



STAMP DUTY PAID

AutoBuddy Policy

WHEREAS THE INSURED named in the **Schedule** has by a signed Proposal and Declaration which shall be the basis of this Contract and is deemed to be incorporated therein has applied to **Tune Insurance Malaysia Berhad** (hereinafter called the 'Company') for such insurance hereinafter contained and has paid the premium stated in the **Schedule** as consideration for the insurance for the period stated herein.

NOW THIS POLICY WITNESSETH that if either **Insured/Named Driver** and/or **Passenger** suffers **Bodily Injury** caused by **accidental** external and visible means which injury shall solely and independently of any other cause results in Death or Disablement as hereinafter defined or necessitating medical and surgical treatment as hereinafter defined whilst driving or traveling as a **passenger** or whilst mounting or alighting from the **Named Vehicle** mentioned in the **Schedule** with the permission of the **Insured** and in accordance with the laws of Malaysia the Company will be subject to the terms of this policy, pay to the **Insured/Named Driver** and/or **Passenger** or the **Insured/Named Driver's** and/or **Passenger's** legal representatives the Compensation as specified in the Schedule of Benefits.

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 purposes 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**.

DEFINITION

The following definitions apply:

"Accident or Accidental" shall mean a fortuitous, sudden, unforeseen and unintentional event, resulting directly and independently from the action of a visible external cause which occurs at an identifiable time and place during the Period of Insurance.

"Accidental Death" shall mean any death due to an **Accident** and not from any natural causes.

"Bodily Injury" shall mean injury caused directly by **accidental** external and visible means and which injury shall solely and independently of any other cause result in the death or disablement of the **Insured** and/or the **Named Driver/Passenger** occurring within twelve (12) months from date of injury.

“**Breakdown**” shall mean immobilization of the **Named Vehicle** due to mechanical or electrical failure, punctured type including but not limited to the **Named Vehicle** is out of petrol or the windscreen is shattered.

“**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 24-hour 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.

“**Insured / You / Your**” shall mean the Person / Association / Corporation / Company as named in the Schedule and is the registered owner of the **Named Vehicle**.

“**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 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.

“**Medical Expenses**” shall mean actual expenses necessarily incurred for hospitalization, medical, nursing, hospital treatment expenses including cost of emergency dental treatment (but excluding replacement of dentures) following **Bodily Injury**.

“**Named Driver**” shall mean person possessing a valid driving license to drive the class of vehicle under the laws and regulations of Malaysia and is permitted to drive the **Named Vehicle** with the permission of the **Insured**.

“**Named Vehicle**” shall mean vehicle mentioned in the **Schedule**.

“**Passenger(s)**” shall mean occupants of the **Named Vehicle** excluding the **Named Driver(s)**.

“**Permanent Disablement**” shall mean injury caused by an **Accident** resulting total or partial disability to the **Insured/Named Driver(s)** and/or **Passenger(s)**. The **Insured/Named Driver(s)** and/or **Passenger(s)** will receive a percentage of the amount in accordance to the “Scale of Benefits” as described in Benefit 2 under the section of **Description of Benefits**.

“**Period of Insurance**” shall mean the commencement date of the **Period of Insurance** until its expiry specified in the Policy Schedule or any subsequent period to which **You** shall have paid and We shall have accepted the full premium before the commencement date of the **Period of Insurance**.

“**Schedule**” shall mean the Policy Schedule attached to the Policy Wording or any subsequently substituted Schedule.

“**Sum Insured**” shall mean the **Sum Insured** payable for **Accidental Death** and/or **Permanent Disablement** as specified in the **Schedule** attached with this Policy, according to the selected plan.

“**Territory Limit**” shall mean the coverage is limited to Malaysia, the Republic of Singapore, Thailand and Negara Brunei Darussalam unless specified otherwise under the respective benefits covered in this Policy.

“**We/Us/Our/the Company**” shall mean TUNE INSURANCE MALAYSIA BERHAD.

ELIGIBILITY

The **Insured/Named Driver(s)** covered under this Policy is between seventeen (17) years to seventy (70) years old.

