

This Certificate of Insurance is issued based on your answers to the health questions asked which you have all declared as “No” including disclosure of your height and weight which we have assessed be an acceptance range.  
*Sijil Insurans ini dikeluarkan berdasarkan jawapan anda kepada soalan kesihatan yang telah anda nyatakan sebagai “Tidak”, termasuk pendedahan tentang tinggi dan berat badan anda yang telah kami nilaikan sebagai julat yang boleh diterima.*

**CERTIFICATE OF INSURANCE***SIJIL INSURANS*

<b>Master Policy Number</b> <i>Nombor Polisi Induk</i>	: <<master policy number>>	<b>Certificate of Insurance Number</b> <i>Nombor Sijil Insurans</i>	: <<COI number>>
<b>Master Policy Owner</b> <i>Pemilik Polisi</i>	: <<mater policy owner name>>		
<b>Life Assured</b> <i>Hayat Yang Diinsuranskan</i>	: <<life assured name>>		
<b>Identity Card Number</b> <i>Nombor Kad Pengenalan</i>	: <<IC number>>	<b>Age (Last Birthday)</b> <i>Umur (Hari Jadi Akhir)</i>	: <<life assured's age>>
<b>Correspondence Address</b> <i>Alamat Surat Menyurat</i>	: <<correspondence address>>		
<b>Is Covered under the</b> <i>Dilindungi di bawah</i>	: Zurich Critical Illness Insurance (Comprehensive)/ <i>Insurans Penyakit Kritikal Zurich (Komprehensif)</i>		
<b>Effective Date</b> <i>Tarikh Berkuatkuasa</i>	: <<effective date>>	<b>Expiry Date</b> <i>Tarikh Tamat</i>	: <<expiry date>>

**SCHEDULE OF BENEFITS**  
*JADUAL MANFAAT***Benefits***Manfaat*CRITICAL ILLNESS (CI)/ *PENYAKIT KRITIKAL*EARLY-STAGE ILLNESS/ *PENYAKIT PERINGKAT AWAL*CI INCOME/ *PENDAPATAN PENYAKIT KRITIKAL*SECOND MEDICAL OPINION BENEFIT/ *MANFAAT PENDAPAT PERUBATAN KEDUA*PREMIUM/ *PREMIUM***SUM ASSURED***JUMLAH PERLINDUNGAN*

&lt;&lt;according to schedule of benefit&gt;&gt;

&lt;&lt;according to schedule of benefit&gt;&gt;

<<according to schedule of benefit>> per month/ *sebulan*Up to/ *Sehingga* **RM2,000.000**<<modal premium>> (<<Annual or Monthly/ *Tahunan or Bulanan*>>)

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**Chief Executive Officer**  
*Ketua Pegawai Eksekutif***Issue Date:** 01 Jan 2026  
*Tarikh Dikeluarkan*

**The benefits payable are protected by Perbadanan Insurans Deposit Malaysia (PIDM) up to limits. Please refer to PIDM's Takaful and Insurance Benefits Protection System (TIPS) brochure or contact Zurich Life Insurance Malaysia Berhad or PIDM (visit [www.pidm.gov.my](http://www.pidm.gov.my)).**

*Manfaat-manfaat yang dibayar adalah dilindungi oleh Perbadanan Insurans Deposit Malaysia (PIDM) sehingga had perlindungan. Sila rujuk Brosur Sistem Perlindungan Manfaat Takaful dan Insurans (TIPS) PIDM atau hubungi Zurich Life Insurance Malaysia Berhad atau PIDM ((layari [www.pidm.gov.my](http://www.pidm.gov.my)).*

## PART 1 - DEFINITIONS

Unless otherwise required by the context, the following definitions shall apply:

**ACCIDENT** shall mean a sudden, unintentional, unexpected, unusual and specific event that occurs at an identifiable time and place, which shall, independently of any other cause, be the sole cause of bodily Injury.

