

Credit Card Debit Authorisation

1 To Be Completed By The Credit Card Holder

Our Registration No. : _____

To: **Zurich Life Insurance Malaysia Berhad (8029-A)**

I hereby request and authorise you to charge and debit the credit card account set out below with the following premiums and/or loan repayment for the following insurance policy/ies.

Particulars of cardholder

Name _____ NRIC No. _____
 Card No. _____
 Expiry Date / - / Card Issuing Bank _____

Master* Visa* * Please tick whichever applicable

2 Premium Payment Instruction

One-time Payment <input type="checkbox"/>	I authorize ZURICH LIFE INSURANCE MALAYSIA BERHAD to charge my credit card for a one-time payment for the insurance policies specified below. I shall be responsible for arranging payment for any subsequent renewals. Note : Single Premium subject to admin charges of 1.5%
Recurring Payment <input type="checkbox"/>	I authorize ZURICH LIFE INSURANCE MALAYSIA BERHAD to charge my credit card and the amount of premium due for such amount as advised by ZURICH LIFE INSURANCE MALAYSIA BERHAD from time to time for the insurance policies specified below. I understand that all renewal premiums will be automatically charged to my credit card until further notice from me.

Application/Policy No.	Name of Policy Owner	Relationship to Cardholder	Premium Payment Amount (RM)	Loan Repayment Amount (RM)

Important Notice

- This facility is restricted to cardholder's spouse, children, parent/ parent-in-law, brother/ sister and his/ her own policies only.
- Please use a new form if you have more than 5 policies.

I fully understand and agree that this authorisation is governed by the Terms and Conditions as specified overleaf.

I hereby give my unconditional and unequivocal consent to you and all your related Companies to process my personal data revealed hereto. You are at liberty to process the data and share the information revealed thereto with any of your service providers and your other related companies provided that the revelation of my personal data is strictly for the purposes in relation to the insurance which I have applied hereto. The consent given hereto is in line with the requirement set forth in the Personal Data Protection Act 2010.

Signature of Credit Card Holder Address _____ _____ _____ Tel No. _____ E-mail _____ Date <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td style="width: 20px; height: 20px;">D</td><td style="width: 20px; height: 20px;">D</td><td style="width: 10px;">-</td><td style="width: 20px; height: 20px;">M</td><td style="width: 20px; height: 20px;">M</td><td style="width: 10px;">-</td><td style="width: 20px; height: 20px;">Y</td><td style="width: 20px; height: 20px;">Y</td><td style="width: 20px; height: 20px;">Y</td><td style="width: 20px; height: 20px;">Y</td></tr> </table>	D	D	-	M	M	-	Y	Y	Y	Y	Signature of Witness Name _____ <input type="checkbox"/> Policyholder <input type="checkbox"/> Sales Advisor <input type="checkbox"/> Others NRIC No. _____ Tel No. _____ Date <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td style="width: 20px; height: 20px;">D</td><td style="width: 20px; height: 20px;">D</td><td style="width: 10px;">-</td><td style="width: 20px; height: 20px;">M</td><td style="width: 20px; height: 20px;">M</td><td style="width: 10px;">-</td><td style="width: 20px; height: 20px;">Y</td><td style="width: 20px; height: 20px;">Y</td><td style="width: 20px; height: 20px;">Y</td><td style="width: 20px; height: 20px;">Y</td></tr> </table>	D	D	-	M	M	-	Y	Y	Y	Y
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D	D	-	M	M	-	Y	Y	Y	Y												

Note : 1) Witness must be age 18 & above,
 2) Witness must be the person other than the credit card holder

Instructions

1. Please read the information contained in this form before you sign up the authorization form. Zurich Life Insurance Malaysia Berhad has the discretion to accept or reject this application without obligation to give reasons therefor.
2. The authorization form must be submitted to Zurich Life Insurance Malaysia Berhad at least 30 days before the expiry of the first deduction date. All overdue premium(s) falling due up to the expected first deduction date must be paid in full before submission of this authorization form.
3. If you wish to use different credit card accounts to pay for different policies, a separate authorization form is required for each credit card account.
4. If you are currently paying premium by Credit Card Auto Debit, you may include loan repayment by completing this form.
5. Please send the Credit Card Debit Authorisation Form to the nearest Zurich Life Insurance Malaysia Branch office.
6. The Terms and Conditions attached form an integral part of this authorisation.