Passengers covered under this Policy shall not be less than thirty (30) days or more than (70) years of age.

DESCRIPTION OF BENEFITS

BENEFIT 1 – ACCIDENTAL DEATH

In the event **Bodily Injury** sustained resulted in **Your** and/or the **Insured/Named Driver(s)** and/or **Passenger(s) Death**, whilst travelling in, boarding or alighting the **Named Vehicle** within twelve (12) calendar months from the occurrence of an **Accident**, **We** will pay the benefits according to the plan selected as per Policy Schedule.

BENEFIT 2 – PERMANENT DISABLEMENT

In the event of **Bodily Injury** sustained resulting in the following losses within twelve (12) calendar months from the occurrence of an **Accident** in the **Named Vehicle**, **We** will pay the amount specified hereunder to each of **You/ Your Named Driver(s)/ Passenger(s)**:

Scale of Benefits	Percentage of Sum Insured Person(s)
a) Loss of both hands or both feet	100%
b) Loss of sight of both eyes	100%
c) Loss of one hand and one foot	100%
d) Loss of either hand or foot and sight of one eye	100%
e) Total paralysis (from the neck down)	100%
f) Permanent quadriplegia (loss or permanent total loss of use of four limbs)	100%
g) Loss of either hand or foot	50%
h) Loss of sight of one eye	50%
i) Loss of four fingers and thumb in one hand	50%
j) Loss of hearing of both ears	50%
k) Loss of speech	50%
l) Loss of all toes	50%

Any permanent total loss of use of member will be treated as loss of member.

Any disablement which is not specified under the Scale of Benefits is excluded from this Policy.

Any claim paid in respect of a disablement specified under Benefit 2 – **Permanent Disablement** shall reduce the relevant **Sum Insured** from the date of the occurrence of the **Accident** until the expiry of the **Period of Insurance**.

When more than one infirmity arises from one **Accident**, the percentages are added together but cannot exceed 100% of the **Permanent Disablement Sum Insured** for **You** or each of **Your Named Driver(s)/ Passenger(s)**. The aggregate of all percentages payable in respect of any one **Accident** for **You** or each of **Your Named Driver(s)/Passenger(s)** shall not exceed 100% of the Principal **Sum Insured**. In the event a total of 100% is paid in one or more **Accidents** during the **Period of Insurance**, all coverage hereunder shall immediately cease to be in force and the Policy shall be automatically cancelled. All other losses that has been paid under Benefit 1 & Benefit 2 shall reduce the coverage by that amount from the date of that **Accident** until the expiration of this Policy.

BENEFIT 3 – MEDICAL EXPENSES

In the event **You** and/or **Your Named Driver(s)/ Passenger(s)** suffer(s) injury due to an accident to the **Named Vehicle** and **You** and/ or **Your Named Driver(s)/Passenger(s)** require(s) treatment by a legally qualified physician or surgeon, confinement in a hospital or the employment of a licensed or graduate nurse, **the Company** will pay the actual expenses incurred for treatment, hospital charges, and nurses fee up to the stipulated limits per Person as stated in the **Schedule** for a period of one hundred and eighty (180) days from the date of the accident.

BENEFIT 4 – BEREAVEMENT ALLOWANCE

We will pay the next of kin or legal representative the amount stated in the **Schedule** in the event of **Your** and/ or **Your Named Driver(s)'s/ Passenger(s)'s Death** due to an **Accident** involving the **Named Vehicle**.

BENEFIT 5 – HOSPITAL INCOME

In the event of a **Bodily Injury** resulting **You** and/or **Your Named Driver(s)/ Passenger(s)** being confined to a **Hospital** as a registered in-patient for more than twenty four (24) hours following the occurrence of an **Accident** involving the **Named Vehicle**, **We** will pay daily cash allowance specified in the **Schedule** up to a maximum of 30 days per policy year provided that such hospitalisation occur within fourteen (14) days of the **Accident**. In the event the **Period of Insurance** is less than twelve (12) months, the thirty (30) days hospitalisation time limit will be apportioned in accordance to the **Period of Insurance**.