**ASSESSMENT PERIOD** means the period during which We will assess a condition before deciding whether or not the condition qualifies as being permanent. The assessment period will be for the minimum period time frame stated in the relevant definition and will not be longer than twelve (12) months (provided all required evidence has been submitted).

**SUM ASSURED** shall mean the amount of insurance coverage of Zurich Critical Illness Insurance (Comprehensive) when it is issued as shown on the Certificate of Insurance or as shown on Endorsement (as the case may be).

**CERTIFICATE OF INSURANCE** shall mean the individual Certificate of Insurance issued by Us under this Master Policy to the Life Assured.

**ENDORSEMENT** shall mean an addendum to the Master Policy or Certificate of Insurance that changes the original provisions subject to its term and condition and approved by Us.

**EXPIRY DATE** shall mean the date as shown in the Certificate of Insurance on which the coverage of Life Assured shall cease if not terminated earlier in accordance with the provisions herein.

**LIFE ASSURED** shall mean the person described in the Certificate of Insurance.

**LAPSE OR LAPSED** shall mean "Lapse in coverage" where the Certificate of Insurance no longer provides any coverage or benefit for the Life Assured.

**PREMIUM** shall mean the amount payable by the Life Assured for Life Assured's insurance coverage under the Certificate of Insurance.

**MASTER POLICY** shall mean the Certificate of Insurance, any rider, Endorsement and the application of the Master Policy Owner, constituting the entire policy between the Master Policy Owner and Us.

**MASTER POLICY OWNER** shall mean the owner of the Master Policy and refers to the person / organization / company whose name is specified in the Certificate of Insurance.

**PERMANENT** means expected to last throughout the lifetime of the Life Assured.

**PERMANENT NEUROLOGICAL DEFICIT WITH PERSISTING CLINICAL SYMPTOMS** means symptoms of dysfunction in the nervous system that are present on clinical examination and expected to last throughout the lifetime of the Life Assured. Symptoms that are covered include numbness, paralysis, localised weakness, dysarthria (difficulty with speech), aphasia (inability to speak), dysphagia (difficulty swallowing), visual impairment, difficulty in walking, lack of coordination, tremor, seizures, dementia, delirium and coma.

**PRE-EXISTING ILLNESS** shall mean any conditions, illnesses or disabilities which existed before the Effective Date or effective date of change, whichever is later, and for which the Life Assured has reasonable knowledge of. A Life Assured is considered to have reasonable knowledge of a pre-existing condition is one for which: -

- a) The Life Assured had received or is receiving treatment;
- b) Medical advice, consultation, diagnosis, care or treatment has been recommended;
- c) Clear and distinct signs or symptoms are or were evident; or
- d) Its existence would have been apparent to a reasonable person in the circumstances.

**WE, US and OUR** shall mean Zurich Life Insurance Malaysia Berhad.

*In this Certificate of Insurance where consistent with the contents, the singular shall include the plural and the plural shall include the singular, words importing the masculine gender shall include the feminine gender, unless otherwise required by the context.*

*This document may be translated to Bahasa Malaysia and in the event of inconsistency between the English version and the Bahasa Malaysia translation, the English version shall prevail.*

## PART 2 – BENEFIT PROVISIONS

While this Certificate of Insurance is in-force, upon receipt of due proof and subject to the provisions within the Master Policy, We shall provide the following benefits:

### SECTION 1 – CRITICAL ILLNESS

In the event the Life Assured is diagnosed with any of the Critical Illness as defined in this Certificate of Insurance, We shall pay the Sum Assured for Critical Illness as specified in the Schedule of Benefit, less any amounts approved under the Early-Stage Illness.

#### Critical Illness:

- a. Cancer;
- b. Heart Attack;
- c. Stroke;
- d. Serious Coronary Artery Disease;
- e. Kidney Failure;
- f. End-stage Liver Failure; and
- g. End-stage Lung Disease

This benefit shall be paid in one lump sum, less any indebtedness. Upon such payment, coverage for Early-Stage Illness shall cease immediately.