Terms & Conditions of Zurich Credit Card Payment

In consideration of Zurich Life Insurance Malaysia Berhad agreeing to accept this authorisation, I agree to the following terms and conditions:-

1. I shall accept full responsibility for all transactions arising from the use of this credit card in payment of premium(s) and/or loan repayments.
2. Zurich Life Insurance Malaysia Berhad shall not be held responsible or liable for any claims, loss, damage, costs and expenses arising from the successful processing or the unsuccessful processing of the debit due to exceeding credit limit, malfunction of the system, electricity failure and/or any other factors beyond the control of Zurich Life Insurance Malaysia Berhad.
3. Zurich Life Insurance Malaysia Berhad is only responsible for making arrangements to debit my credit card account through the Card Centre as authorised by me. I acknowledge and agree that the Credit Card Debit Authorisation payment service is provided by Zurich Life Insurance Malaysia Berhad solely for my convenience and benefit. Therefore, for any problem or dispute arising from the processing/debiting it will be my own responsibility to resolve it with my credit card company (including but not limited to any problems due to a breakdown or malfunction or mechanical defect of the computer system or equipment of the credit card company).
4. I hereby agree to jointly and severally indemnify and keep you indemnified in full against any claims, loss, damage, costs and expenses which Zurich Life Insurance Malaysia Berhad may suffer or incur arising from my authorisation to debit my credit card account as aforesaid.
5. Premium payments will be considered as paid only upon successful processing of the debit by the credit card company, and the actual receipt of the full premium payment, as the case may be by Zurich Life Insurance Malaysia Berhad.
6. I will ensure that Zurich Life Insurance Malaysia Berhad is notified in writing of any changes, loss or replacement of my credit card, or cancellation of this authorisation at least one (1) month before the next premium(s) due. Such changes or cancellation will become effective only after Zurich Life Insurance Malaysia Berhad has duly acknowledged receipt of such notification.
7. Zurich Life Insurance Malaysia Berhad may at its sole and absolute discretion terminate this Credit Card Debit Authorisation payment service at any time without assigning any reason by giving the policy owner a notice in writing.
8. **Amendment** - If the premium payment amount for the above policy is changed for any reason, Zurich Life Insurance Malaysia Berhad is authorised to change the amount to be charged to or debited from the above credit card account accordingly irrespective of whether the Credit Card Holder is the Policy Holder and irrespective of whether the Credit Card Holder has notice of the change in the premium payment amount.
9. **Cancellation** – To discontinue the Credit Card Debit Authorisation payment service and terminate this authorisation, the Policy Owner or the Credit Card Holder must inform Zurich Life Insurance Malaysia Berhad in writing at least one (1) month from the deduction date for the next premium due date.
10. **Receipts** – Receipts will not be issued for recurring premium payments made through the Credit Card Debit Authorisation payment service. I shall refer to and my/our credit card statement for confirmation of payments.
11. Zurich Life Insurance Malaysia Berhad will initiate an attempt to deduct the total sum of premium payment. No partial deduction of the total sum will be made in any instance.
12. In the event that any moneys charged to or debited from the above credit card account is refundable by Zurich Life Insurance Malaysia Berhad for any reason, Zurich Life Insurance Malaysia Berhad is authorised to refund the same to either the Policy Owner or the Credit Card Holder and shall thereafter be fully discharged from all obligations pertaining to the same. Should any dispute or issue arise regarding any payment or refund of moneys paid pursuant to this authorisation, both the Policy Owner and Credit Card Holder shall refer only to each other for remedies and resolutions.

Zurich Life Insurance Malaysia Berhad (8029-A)

(Formerly known as Zurich Insurance Malaysia Berhad)

11th Floor, Menara Zurich, No.12, Jalan Dewan Bahasa, 50460, Kuala Lumpur, Malaysia

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