certificate* is in force, the life assured engages in a new occupation, business, or pursuit where the life assured previously had none.

We won't cover any claims under the *certificate* if the life assured do either of the following without our written consent.

- Engages or is employed in any occupation, business, or pursuit which, in our opinion, is more hazardous or involves greater risk to life or health than those the *certificate owner* told us about.
- Engages in a new occupation, business, or pursuit where previously the life assured had none without immediately notifying us in writing.





General terms and conditions applying to this *master policy*

The general terms and conditions in this section apply to this *master policy*. These cover:

- how we contact the *certificate owner* about the *certificate*
- how we comply with laws and sanctions
- why this *master policy* doesn't participate in earnings sharing
- what we mean the *master policy* doesn't have cash value
- what we mean the renewal is non-guaranteed

How we'll contact the *certificate owner* about the *certificate*

We'll contact the *certificate owner* using ordinary post, pre-paid registered post, personal delivery, or e-mail. Unless the *master policy* expressly says otherwise, we'll use the *certificate owner's* last known address to send the *certificate owner*:

- notices;
- requests;
- instructions; or
- correspondence.



The *certificate owner's* last known address includes the postal correspondence address or e-mail address they've provided us.

When we consider information to be delivered

When we send the *certificate owner* information, we'll consider it to be delivered:

- if we use e-mail, on the date we send it;
- if we deliver it personally, on the date of delivery; or
- if we use ordinary post or pre-paid registered post, 7 days after we send it.

We can withhold information after 3 attempts to reach the *certificate owner*

If any information we try to send the *certificate owner* is returned after we've made a maximum of 3 attempts to deliver it, we can choose not to send the *certificate owner* further information until they confirm their latest postal correspondence address or e-mail address.



This *master policy* is subject to Malaysia law

Malaysian law applies to this *master policy*. It falls within the jurisdiction of Malaysia courts.

We'll comply with sanctions, anti-money laundering and counter-terrorism financing laws

We may take steps to comply with the laws, regulations, and request of relevant authorities in the areas of sanctions, anti-money laundering, and counter-terrorism financing, inclusive but not exhaustive of the sanctions adopted by:

- the United Nation Security Council (UNSC);
- the Ministry of Home Affairs (MOHA); and
- the government agencies in Malaysia or outside of Malaysia.

These steps could include:

- terminate the *certificate* and related cover; and
- freeze and treat premiums paid and amounts payable under the *certificate*, in any manner we deem appropriate.

How overseas sanctions affect this *master policy*

Despite anything else in this *master policy*, we'll only cover the life assured as long as the *certificate* doesn't contradict any applicable sanctions or resolutions adopted by:

- the United States of America;
- the Ministry of Home Affairs (MOHA);
- the United Nations Security Council (UNSC); or
- the government agencies in Malaysia or outside of Malaysia.

This also applies to sanctions targeted on:

- individuals;
- industries;
- government-owned entities;
- financial institutions; and
- other groups.

We conduct due diligence to determine the risk of new and existing customers regularly. This is to ensure the cover we provide does not contradict:

- sanctions or resolutions adopted by the United States of America, MOHA or UNSC;
- any other applicable provisions of the UNSC that member countries adopt; or
- any sanction notice issued by the government agencies in Malaysia or outside of Malaysia.

We do this regularly, as such sanctions, resolutions, and provisions can change from time to time.

If we become aware at any time from when the *certificate owner* first begins to apply for their *certificate* that the cover we're providing contradicts such sanctions or provisions, we'll take the following action without giving *certificate owner* prior notice.

- Terminate the *certificate* with immediate effect
- Declare the *certificate* void from the beginning
- Deal with all monies payable in respect to the *certificate* in any manner which we deem appropriate, including, but not limited to freezing the money or handing it over to the relevant authorities
- Not be liable for any losses arising from or related to any steps taken



This *master policy* doesn't participate in sharing surplus

This is a non-participating policy. That means we don't return our surplus earning to you or the *certificate owner* in the form of any dividends or bonuses.

This *master policy* doesn't have cash value

This is a pure protection policy. That means we don't offer any cash value. The *certificate owner* will not get any cash when the *certificate owner* surrenders the *certificate*.