### SECTION 2 – EARLY-STAGE ILLNESS

In the event that the Life Assured is diagnosed with any of the Early-Stage Illness as defined in this Certificate of Insurance, We shall pay the Sum Assured for Early-Stage Illness as specified in the Schedule of Benefit. The amount payable for Critical Illness will then be reduced by the amount paid under this benefit.

#### Early-Stage Illness:

- a. Carcinoma in situ of Specified Organs or Early Stage of Prostate/Thyroid/Bladder/Chronic Lymphocytic Leukemia/ Melanoma
- b. Cardiac Pacemaker Insertion or Pericardectomy;
- c. Brain Aneurysm Surgery or Cerebral Shunt Insertion;
- d. Moderately Severe Coronary Artery Disease;
- e. Surgical Removal of One Kidney;
- f. Liver Surgery; and
- g. Acute Severe Asthma or Veno-Cava Filter Insertion

This benefit shall be payable in one lump sum, less any indebtedness.

For the avoidance of doubt, only one Early-Stage Illness claim is allowed per Certificate of Insurance. This benefit shall cease upon termination of the Certificate of Insurance.

### SECTION 3 – CI INCOME

In the event that the Life Assured is diagnosed with any of the Critical Illness as defined in this Certificate of Insurance, We shall pay a monthly income benefit as specified in the Schedule of Benefits upon survival of the Life Assured for a maximum duration of three (3) consecutive months.

The first CI income payment will be made upon approval of the claim, based on the approval date, and each subsequent payment will be made monthly, on the corresponding date of each month following the approval date.

The CI Income benefit shall cease to be payable upon death of the Life Assured. The Certificate of Insurance shall terminate upon full payment of the CI Income benefit.

### SECTION 4 – SECOND MEDICAL OPINION BENEFIT

In the event that the Life Assured is diagnosed with any of the Critical Illness or Early-Stage Illness as defined in this Certificate of Insurance, We will reimburse the charges for obtaining a second medical opinion for a diagnosed condition.

This benefit covers consultation fees with another specialist, as well as costs for imaging, radiology, diagnostic tests, and laboratory tests recommended by the specialist to help assess the medical condition and provide a second medical opinion.

The total amount reimbursable shall not exceed the maximum amount stated in the Schedule of Benefits. This benefit shall cease upon termination of the Certificate of Insurance.

### SECTION 5 – EXCLUSION

The Certificate of Insurance shall not cover the following:

- a. Pre-existing Illness that is directly or indirectly related to the Critical Illness or Early-Stage Illness claim;
- b. other than the first incidence of the Critical Illness or Early-Stage Illness;
- c. Critical Illness or Early-Stage Illness of which the signs and symptoms is manifested prior to or within the Waiting Period;
- d. any injury or illness caused directly or indirectly, wholly or partly, by self-inflicted injury while sane or insane, willful misuse of alcohol and / or the taking of drugs otherwise than under the direction of a registered medical practitioner;
- e. any Critical Illness or Early-Stage Illness was diagnosed, whether directly or indirectly, due to a congenital defect or disease, which was manifested or was diagnosed before the Life Assured attained 17 years of age;
- f. the Critical Illness or Early-Stage Illness was caused directly or indirectly by the existence of Acquired Immune Deficiency Syndrome (AIDS) or by the presence of any Human Immuno-deficiency Virus (HIV) infection. We reserve the right to require the Life Assured to undergo a blood test to detect the presence of any HIV infection as a condition precedent before accepting any claim. For the purpose this,
  - i. the definition of AIDS shall be that used by the World Health Organisation in 1987, or any subsequent revision by the World Health Organisation of that definition; and

- ii. infection shall be deemed to have occurred where blood or other relevant test(s) indicate, in the Company's sole and absolute opinion, either the presence of any Human Immunodeficiency Virus or antibodies to such virus.
- g. death of the Life Assured within fifteen (15) days following the date of diagnosis of any of the Critical Illness or Early-Stage Illness.