BENEFIT 6 – 24-HOUR EMERGENCY TOWING AND ROADSIDE ASSISTANCE (DUE TO BREAKDOWN)

This Policy entitles the **Insured/Name Driver(s)** to Car Assistance Program Benefits arranged by **the Company**, twenty-four (24) hours a day, three hundred sixty-five (365) days a year, within our Territorial Limits as stated in the Policy. The services will only be rendered to the **Named Vehicle** specified in the **Schedule** in the event of **Breakdown** to the **Named Vehicle** during the **Period of Insurance**. The **Insured/Named Driver(s)** of the **Named Vehicle** must call the 24Hour Toll Free number **1 800 22 8863** to request for the services below.

If the **Named Vehicle** breaks down and it is not possible to repair the **Named Vehicle** on the site, **the Company** or its service provider will tow the **Named Vehicle**. The **Insured/ Named Driver(s)** is given full flexibility as to where they want the **Named Vehicle** towed, either back to the **Insured /Named Driver(s)'s** home or to the **Insured/Named Driver(s)'s** preferred workshop. The emergency towing service due to breakdown can only be claimable by **Insured/Named Driver(s)** for each and every two weeks period.

TERRITORIAL LIMITS

The twenty-four (24) hours emergency towing services shall be made available in the event the **Named Vehicle** is immobilized anywhere in Peninsular Malaysia excluding islands except for Penang and Langkawi. For East Malaysia, the services shall be available in all major towns along the pan Borneo highway and government gazetted roads.

BENEFIT 7 – COMPASSIONATE FLOOD COVER

In the event of damage due to flood to the **Named Vehicle**, **the Company** will pay to the **Insured** the actual expenses incurred up to the amount stated in the **Schedule** for any one incident and/or in aggregate to any one period of insurance. The **Insured/Named Driver(s)** must provide to **the Company** a copy of the police report on the flood incident, original receipts for the expenses incurred and photographs of the **Named Vehicle** before and after the repair works.

GENERAL EXCLUSIONS

This Policy does not provide coverage to the **Insured/Named Driver(s)** and/or **Passenger(s)** under the following circumstances:

1. Losses caused directly or indirectly, wholly or partly by:
 - (a) bacterial infections (except pyogenic infections which shall occur through an accidental cut or wound);
 - (b) any other kind of disease; and
 - (c) medical or surgical treatment (except such as may be necessary solely by injuries covered by this Policy and performed within the time provided in this Policy)
2. Any bodily injury which shall result in hernia;
3. Suicide or any attempt thereat (sane or insane);
4. Loss occasioned by war, invasion, act of foreign enemy, hostilities, or war like operations (whether war be declared or not), mutiny, civil war, revolution, insurrection, conspiracy, military or usurped power, martial law, or state of siege, or any of the events or causes which determine the proclamation or maintenance or martial law or state of siege, seizure, quarantine, or customs regulations or nationalization by or under the order of any government or public or local authority, of any weapon or instrument employing atomic fission or radioactive force, whether in time of peace or war. This exclusion shall not be affected by any endorsement which does not specifically refer to it, in whole or in part. The **Insured/Named Driver** and/ or **Passenger(s)** shall, if so required, and as a condition precedent to any liability of **the Company**, prove that the loss did not in any way arise under or through any of above excluded circumstances or causes;

5. While the **Named Vehicle** is used for hire, racing, road rally, pace making, speed-testing or for any purpose in connection with motor trade;
6. **Insured/Named Driver(s)** does not hold a valid driver's license to drive the Named Vehicle under the regulations of the Malaysian Road Transport Department or Court of Law.
7. While the **Named Vehicle** is used in the pursuit of illegal business as an unlicensed common carrier;
8. Childbirth or miscarriage or insanity due to any illness or diseases unless caused by the accident while driving, riding, alighting or boarding the **Named Vehicle**;
9. Any person below the age of thirty (30) days or above the age of seventy (70) years;
10. Loss or bodily injury caused directly or indirectly, wholly or partly to the **Insured/Named Driver(s)** and/or **Passenger(s)** while the person driving was intoxicated with drugs or alcohol.
11. While committing or attempting to commit any unlawful act;
12. Damage to all body parts of the **Named Vehicle**, including wear and tear damage, other than those directly caused by flood.

