



STAMP DUTY
PAID

PROGRESSIVE INSURANCE BHD

Registration No.: 197401001891 (19002-P)

FIDELITY GUARANTEE POLICY

The benefits(s) payable under eligible product is(are) protected by PIDM up to limits. Please refer to PIDM's TIPS Brochure or contact Progressive Insurance Bhd or PIDM (visit www.pidm.gov.my)

For Consumer Insurance Contracts (Insurance wholly for purposes unrelated to the Insured's 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 the Insured's Proposal Form (or when the Insured applied for this insurance) and any other disclosures made by the Insured between the time of submission of the Insured's Proposal Form (or when the Insured applied for this insurance) and the time this contract is entered into. The answers and any other disclosures given by the Insured shall form part of this contract of insurance between the Insured and **PROGRESSIVE INSURANCE BHD** (hereinafter called "the Company"). However, in the event of any pre-contractual misrepresentation made in relation to the Insured's answers or in any disclosures given by the Insured, only the remedies in Schedule 9 of the Financial Services Act 2013 will apply.

This Policy reflects the terms and conditions of the contract of insurance as agreed between the Insured and the Company.

For Non-Consumer Insurance Contracts (Insurance for purposes related to the Insured's 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 the Insured's Proposal Form (or when the Insured applied for this insurance) and any other disclosures made by the Insured between the time of submission of the Insured's Proposal Form (or when the Insured applied for this insurance) and the time this contract is entered into. The answers and any other disclosures given by the Insured shall form part of this contract of insurance between the Insured and **PROGRESSIVE INSURANCE BHD** (hereinafter called "the Company"). In the event of any pre-contractual misrepresentation made in relation to the Insured's answers or in any disclosures made by the Insured, it may result in avoidance of the Insured's contract of insurance, refusal or reduction of the Insured's claim(s), change of terms or termination of the Insured's contract of insurance.

This Policy reflects the terms and conditions of the contract of insurance as agreed between the Insured and the Company.

WHEREAS the Insured has by a proposal and declaration which proposal and declaration together with any correspondence relative thereto signed by or on behalf of the Insured shall be the basis of this contract and be held as incorporated herein has applied to **PROGRESSIVE INSURANCE BHD** (hereinafter called the "Company") for the indemnity hereinafter contained.

In consideration of the payment of the First Premium and subject to the Terms and Conditions contained herein or endorsed hereon which are deemed to be conditions precedent to any liability on the part of the Company so far as they relate to anything to be done or complied with by the insured the Company agrees to reimburse to the Insured all such direct pecuniary loss not exceeding the Amount of Guarantee as the Insured shall sustain by all acts of fraud or dishonesty committed by any of the Employee or in respect of each of the Employee as specified in the Schedule committed.

- (a) during the Period of Insurance stated in the Schedule and
- (b) during the uninterrupted continuance of employment of such Employee and
- (c) in connection with his occupation and duties and discovered during the Period of Insurance or within six months thereafter or within six months after the termination of such employment whichever shall happen first.

CONDITIONS

1. DUTY OF DISCLOSURE

i. For Consumer Insurance Contracts

Where the Insured has applied for this Insurance wholly for purposes unrelated to the Insured's trade, business or profession, the Insured had a duty to take reasonable care not to make a misrepresentation in answering the questions in the Proposal Form (or when the Insured applied for this insurance) i.e. the Insured should have answered the questions fully and accurately. Failure to have taken reasonable care in answering the questions may result in avoidance of the Insured's contract of insurance, refusal or reduction of the Insured's claim(s), change of terms or termination of the Insured's contract of insurance in accordance with the remedies in Schedule 9 of the Financial Services Act 2013.

The Insured is also required to disclose any other matter that the Insured knows to be relevant to the Company's decision in accepting the risks and determining the rates and terms to be applied.

The Insured also has a duty to tell the Company immediately if at any time after the Insured's contract of insurance has been entered into, varied or renewed with the Company any of the information given in the Proposal Form (or when the Insured applied for this insurance) is inaccurate or has changed.

ii. For Non-Consumer Insurance Contracts

Where the Insured has applied for this Insurance wholly for purposes related to the Insured's trade, business or profession, the Insured had a duty to disclose any matter that the Insured knows to be relevant to the Company's decision in accepting the risks and determining the rates and terms to be applied and any matter a reasonable person in the circumstances could be expected to know to be relevant otherwise it may result in avoidance of the Insured's contract of insurance, refusal or reduction of the Insured's claim(s), change of terms or termination of the Insured's contract of insurance.

