



TRAVEL PERSONAL ACCIDENT INSURANCE POLICY

What is this product about?

This product will compensate you for bodily injury, disability or death caused by accidental means which injury shall solely by violent, accidental, external and visible cause result in your disablement or necessitate medical and/or surgical treatment or in the event of death, to your nominated beneficiary or legal personal representative,

Special features:

- Affordable premium
- 24-hour protection

What are the covers / benefits provided?

This product covers:-

- | | | |
|----|-------------------------------|--|
| A. | Accidental Death | Pays up to the amount - the Capital Sum Insured in the event of death. |
| B. | Permanent loss or Disablement | Pays up to the amount – equal to the percentage of the Capital Sum Insured as specified in Schedule of Benefits and Compensations for loss of limbs in the event of accident. |
| C. | Medical Expenses | Reimbursement up to the amount – the actual, necessary and reasonable medical, surgical, hospital, nursing home and nursing fees incurred. This Capital Sum is the limit for any one period. |

How much premium do I have to pay?

The total premium that you have to pay per person as follows:-

Benefits	Amount Insured	Premium
A. Accidental Death	Per RM10,000.00	As stated in the Policy Schedule
B. Permanent Loss or Disablement	Per RM10,000.00	
C. Medical Expenses	Limit any one accident – RM500.00	
D. Repatriation Expenses	Limit – RM3,000.00	

For details, please refer to the schedule of Benefits and Compensations

What are the fees and charges that I have to pay?

TYPE	AMOUNT
Service Tax	8% of premium
Stamp Duty	RM10 each policy
Commission paid to the insurance intermediaries (if any)	25% of premium

What are some of the key terms and conditions that I should be aware of?

Definition of Words

- | | |
|----------------------|---|
| Accident | A sudden, unforeseen and fortuitous event. |
| Injury/Bodily Injury | Injury suffered by you caused solely and directly by accident and shall exclude injury caused by sickness, disease or medical disorder. |

PRODUCT DISCLOSURE SHEET

This Product Disclosure Sheet (PDS) is designed to provide you with some key information on your Travel Personal Accident insurance. Other customers have read this PDS and found it helpful; you should read it too

Importance of Disclosure

Consumer Insurance Contract

Pursuant to Paragraph 5 of Schedule 9 of the Financial Services Act 2013, if you are applying for this insurance wholly for purposes unrelated to your trade, business or profession, you have a duty to take reasonable care not to make a misrepresentation in answering the questions in the Proposal Form (or when you apply for this insurance).

You must answer the questions fully and accurately.

Failure to take reasonable care in answering the questions may result in avoidance of your contract of insurance, refusal or reduction of your claim(s), change of terms or termination of your contract of insurance.

The above duty of disclosure shall continue until the time your contract of insurance is entered into, varied or renewed with us.

In addition to answering the questions in the Proposal Form (or when you apply for this insurance), you are required to disclose any other matter that you know to be relevant to our decision in accepting the risks and determining the rates and terms to be applied.

You also have a duty to tell us immediately if at any time after your contract of insurance has been entered into, varied or renewed with us any of the information given in the Proposal Form (or when you applied for this insurance) is inaccurate or has changed.

Non-Consumer Insurance Contract

Pursuant to Paragraph 4(1) of Schedule 9 of the Financial Services Act 2013, if you are applying for this insurance for a purpose related to your trade, business or profession, you have a duty to disclose any matter that you know to be relevant to our 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 your contract of insurance, refusal or reduction of your claims(s), change of terms of termination of your contract of insurance.

The above duty of disclosure shall continue until the time your contract of insurance is entered into, varied or renewed with us.

You also have a duty to tell us immediately if at any time after your contract of insurance has been entered into, varied or renewed with us any of the information given in the Proposal Form (or when you applied for this insurance) is inaccurate or has changed

Compensation / Indemnity

We will pay for compensation on death or injury in accordance with the "Schedule of Benefits & Compensation" attached with this Product Disclosure Sheet. However for claim such as medical expenses, you are compensated on reimbursement basis on the actual amount incurred subject to the limit specified in the policy. You cannot make multiple claims on medical expenses

Cash Before Cover

It is fundamental and absolute special condition of this contract of insurance that the premium due must be paid and received by us before cover commences. If this condition is not complied with then this insurance Policy is automatically null and void.

Claims Procedures

You must give written notice of injury to us within the time frame stipulated in your policy

Death claim A police report and notification to us should be made as soon as possible. The claim form should be submitted with all the supporting documents, such as the death certificate and burial permit. If there is no beneficiary nominated, the dependents of the deceased or administrator of the deceased's estate should provide proof of dependency or the letter of administration

Injury claim You must give written notice of injury to us within twenty one (21) days of such bodily injury. You should submit the claim form with all supporting documents such as the medical report and receipts of payments for hospital expenses to us.