EXCLUSIONS TO BENEFIT 6 – 24-HOUR EMERGENCY TOWING AND ROADSIDE ASSISTANCE

The Company or its service provider shall not be required to provide its Services under the following circumstances:

1. Services which are not organized or pre-approved directly by **the Company** or its service provider;
2. Cost of services which are claimable under the Motor Insurance Policy (e.g. towing cost in the event of an accident);
3. Any cost on parts and cost of repairs at the workshop or service centre;
4. If the **Named Vehicle** is or has been modified for participation in rally and racing or modified against government regulations;
5. Service provision outside the territorial limits stated;
6. Failure of the **Insured/Named Driver(s)** and/or **Passenger(s)** of the **Named Vehicle** to take reasonable precautions or to follow warnings of any intended strike, riot or civil commotion via the mass media;
7. Any illegal or unlawful act by the **Insured/Named Driver(s)** and/or **Passenger(s)** of the **Named Vehicle** for any unlawful or illegal purposes;
8. Any commercial vehicle;
9. When the car keys are not available or locked inside the **Named Vehicle**;
10. When there is no mechanical part in the **Named Vehicle**, such as no engine or transmission;
11. Towing of a **Named Vehicle** for the purpose of disposing the vehicle;
12. Towing of a **Named Vehicle** for the purpose of transferring the vehicle from one workshop to another;
13. No valid road tax disc displayed on the **Named Vehicle**;
14. Towing a stolen **Named Vehicle** which has been discovered, abandoned or due to vandalism;
15. **Named Vehicle** that has been dismantled fully or partly in a workshop;
16. Towing a **Named Vehicle** that is greater weight than for which it was designed as stated in manufacturer's specifications;

17. Towing a **Named Vehicle** which registration number does not match with the number registered with **the Company** or its service provider;
18. If the **Named Vehicle** suffers a mechanical breakdown and is immobilized on an unpaved road surface or on a road that is not gazetted road of the Malaysia, Singapore and/or Thailand Road System; and

SPECIAL PROVISIONS

1. Compensation in respect of the above shall be made only when the claim has been proved to the satisfaction of **the Company**.
2. In the event that the actual number of **Passenger(s)** exceeds the number stated in the **Schedule** of the Policy, **the Company's** Limit of Liability per person will be reduced by the ratio of the actual number of **Passenger(s)** to that of the number of **Passenger(s)** declared.
3. **Passenger(s)** aged thirty (30) days to fifteen (15) years are entitled to 50% under Benefit 1 & Benefit 2.
4. All policy benefits described in Benefit 1 to Benefit 7 shall cease upon 100% pay-out under Benefit 1 & Benefit 2.

GENERAL CONDITIONS

The Policy and **Schedule** shall be read together as one contract and any word or expression to which a specific meaning has been attached in any part of this Policy or of the **Schedule** shall bear such meaning wherever it may appear.

1. OBSERVANCE OF TERMS

The due observance and fulfilment of the terms and conditions of this Policy insofar as they relate to anything to be done or not to be done by the **Insured/Named Driver(s)** or his/her legal personal representative shall be conditions precedent to any liability of **the Company** to make any payment under this Policy.

2. NOTICE

All notices required to be given by the **Insured** to the **Company** must be in writing addressed to the nearest local Branch or Agency of the **Company** and no alteration in the terms of this Policy or any endorsement thereon, will be held valid unless the same is signed or initiated by an authorized representative of **the Company**.

3. DUTY OF DISCLOSURE

Subject to the relevant duty of disclosure of the **Insured**, if the proposal or declaration of the **Insured** is untrue in any respect or if any material fact affecting the risk be incorrectly stated therein or omitted therefrom or if this Policy shall have been obtained through any misstatement, misrepresentation or suppression or if the 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 this Policy may be avoided, claim denied or reduced, terms changed or varied or contract terminated.