The Insured also has a duty to tell the Company immediately if at any time after the Insured's contract of insurance has been entered into, varied or renewed with the Company any of the information given in the Proposal Form (or when the Insured applied for this insurance) is inaccurate or has changed.

2. Meaning

This Policy and the Schedules 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 Schedules shall bear such specific meaning wherever it may appear.

3. Change In Risk

The Company shall not be liable to make any payment hereunder if the nature of the Business of the Insured or the Occupation or duties or conditions of service of any of the Employee shall be changed or the remuneration of any of the Employee be reduced without the sanction of the Company or if the precautions and checks for securing accuracy of the accounts mentioned in the said proposal and correspondence relative thereto shall not be duly observed.

4. Aggregate Liability

If this Policy shall be continued in force for more than one Period of Insurance or if any liability shall exist on the part of the Company under this Policy and also under any other Policy in respect of fraud or dishonesty of the Employee the liability of the Company hereunder shall not be accumulated or increased thereby but the aggregate liability of the Company during any number of Periods of Insurance and for any number of acts of fraud or dishonesty committed by the Employee shall not exceed the Amount of Guarantee set against the name of such Employee in the Schedule or the amount guaranteed under any other such Policy as aforesaid whichever is the greater.

5. Conviction Of Employee

Upon the happening of any circumstances giving rise or likely to give rise to a claim under this Policy the Insured shall immediately upon becoming aware of such loss give immediate notice to the Police and take all practical steps to prosecute the Employee involved to conviction for any criminal act which the employee involved shall have committed.

6. Claims Procedure

Immediately the Insured shall become aware of any circumstances giving rise or likely to give rise to a claim under this Policy the Insured or his representative shall immediately give notice thereof to the Company stating the identity of the relevant Employee and if known his/her whereabouts and particulars of the acts or defaults then discovered and shall within three months after such notice deliver to the Company full details of the claim and shall furnish proof of the identity of the relevant Employee and the correctness of such claim.

7. One Claim Per Employee

The Company shall not be liable to pay more than one claim in respect of any one of the Employee.

8. Rights Of The Company

All books of accounts of the Insured or any Accountant's report thereon shall be opened to the inspection of the Company and the Insured shall give all information and assistance to enable the Company to sue for and obtain reimbursement from anyone of the Employee or his estate of any moneys which the Company shall have paid or become liable to pay under this Policy.

9. Retention Of Money

Any money of any one of the Employee in respect of whom a claim is made in the hands of the Insured and any money which but for any act of fraud or dishonesty committed by such one of the Employee would have been due to that Employee from the Insured shall be deducted from the amount of loss before a claim is made under this policy. The Insured and the Company shall share any other recovery (excluding insurance and reinsurance and any counter security taken by the Company) made by either on account of any loss in the proportions that the amount of the loss borne by each bears to the total amount of the loss.

10. Cancellation

The Company may cancel this Policy by sending seven days' notice by registered letter to the Insured at its last known address and in such event the Insured shall become entitled to the return of a proportionate part of the premium corresponding to the unexpired Period of Insurance. This Policy may be cancelled at any time by the Insured by giving seven days' notice to the Company and provided no claim has arisen during the then current Period of Insurance the Insured shall be entitled to a return of premium subject to the Company's short period rates for the period the policy has been in force.

11. Arbitration

All differences arising out of this Policy shall be referred to the decision of an Arbitrator to be appointed in writing by the parties in difference or if they cannot agree upon a single Arbitrator to the decision of two Arbitrators one to be appointed in writing by each of the parties within one calendar month after having been required in writing so to do by either of the parties or in case the Arbitrators do not agree of an Umpire appointed in writing by the Arbitrators before entering upon the reference. The Umpire shall sit with the Arbitrators and preside at their meetings and the making of an award shall be a condition precedent to any right of action against the Company. If the Company shall disclaim liability to the Insured for any claim hereunder and such claim shall not within twelve calendar months from the date of such disclaimer have been referred to arbitration under the provisions herein contained then the claim shall for all purposes be deemed to have been abandoned and shall not thereafter be recoverable hereunder.

12. Diminution Of Amount Guaranteed

Upon the happening of any circumstances covered by this Policy, the Aggregate Limit of Guarantee for the period shall immediately stand reduced by the amount paid or payable by the Company in respect of the act or acts of fraud or dishonesty involved.