The renewal is non-guaranteed

This is a non-guaranteed renewable policy. That means we can decide not to renew the *certificate* up to the *expiry date* as stated in *certificate*. We will let the *certificate owner* know if we do not renew the *certificate* in writing 60 days in advance.



What the key terms in this *master policy* mean



Accident or accidental

A sudden, unintentional, unexpected, unusual event that occurs at an identifiable time and place, which shall, independently of any other cause, be the sole cause of bodily *injury*.

Certificate

The certificate of insurance issued which records the details specific to the *certificate owner* and life assured under this *master policy*.

Certificate anniversary

Any 12-month anniversary of the *commencement date* as shown in the certificate of insurance.

Certificate owner

A Malaysian who is sound of mind and aged between 18 to 57 years old. This person owns the *certificate* mentioned in the certificate of insurance or any *endorsements*. The *certificate owner* can exercise all rights, privileges, and options available under the *certificate*.

Certificate year

Each 12-month period, starting from *certificate commencement date*, and then from each *certificate anniversary*.

Commencement date

The date that this *master policy* or the *certificate* begins.

The *commencement date* of the *master policy* is stated in the Policy Information Page in this *master policy*.

The *commencement date* of the *certificate* is stated in the certificate of insurance.

Customer assessment

The evaluation we conduct on the *eligible members* who want to be insured under this *master policy*. This evaluation includes, but is not limited to, checking against anti-money laundering requirements, and other rules set by us.

Eligible member

Customers of the *master policy owner*. This *eligible member* must be a Malaysian, sound of mind and aged between 18 to 57 years old.

Endorsement(s)

A document or documents, signed by our authorised officer, that modify this *master policy* or the *certificate*.

Expiry date

The date that this *master policy* or the *certificate* expires.

The *expiry date* of the *master policy* is stated in the Policy Information Page in this *master policy*.

The *expiry date* of the *certificate* is stated in the certificate of insurance or any *endorsements*.

Hospitalisation

When the life assured is admitted to a hospital as a registered inpatient for medically necessary treatment related to a covered disability. The *hospitalisation* must be recommended by a physician.

To be considered an inpatient, the life assured must physically stay in the hospital for the whole period of *hospitalisation*.



Injury

An *accidental* bodily *injury* resulting solely and directly, and independent of any other causes from external, violent, and *accidental* means. An *injury* may be:

- a visible contusion or wound on the outside of the body;
- an internal *injury*;
- from *accidental* drowning revealed by autopsy.

Intensive care unit

A section within a hospital that is:

- designated by the hospital for intensive care;
- maintained on a 24-hour basis solely for treating patients in a critical condition; and
- equipped to provide nursing and medical services unavailable elsewhere in the hospital.

Issue date

The date that this *master policy* or the *certificate* issued.

The *issue date* of the *master policy* is stated in the Policy Information Page in this *master policy*.

The *issue date* of the *certificate* is stated in the certificate of insurance.

Master policy

This Qaseh Bakti Plus *master policy*.

Master policy anniversary

Any 12-month anniversary of the *master policy commencement date* as shown in the *master policy*.

Master policy owner

The person who owns this *master policy*. The *master policy owner* is stated in the Policy Information Page in this *master policy*. The *master policy owner* can decide not to offer the product to new *eligible members*.

Premium

A scheduled *premium* payment for this *master policy*. The *premium* is stated in the certificate of insurance or any *endorsements*.



For more information

Visit the nearest Bank Simpanan Nasional branch, Live chat us at fwd.com.my or email ask@fwd.com



Customer Careline

1300 22 6262

(Operating hours 8.30am–5.30pm, Monday to Friday, except public holidays)

About FWD Insurance Berhad

FWD Insurance Berhad (“FWD Insurance”) is part of FWD Group, a pan-Asian life insurance business with more than 13 million* customers across 10 markets, including some of the fastest-growing insurance markets in the world. FWD reached its 10-year anniversary in 2023. The company is focused on making the insurance journey simpler, faster and smoother, with innovative propositions and easy-to-understand products, supported by digital technology. Through this customer-led approach, FWD is committed to changing the way people feel about insurance.

*As of March 2024

About Bank Simpanan Nasional

Bank Simpanan Nasional (BSN) is Malaysia’s first and longest-running bank, focused on actively promoting the habit of savings and investments among Malaysians.

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