4. NON ASSIGNMENT

The Company shall unless otherwise expressly provided by an endorsement on this Policy be entitled to treat the **Insured** as the absolute owner of this Policy and shall not be bound to recognize any equitable or other claim to or interest in the policy and the receipt of the **Insured** or that of his legal personal representatives for any benefits payable hereunder to the **Insured** shall be an effectual discharge to **the Company**.

5. PREVIOUS DISABILITY

If as a consequence of the **Accident** to either the **Insured** and/or the **Named Driver/Passenger** shall sustain an injury and if such injury has been or shall be aggravated by any disability and/or condition which existed prior to the **Accident**, the amount of any compensation payable shall be the amount **the Company** at its sole and absolute discretion considers would have been payable if such condition had not existed and the **Bodily Injury** had not been aggravated as such.

6. APPLICABLE LAW

This Policy, and all rights, obligations and liabilities arising hereunder, shall be construed and determined and may be enforced in accordance with the laws of Malaysia and the Parties agree that the Malaysian Courts shall have exclusive jurisdiction hereto.

7. CLAIM PROCEDURE

Upon the happening of an **Accident** likely to give rise to a claim under this Policy, the **Insured** shall within fourteen (14) 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 procure and act on proper medical or surgical advice.

The **Insured** (or the **Insured's** legal personal representatives) shall at the expense of the **Insured** furnish to **the Company** all such certificates information and evidence as may be required by **the Company** and the **Insured** shall whenever reasonably required to do so submit to medical examination on behalf of **the Company**. In the event of the death of the **Insured/Named Driver(s)** and/or **Passenger(s)**, **the Company** shall be entitled to have a post-mortem examination at **Insured/Named Driver(s)** and/or **Passenger(s)** personal representative's expense and notice shall when practicable be given to **the Company** before interment or cremation stating the time and place of any inquest appointed.

8. All claims falling under this Policy shall be submitted within the prescribed period as stated in Condition 7 above.

9. CLAIMS THROUGH THE INSURED PERSON(S)

Compensation for loss of life and the medical expenses of the **Insured/Named Driver(s)** and/or **Passenger(s)** or his/her immediate family members shall be payable to the **Insured/Named Driver(s)** and/or **Passenger(s)** or his/her legal personal representative (if the **Insured/Named Driver(s)** and/or **Passenger(s)** is not married, the family members would be his/her parents, sisters and brothers. If the **Insured/Named Driver(s)** and/or **Passenger(s)** is married, the family members would be his/her spouse and children). All other compensation payable under this Policy other than to the **Insured/Named Driver(s)** and/or **Passenger(s)** or to his/her immediate family members shall be payable directly to the injured **Insured/Named Driver(s)** and/or **Passenger(s)** or to such **Insured/Named Driver(s)** and/or **Passenger(s)** legal personal representative whose receipt shall be a full discharge of any claim for the injury or death of such **Insured/Named Driver(s)** and/or **Passenger(s)**.

10. CANCELLATION

You may cancel this Policy by giving **Us** fourteen (14) days' notice and provided no claim has been made during the current **Period of Insurance**, **You** shall be entitled to a refund of premium less the premium for short Period Rates as per the scale in the table below for the period the Policy has been in force, subject to the minimum premium of RM 20.00.

The following scale of short period rates shall apply:

Period	Refund
Less than 1 week	7/8 – of the annual premium
Less than 1 month	3/4 – of the annual premium
Less than 2 months	5/8 – of the annual premium
Less than 3 months	1/2 – of the annual premium
Less than 4 months	3/8 – of the annual premium
Less than 6 months	1/4 – of the annual premium
More than 6 months	Nil

11. TERMINATION OF COVERAGE

This Policy shall lapse/terminate at mid-night (standard Malaysian time) on the last day of the **Period of Insurance**. This Policy shall lapse/terminate on the Policy anniversary date that falls after the Insured's seventieth (70th) birthday.