13. Condition Precedent To Liability

It shall be a condition precedent to the Company's liability under this Policy that:

- (a) the Insured has complied with all the terms of the policy; and
- (b) the statements and answers in the:
 - (i) Proposal Form; and
 - (ii) any claim form; and
 - (iii) any notice of change in circumstanceor given separately in support of any of them (whether by the Insured or any other person), are true and correct.

14. Subrogation

After the Company has accepted a claim either in whole or in part, the Company shall be fully subrogated to the position of the Insured and shall be able to exercise for its own benefit any legal right of recovery held by the Insured. The Insured must, at the Company's expense, fully cooperate in the enforcement of this right by the Company.

15. Other Insurance

If at the time of any claim arising under this Policy there be any other subsisting guarantee or security in respect of the acts or defaults of the relevant Employee the Company shall not be liable to pay or contribute more than its rateable proportion of such claim.

16. Duty Of The Insured

The Insured shall take reasonable care at all items at their own expenses to safeguard money from theft by employees.

17. Fraud

This Policy is void if any fraud is committed by the Insured, or anyone authorised to act on behalf of the Insured, in relation to it.

THE FOLLOWING CLAUSES/ENDORSEMENTS/WARRANTIES ARE APPLICABLE TO THE POLICY

CONDITION PRECEDENT CLAUSE

The validity of this Policy is subject to the condition precedent that:

- a) for the risk insured, the name insured has never had any insurance terminated in the last 12 months due solely or in part to a breach of any Premium Warranty condition ; or
- b) if the named insured has declared that is has breached any Premium Warranty condition in respect of a previous policy taken up with another insurer in the last 12 months;
 - i) if the named insured has fully paid all outstanding premium for time on risk calculated by the previous insurer based on the customary short period rate in respect of the previous policy; and
 - ii) a copy of the evidence of premium paid from the previous insurer to this effect is first provided by the named insured to the Company before cover incepts.

CYBER CLARIFICATION CLAUSE

The Policy specifically excludes losses of any kind directly or indirectly caused by, arising from or consisting of, in whole or in part:

- (a) The use or misuse of the Internet or similar facility
- (b) Any electronic transmission of data or other information
- (c) Any computer virus, worm, logic bomb, Trojan horse or similar problem
- (d) The use or misuse of any Internet address, Website or similar facility
- (e) Any data or other information posted on a Website or similar facility
- (f) Any loss of data or damage to any computer system, including but not limited to hardware or software
- (g) The functioning or malfunctioning of the Internet or similar facility or of any Internet address, website or similar facility
- (h) Any infringement, whether intentional or unintentional , of any intellectual property rights (including but not limited to trademark, copyright patent)

ELECTRONIC DATE RECOGNITION CLAUSE

- A. The Company will not pay for any loss or damage including loss of use with or without physical damage, injury (including bodily injury), expenses incurred or any consequential loss directly or indirectly caused by, consisting of, or arising from, the failure or inability of any computer, data processing equipment , media microchip, operating systems, microprocessors (computer chip), integrated circuit or similar device, or any computer software , whether the property of the Insured or not, and whether occurring before, during or after the year 2000 that results from the failure or inability of such device and/or software as listed above to:
 - (i) correctly recognize any date as its true calendar date
 - (ii) capture, save or retain, and/or correctly manipulate, interpret or process any data or information or command or instruction as a result of treating any date other than as its true calendar date and/or
 - (iii) capture, save, retain or correctly process any data as a result of the operation of any command which has been programmed into any computer software being a command which causes the loss of data or the inability to capture, save, retain or correctly process such data on or after any date
- B. It is further understood that the Company will not pay for the repair modification of any part of any electronic data processing system or any part of any device and/or software as listed in A above.

PREMIUM WARRANTY

It is fundamental and absolute Special Condition of this contract of insurance that the premium due must be paid and received by the Company within sixty (60) days from the inception date of this policy/endorsement/renewal certificate.

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

Where the premium payable pursuant to this warranty is received by an Authorised Agent of the Company the payment shall be deemed to be received by the Company for the purposes of this warranty and the onus of proving that the premium payable was received by a person, including an insurance agent, who was not authorised to receive such premium shall lie on the Company.

Subject otherwise to the terms and conditions of the Policy.

PROPERTY DAMAGE CLARIFICATION CLAUSE

Property damage covered under this Policy shall mean physical damage to the substance of property.

Physical damage to the substance shall not include damage to data or software , in particular any detrimental change in data, software or computer programs that is caused by a deletion , a corruption or a deformation of the original structure.

