

Account No. : BWN01248

Policy No. : PAG-P0052643-BR

Class Of Insurance : Group Personal Accident

Trans No. : 00020

Insured Name : UNIVERSITI TUNKU ABDUL RAHMAN

Postal Address : 13, JALAN 13/6
46200 PETALING JAYA
SELANGOR

Period of Insurance : From 01/01/2010 To 31/12/2010 Expiring At Midnight

RI : 0001 Group Personal Accident
OCCUPATION : AS DESCRIBED BELOW

COMPENSATION	SUM INSURED (PER PERSON)
01 Sum Insured (Items 1, 2 & 3)	RM 45,000
02 Medical Expenses (Item 5(a))	RM 3,000

Event :-

Bodily injury caused solely by violent accidental external and visible means which injury shall independently of any other cause be the sole cause of the Results and shall exclude bodily injury caused by sickness, disease or medical disorder and/or disease introduced by the vector.

THIS POLICY IS SUBJECT TO THE FOLLOWING WARRANTIES, ENDORSEMENTS AND CLAUSES:

PWE PREMIUM WARRANTY

C001 DISAPPEARANCE CLAUSE

C002 EXPOSURE CLAUSE

C003 PAYMENT OF BENEFITS CLAUSE

C008 AMATEUR SPORTS CLAUSE

Exception 1(a) is amended to read as "The Insured engaging in Winter Sports, underwater activities involving the use of underwater breathing apparatus, Mountaineering, racing of any kind (other than on foot) and in any sporting activities in a professional capacity."

C014 AUTOMATIC ADDITION AND DELETION CLAUSE

The Insurance provided by this Policy is automatically extended to new

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employee(s) from the date of commencement of employment. Provided however that the Insured shall inform the Company of such addition(s) within thirty (30) days from the date of employment and pay the appropriate additional premium. The benefits of such person shall follow the benefits of the category of employee he/she is in and shall not exceed the highest benefits of the insured person already granted under this Policy.

Employees are automatically deleted from this Policy with effect from the date they leave the service of the Insured.

Subject otherwise to the terms and conditions of the Policy.

C017 **LOSS NOTIFICATION CLAUSE**

It is hereby declared and agreed that this insurance will not be prejudiced by any inadvertant delays, errors or omission in notifying the Company of any circumstances or event giving rise or likely to give rise to a claim under this Policy, provided that notice be given to the Company immediately upon such occurrence coming to the knowledge of the Insured but not later than 30 days from the date of the occurrence.

C023 **PREMIUM ADJUSTMENT CLAUSE**

The premium of this Policy is provisional and the Insured undertakes to supply the necessary information to the Company at the end of the Period of Insurance to enable the premium to be adjusted and the Insured undertakes to pay the additional premium to the Company and the Company will refund any return premium to the Insured that may result from such adjustment.

E002 **STRIKE RIOT & CIVIL COMMOTION ENDORSEMENT**

It is hereby declared and agreed that this Policy extends to cover death or disablement as within defined directly or indirectly caused by strike, riot and civil commotion.

Provided the Insured Person(s) is not actively participating in such strike, riot and civil commotion otherwise this extension becomes void

E003 **MOTOR CYCLING EXTENSION ENDORSEMENT**

It is hereby declared and agreed that Exception 1(c) appearing in the Policy is deemed to be deleted.

E005 **ACCIDENTAL GAS INHALATION, SUFFOCATION, DROWNING & FOOD POISONING ENDT**

It is hereby declared and agreed that the insurance by this Policy is extended to cover the Insured or Insured Person(s) against Death or Permanent Disablement as herein defined arising out of or resulting

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from Accidental Gas Inhalation, Suffocation, Drowning, Food Poisoning and other similar misfortune with or without any sign of external or violent visible injury.

2013 - HARMFUL INSECTS & SNAKES BITES CLAUSE

It is hereby declared and agreed that this Policy is extended to cover the benefits Insured herein in respect of bodily injury sustained due to harmful insect bites and/or snake bites.

Provided however such extension shall include mosquito bites, bug bites and/or diseases introduced by any vector.

INSURED PERSONS:- On All students of the Universiti Tunku Abdul Rahman

OCCUPIED AS : Education, Consultancy, Event Management & Renting Of Premises

COMPENSATION :- As per Table of Compensation attached.

MEDICAL EXPENSES

ACTUAL EXPENSES REASONABLY AND NECESSARILY INCURRED FOR MEDICAL TREATMENT BY REGISTERED PRACTITIONER AND FUNERAL EXPENSES, PROVIDED THAT THE MAXIMUM LIABILITY OF THE COMPANY ARISING OUT OF ANY ONE ACCIDENT/DISABILITY SHALL NOT EXCEED RM3,000.00

IN RESPECT OF TRADITIONAL MEDICAL TREATMENT, THE COMPENSATION IS LIMITED TO RM500.00

MEMO 1

Insured Person" for the purpose of this insurance is defined as student who is registered with the college to pursue a course of studies, which include all the industrial trainings and/or industrial training placements"

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MEMO 2

The insurance will commence from the time the Insured Person registers at the University and will terminate when the Insured Person ceases to be a student of the University. Person prematurely leaves or ceases to be student of the University which has collected from him/her the insurance premium on a semester basis, coverage will terminate on the last day of the semester holidays (i.e. before the commencement of the following new semester) provided that the Insured Person is not engaged in any occupational risks or activities more hazardous than as a student.

MEMO 3

Notwithstanding anything stated in the contrary to Exception 1(b), this Policy covers any Results directly or indirectly caused by the use of woodworking machinery in pursuance of the course of study.

MEMO 4

This Policy is granted on the condition that the Insured Persons are of sound physical and mental health, of temperate habits, free from any defect infirmity and illness which may render the Insured Persons more than ordinarily liable to accident or which may hinder the speed of recovery from any injury and have never had any fit or paralysis and have not been rejected by any insurance company for personal accident or medical insurance or life assurance otherwise this Policy shall be void. Each Insured Person is separately and independently subject to this memorandum.

MEMO 5

The Insured Persons declared for insurance shall as though they were the Insured be bound by the terms and condition of this Policy.

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MEMO 7

It is hereby declared and agreed that the policy is extended to cover the students located at the Third Party's campus which are provided by the " Licensed Programme Partners "

MEMO 8

The other Activities shall also include the exhibitions, Seminars, conferences, video/tele-conferencing & trainings organised by the insured and/or third party at the premises owned, rented and leased the insured

Nominated Adjuster :

1. Cunningham Lindsey Adjusters (M) Sdn Bhd
2. Mestari Adjuster Sdn Bhd

THIS IS A COMPUTER-GENERATED DOCUMENT AND IT DOES NOT REQUIRE A SIGNATURE.
THIS DOCUMENT SHALL NOT BE INVALIDATED SOLELY ON THE GROUND THAT IT IS NOT SIGNED

ISSUED ON 16/04/2010
KUALA LUMPUR (BROKER)