12. In the event the Insured shall have disposed of the **Named Vehicle** as specified in the policy **Schedule** either by sale, transfer of ownership, total loss or theft, this Policy shall cease to operate and **the Company** upon written request of the **Insured** and surrender of the original Policy, shall cancel this Policy and premium for the unexpired **Period of Insurance** shall be refunded in accordance with **the Company's** short period rates.

13. RENEWAL

This Policy is renewable annually at the option of the Company. This Policy will be subject to revision at the Policy Anniversary which shall be one year after the effective date and each year thereafter.

14. ARBITRATION

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 are unable to 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 three (3) calendar months after having required to do so in writing by the other party and in cases 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.

15. BENEFICIARY CLAUSE

In the absence of a nominee, indemnity for loss of life shall be payable to the Estate of the **Insured/Named Driver(s)** and/or **Passenger(s)** and shall be distributed in accordance with the Laws of Malaysia and the Syariah Law whichever is applicable.

16. CURRENCY EXCHANGE RATES

All premiums shall be paid in Malaysian Ringgit. In the event that the **Insured/Named Driver(s)** and/or **Passenger(s)** shall be admitted into a hospital and/or receive medical treatment outside Malaysia and render bills in a currency other than Malaysian Ringgit, **the Company** shall indemnify the **Insured/Named Driver(s)** and/or **Passenger(s)** or his/her legal personal representative in Malaysian Ringgit based on the quoted exchanged rate (open market rate if a free market, official rate if not a free market) at the date **the Insured/Named Driver(s)** and/or **Passenger(s)** is discharged from hospital.

17. CHANGE IN RISK

The **Insured** shall give immediate notice to **the Company** of any change in his/her name, residence, business or occupation. The **Insured** shall also give notice before any renewal of this Policy of any injury, disease, physical defect or infirmity by which the **Insured** has become affected or has knowledge of.

18. ALTERATIONS

The Company reserves the right to amend the terms and conditions of this Policy and such alteration of this Policy shall only be valid if authorized by **the Company** and endorsed hereon.

19. CASH BEFORE COVER

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** before cover commences. If this condition is not complied with, then this Contract of Insurance is automatically null and void.

20. SERVICE TAX CLAUSE

Please be informed that 6% Service Tax will be charged for all taxable general insurance policies with a period of insurance commencing on or after 1st September 2018.

21. 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.

NOTICE

For all intents and purposes where there is a conflict or ambiguity as to the meaning in the Bahasa Malaysia provisions of any part of the Contract, it is hereby agreed that the English version of the Contract shall prevail.

This policy and its conditions should be examined and if incorrect, return at once for alteration.



IMPORTANT NOTICE

Every effort will be made by our company to fulfill our obligation under the Policy. If you are unhappy or dissatisfied with our service or have any complaints, you may call or write to us at:-

Tune Insurance Malaysia Berhad

Complaints Unit

Level 9, Wisma Tune,
No. 19, Lorong Dungun,
Damansara Heights,
50490 Kuala Lumpur.

Tel: 1800 88 5753

Fax: 603-2094 1366

Website: www.tuneprotect.com

Email: hello.my@tuneprotect.com

If you are not satisfied with the response of our decision of our Company, you may submit your complaint either to The Ombudsman for Financial Services (OFS) or to Bank Negara Malaysia (BNM).

The following are the contact details for OFS and BNM:

Ombudsman for Financial Services (OFS)

Level 14, Main Block,
Menara Takaful Malaysia,
No. 4, Jalan Sultan Sulaiman,
50000 Kuala Lumpur.

Tel: 03-2272 2811

Fax: 03-2272 1577

Email: enquiry@ofs.org.my

Website: www.ofs.org.my

OR

Laman Informasi Nasihat dan Khidmat (LINK)

Pengarah

Jabatan LINK & Pejabat Wilayah

Bank Negara Malaysia

P.O.Box 10922

50929 Kuala Lumpur

Tel: 1-300-88-5465

Fax: 03-21741515

Email: bnmtelelink@bnm.gov.my