The Policy shall not be liable for:

- A. loss of or damage to data or software , but not limited to any detrimental change in data, software or computer programs that is caused by a deletion, a corruption or deformation of the original structure, and any business interruption losses resulting from such loss or damage.

Notwithstanding this exclusion, loss or damage to data or software , which is the direct consequence of insured physical damage to the substance of property shall be covered.

- B. loss or damage resulting from an impairment in the function, availability, range of use or accessibility of data, software or computer programs, and any business interruption losses resulting from such loss or damage.

TERRORISM EXCLUSION ENDORSEMENT

This Policy excludes loss, damage, cost or expense of whatsoever nature directly or indirectly caused by, resulting from or in connection with any act of terrorism regardless of any other cause or event contributing concurrently or in any other sequence to the loss.

For the purpose of this endorsement an act of terrorism means an act, including but not limited to the use of force or violence and/or the threat thereof, of any person or group(s) of persons whether acting alone or on behalf of or in connection with any organisation(s) or government(s) committed for political, religious, ideological or similar purposes including the intention to influence any government and/or to put the public or any section of the public in fear.

This endorsement also excludes loss, damage, cost or expense of whatsoever nature directly or indirectly caused by, resulting from or in connection with any action taken in controlling, preventing, suppressing or in any way relating in any act of terrorism.

If the Company allege that by reason of this exclusion, any loss, damage, cost or expense is not covered by this insurance the burden of proving the contrary shall upon the Insured

In the event any portion of this endorsement is found to be invalid or unenforceable, the remainder shall remain in full force and effect.

TAX CLAUSE

Please be informed that you are obligated to pay any applicable taxes (which include but not limited to service tax and stamp duty) by the Malaysia tax authorities in relation to this Policy.

THE FOLLOWING CLAUSES/ENDORSEMENTS/WARRANTIES ARE NOT APPLICABLE TO THIS POLICY UNLESS SPECIFICALLY MENTIONED IN THE SCHEDULE OR ENDORSED THERETO

AUDITORS AND ACCOUNTANTS FEES CLAUSE

In the event of a claim being admitted under this Insurance, the Policy shall include Auditors and/or Accountants fees to an amount not exceeding as specified in the schedule each fees being reasonably incurred in:

- a) providing satisfactory proof of pecuniary loss by the Insured.
- b) preparation of a detailed statement as required under Conditions 6 of this policy.

Provided that the terms Auditors and/or Accountants under this clause shall mean a professional Auditor and/or Accountant approved by both the Company and the Insured, or falling such joint approval; nominated by the president of the Malaysian Society of Accountants.

AUTOMATIC ADDITIONS AND DELETIONS CLAUSE

It is hereby declared and agreed that additional personnel will automatically be held covered under this Policy up to a limit as specified in the Schedule provided that notice of each addition be advised by the Insured within 30 days of the date of commencement of employment and the appropriate additional premium paid. Deletions of lives insured will be similarly effected from the date of termination of their employment.

If coverage in excess of the limit specified in the Schedule is required for any new employee, immediate notification must be given by the Insured.

COINSURANCE AND LEADER CLAUSE

Any reference to the "Company" shall be deemed to mean the Companies as stated in the Schedule each of which agrees for its individual proportion set against its name subject to the terms, exceptions and conditions herein or attached hereto or endorsed hereon, that if during the period of insurance stated in the schedule the Insured shall sustain loss or damage in the circumstances provided for by this Policy indemnify the Insured in the manner described in the Schedule.

It is further declared and agreed notwithstanding anything contained to the contrary that the lead coinsurer, is authorised to sign the Policy/ Endorsement/Renewal Receipt.

For all intents and purposes this Policy shall have effect as though each-mentioned insurance companies had issued a separate policy for its individual proportion of the sum insured.

LOSS NOTIFICATION CLAUSE

This insurance will not be prejudiced by any inadvertent delays, errors or omissions in notifying the Company of any circumstances or event giving rise or likely to give rise to a claim under this Policy provided:

- (a) Such delay in notification shall not exceed sixty (60) days from date of occurrence of loss.
- (b) The Company's right to recover (in the name of Insured or otherwise) from any responsible party for the loss shall not have been prejudiced.
- (c) The burden of proving that a loss has occurred shall be upon the Insured.

Subject otherwise to the terms, exceptions and conditions of the Policy.

PAYMENT ON ACCOUNT CLAUSE

The Company agrees that in the event of the occurrence of a loss under this insurance the Company will make payment on account in respect of such loss to the Insured if so desired.