What are the major exclusions under this policy?

This policy does not cover certain losses, such as:

- War Risks
- Terrorism
- Self inflicted injury
- Provoke murder or assault
- High risk sporting activities
- Drugs, AIDS/HIV related illness, Sexually transmitted diseases
- Engaging in military, naval, air force, police or fire service duties

Note: This list is non-exhaustive. Please refer to the sample policy contract for the full list of exclusions under this policy.

Where can I get further information on this insurance policy?

Should you require additional information about this insurance policy, please refer to the 'insuranceinfo' booklet available at all our branches or you can obtain a copy from your insurance intermediary or visit website www.insuranceinfo.com.my

How to lodge a complaint and the redress available?

If you have a complaint about our product or services or you are not satisfied with the rejection or offer of settlement of a claim, you can write or call our Complaints Unit to resolve the matter. If you are still not satisfied with our decision, you may also address your complaint to either:-

**Bank Negara Malaysia
Laman Informasi Nasihat dan
Khidmat (BNMLINK)**
4th Floor, Podium Bangunan AICB
No. 10, Jalan Dato' Onn,
50480 Kuala Lumpur
Tel: 1-300-88-5465
Fax: 03-21741515
URL: bnm.gov.my/BNMLINK
SMS : 15888

**Financial Markets
Ombudsman
Services (FMOS)**
Tingkat 14, Blok Utama
Menara Takaful Malaysia
No. 4, Jalan Sultan Sulaiman
50000 Kuala Lumpur.
Tel: 03-2272 2811
Fax: 03-2274 5752
E-mail: pertanyaan@fmb.org.my
Website: www.fmos.org.my

Other types of Personal Accident cover available:

- Progressive Family PA
- Personal Accident

If you have any inquiries about our Travel Personal Accident Insurance or any other types of insurance products, please contact us or any of our branches or your insurance intermediary or visit our website: www.progressiveinsurance.com.my

PROGRESSIVE INSURANCE BHD (197401001891) (19002-P)

HEAD OFFICE	6 th , 9 th & 10 Floor, Menara Cosway, Plaza Berjaya, No. 12, Jalan Imbi, 55100 Kuala Lumpur, P.O. Box 10028, 50700 Kuala Lumpur.	Tel: +603-2118 8000	Fax: +603-2118 8098
KOTA KINABALU	Ground & 7 th Floor, Wisma Perkasa, Jalan Gaya, P.O. Box 13936, 88845, Kota Kinabalu, Sabah.	Tel: +6088-244 216	Fax: +6088-218 004
KUCHING	Sublot 11 & 12, Lots 9966 & 9967, First Floor, Premium 101, Jalan Tun Jugah, 93350 Kuching. P.O. Box 2749, 93754 Kuching, Sarawak.	Tel: +6082-572 019	Fax: +6082-572 013
SANDAKAN	1 st Floor, Lot 1, Block 3, Bandar Indah, Mile 4, North Road, 90000 Sandakan, Sabah	Tel: +6089-238 810	Fax: +6089-237 709
JOHOR BAHRU	No. 17-01, Jalan Kebun Teh 1, Pusat Perdagangan Kebun Teh, 80250 Johor Bahru, Johor.	Tel: +607-227 0992	Fax: +607-227 0996
BUTTERWORTH	2755, Ground & 1 st Floor, Jalan Chain Ferry, Taman Inderawasih, 13600 Prai, Seberang Prai Tengah, Penang.	Tel: +604-397 7128	Fax: +604-397 7126
MELAKA	13-A, Jalan Melaka Raya 24, Taman Melaka Raya, 75000 Melaka.	Tel: +606-288 3831	Fax: +606-288 3832
ALOR SETAR	No. 223, Tingkat Dua, Jalan Gangsa, Taman Perindustrian Ringan Kristal, 05150 Alor Setar.	Tel: +604-7339846	Fax: +604-7339691

IMPORTANT NOTE:

YOU ARE ADVISED TO NOTE THE SCALE OF BENEFITS FOR DEATH AND DISABLEMENT IN YOUR INSURANCE POLICY. YOU MUST NOMINATE A NOMINEE AND ENSURE THAT YOUR NOMINEE IS AWARE OF PERSONAL ACCIDENT POLICY THAT YOU HAVE PURCHASED. YOU SHOULD READ AND UNDERSTAND THE INSURANCE POLICY AND DISCUSS WITH THE AGENT OR CONTACT THE COMPANY DIRECTLY FOR MORE INFORMATION.

The benefits payable under eligible Policy 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)

The information provided in this disclosure sheet is valid as at 01.01.2026