IMPORTANT-We would remind you that you must disclose to us, fully and faithfully, the facts you know or ought to know, otherwise you may not receive any benefit from your Policy. The Insured is requested to read this Policy. If any error or misdescription be found, the Policy should be returned to the issuing office for correction.

DISCLOSURE & POLICY STATEMENT KETERANGAN & KENYATAAN POLISI

1. Under the prudential framework of Corporate Governance the following avenues have been set up to handle customer grievances:-
Di bawah rangka kewaspadaan Kawalan Korporat, cara-cara berikut telah disediakan kepada sesiapa yang ingin membuat aduan:-

a) **The Customer Care Officer of Progressive Insurance Bhd (19002-P) ("Company")** at Tel: 1-800-888-458 or Fax: 603 2118 8103.
At branch level, complaints can be received by the respective Branch Managers who will direct them to the Customer Care Officer.
Pegawai Khidmat Pelanggan Progressive Insurance Bhd (19002-P) ("Syarikat") di Tel: 1-800-888-458 atau Faks: 603 2118 8103.
Bagi bahagian cawangan, segala aduan boleh ditujukan kepada Pengurus Cawangan yang akan memanjangkan kepada Pegawai Khidmat Pelanggan.

b) **Financial Markets Ombudsman Services (FMOS)** at Tel: 03-2272 2811 or Fax: 03-2272 1577
Any policyholder who is not satisfied with the decision of an insurance company may write to the FMOS, giving details of the dispute, the name of the insurance company and the policy number. Copies of the correspondence between the policyholder and the insurance company must be submitted to facilitate FMOS's reference.
Perkhidmatan Ombudsman Pasaran Kewangan (FMOS) di Tel: 03-2272 2811 atau Faks: 03-2272 1577
Pemegang polisi yang tidak berpuas hati dengan keputusan sesebuah syarikat insurans boleh menulis surat aduan kepada FMOS dengan butir-butir pertikaian, nama syarikat insurans dan nombor polisi. Salinan surat antara pemegang polisi dan pihak syarikat insurans perlu diserahkan kepada FMOS untuk rujukan.

An award of the FMOS is binding on the Company. The policyholder can choose to accept or not. Acceptance is acknowledged only if it is in writing within 14 days of the decision. The Company shall settle the award within 30 days of policyholder's acceptance. But if the policyholder is not satisfied, he can reject the FMOS's decision and pursue an alternative legal recourse instead. There is no fee charged for service of FMOS.
Pihak Syarikat adalah terikat kepada keputusan FMOS. Pemegang polisi boleh memilih sama ada bersetuju atau tidak. Persetujuan hanya diterima secara bertulis dalam tempoh 14 hari. Pihak Syarikat akan menyelesaikan tuntutan dalam tempoh 30 hari dari persetujuan pemegang polisi. Sekiranya pemegang polisi tidak berpuas hati dengan keputusan FMOS, beliau boleh memilih untuk mengambil tindakan alternatif undang-undang. Tidak ada yuran bayaran yang dicaj untuk perkhidmatan FMOS.

The address is / *Alamat ialah:-* **Financial Markets Ombudsman Services / Perkhidmatan Ombudsman Pasaran Kewangan (FMOS)**
Tingkat 14, Blok Utama
Menara Takaful Malaysia
No. 4, Jalan Sultan Sulaiman
50000 Kuala Lumpur

c) **Laman Informasi Nasihat dan Khidmat of Bank Negara Malaysia (BNM)** at Tel: 1-300-88-5465 or Fax: 03-2174 1515
Any policyholder who is not satisfied with the conduct of an insurance company may write to the Corporate Communication Department of BNM, giving details of the complaint, the name of the insurance company and the policy number or the claim number. Documentary support should be provided to facilitate reference.
Laman Informasi Nasihat dan Khidmat di Bank Negara Malaysia (BNM) di Tel: 1-300-88-5465 atau Faks: 03-2174 1515.
Pemegang polisi yang tidak puas hati dengan bimbingan pihak syarikat insurans boleh membuat aduan kepada Jabatan Komunikasi Korporat di BNM dengan butir-butir pertikaian, nama pihak syarikat insurans dan nombor polisi atau nombor tuntutan. Sokongan dokumen perlu diserahkan untuk rujukan.

The address is / *Alamat ialah:-* **Pengarah**
Bank Negara Malaysia
Laman Informasi Nasihat dan Khidmat (BNMLINK)
Tingkat 4, Podium Bangunan AICB,
No. 10, Jalan Dato' Onn,
50480 Kuala Lumpur
URL: bnm.gov.my/BNMLINK

- c) By virtue of the Anti-Money Laundering & Anti-Terrorism Financing Act 2001, any 'Suspicious Transaction' as classified by the law is required to be reported to the Competent Authority at Bank Negara Malaysia.
Bersandarkan Akta Pencegahan Pengubahan Wang Haram & Pencegahan Pembiayaan Keganasan 2001, sebarang 'Transaksi yang Mencurigakan' seperti yang termaktub di bawah undang-undang hendaklah dilaporkan kepada pihak berkuasa yang berkenaan di Bank Negara Malaysia.
- d) For all intents and purposes where there is a conflict or ambiguity as to the meaning in the English provisions or the Bahasa Malaysia provisions of any part of the contract, it is hereby agreed that the English version of the contract prevails.
Boleh dikatakan di mana terdapat konflik atau keaburan berkenaan makna dalam peruntukan Bahasa Inggeris atau peruntukan Bahasa Malaysia tentang mana-mana bahagian kontrak, adalah dipersetujui bahawa versi kontrak Bahasa Inggeris akan mengatasi dan diikuti.

e) **CONSENT TO USE OF PERSONAL DATA** : Any personal information collected or held by the Company (whether contained in this application or otherwise obtained) is provided to the Company and may be held, used and disclosed by the Company to individuals, service providers and organizations associated with the Company or any other selected third parties (within or outside of Malaysia, including reinsurance and claims investigation companies and industry associations) for the purpose of storing and processing this application and providing subsequent service(s) for this purpose, the Company's financial products and services and data matching, surveys and to communicate with me/us for such purposes. I/We understand that I/We have the right to obtain access to and to request correction of any personal information held by the Company concerning me/us. Such request can be made by writing to the Company at Data Protection Officer, Progressive Insurance Bhd, Level 6,9 and 10, Wisma Cosway, Plaza Berjaya 12, Jalan Imbi, 55100 Kuala Lumpur or phone : 1-800-888-458, fax : 603 21188103 or email : customercare@progressiveinsurance.com.my
By submitting your personal information, you are indicating your consent to allow the Company to keep you posted on the Company's latest products, services and upcoming events. If you do not wish to be contacted by the Company, you can opt out anytime by writing to the Company as above.

KEBENARAN UNTUK MENGGUNAKAN MAKLUMAT PERIBADI : *Mana-mana maklumat peribadi yang dikumpulkan atau dipegang oleh pihak Syarikat (sama ada terkandung dalam permohonan ini atau diperolehi dengan cara lain) yang diberikan kepada pihak Syarikat dan boleh dipegang, digunakan dan didedahkan oleh pihak Syarikat kepada individu, badan atau organisasi yang menyediakan perkhidmatan, organisasi yang berkaitan dengan Syarikat atau mana-mana pihak ketiga yang dipilih (dalam atau luar Malaysia, termasuk syarikat-syarikat reinsurans dan penyiasatan tuntutan dan persatuan/perbadanan industri) bagi tujuan menyimpan dan memproses permohonan ini dan memberikan perkhidmatan seterusnya untuk produk dan perkhidmatan kewangan Syarikat dan pepadanan data, soal selidik dan untuk berkomunikasi dengan saya/kami untuk tujuan seperti itu. Saya/ Kami faham bahawa saya/kami berhak memperoleh akses kepada, dan membuat pembetulan kepada apa-apa maklumat peribadi yang dipegang oleh pihak Syarikat berkaitan dengan saya/kami. Permohonan seperti itu boleh dibuat secara menulis kepada pihak Syarikat di Data Protection Officer, Progressive Insurance Bhd, Level 6,9 dan 10, Wisma Cosway Plaza Berjaya, 12, Jalan Imbi, 55100 Kuala Lumpur atau menelefon: 1-800-888-458, fax: 603 2118 8103 or email : customercare@progressiveinsurance.com.my*

Dengan menyerahkan maklumat peribadi anda, anda menunjukkan persetujuan anda untuk membenarkan pihak Syarikat berkomunikasi dengan anda berkenaan produk terbaru, perkhidmatan dan acara-acara baru pihak Syarikat. Jika anda tidak mahu dihubungi oleh pihak Syarikat, anda boleh pilih keluar bila-bila masa dengan menulis kepada pihak Syarikat seperti di-atas.