## **SECTION 6 – WAITING PERIOD**

A waiting period of sixty (60) days from the Effective Date shall apply to the following Critical Illnesses:

- a. Cancer;
- b. Heart Attack; and
- c. Serious Coronary Artery Disease.

For other Critical Illness or Early-Stage Illness, a waiting period of thirty (30) days from the Effective Date shall apply.

Critical Illness or Early-Stage Illness arising directly from an accident shall not be subject to any Waiting Period.

## **SECTION 7 – CLAIMS**

1. Notice of Claim  
Notice of claim must be given to Us within six (6) months after the date of diagnosis of the Critical Illness or Early-Stage Illness. Such notice is considered given to Us if it is given with sufficient information and particulars to identify the Life Assured. We have the right to ask for proof covering the occurrence, the character and the extent of the claim event in any form as We prescribed.
2. Proof of Claim  
Proof of claim in such forms as We prescribed must be furnished to Us at the expense of the claimant. Every diagnosis of any of the aforesaid disabilities must be supported by acceptable clinical, radiological, histological and laboratory evidence and confirmed by a registered medical practitioner. We may request the Life Assured to be examined by Our nominated physicians.

## **PART 3 - GENERAL PROVISIONS**

### **SECTION 1 – THE CERTIFICATE OF INSURANCE**

The Certificate of Insurance is issued in consideration of the payment of Premium as specified in the Schedule of Benefits, pursuant to:

- (a) the answers provided by Life Assured in the application/proposal form or any subsequent questionnaires provided by Us on any matters relating to the proposal and any disclosures made by Life Assured between the time of submission of the application/proposal and the time this Certificate of Insurance is entered into; and
- (b) any other reports (where applicable).  
(collectively referred to as 'the material information').

and such material information shall form part of the Certificate of Insurance between Us and Life Assured. Life Assured has a duty to take reasonable care not to make a misrepresentation in providing the material information in that the answers provided should be accurate. However, in the event of any pre-contractual misrepresentation made in relation to such material information, only the remedies in Schedule 9 of the Financial Services Act 2013 will apply.

Life Assured must inform Us of any change to the information provided to Us in his/her answers or in respect of any matter previously disclosed to Us in relation to the Certificate of Insurance if such changes had taken place after Life Assured have submitted the application for renewal/variation but before the Certificate of Insurance is renewed or varied.

### **SECTION 2 – INCONTESTABILITY AND MISREPRESENTATION**

If this Certificate of Insurance has been in-force for more than two (2) years, this Certificate of Insurance will not be contested except for fraud. In the event of fraud, this Certificate of Insurance shall be voided.

If this Certificate of Insurance has been in-force for two (2) years or less, the remedies in Schedule 9 of the Financial Services Act 2013 in respect of the pre-contractual misrepresentation shall apply.

### **SECTION 3 – AGE AND SEX**

This Certificate of Insurance is issued at the age shown in this Certificate of Insurance, which is the age at last birthday. If the age or sex was misstated in the application form, the benefits or Premium will be adjusted according to the Certificate of Insurance which had been purchased based on the true age or sex.

### **SECTION 4 – PROOF OF AGE**

We may call for proof of Age at any time. Where the Age has not been verified, proof of Age is required before any payment of benefits under this Certificate of Insurance is made.

### **SECTION 5 – NON-PARTICIPATING IN PROFITS**

This is a non-participating Certificate of Insurance and shall not be entitled to share in Our profits.

### **SECTION 6 – CURRENCY AND PLACE OF PAYMENT**

All amounts payable either to Us or by Us will be in Malaysian Ringgit and at Our office shown on the Schedule of Benefits or any payment channel which has been approved by Us.

### **SECTION 7 – TAX**

All Premium and fees payable under the Certificate of Insurance may be subject to Tax in line with prevailing regulations. If Tax is imposed, it will be stated in the invoice, and We may claim or collect the Tax from the Life Assured.

### **SECTION 8 – INFORMATION AND TERMS AND CONDITIONS RELATING TO INTERNATIONAL AUTOMATIC EXCHANGE OF INFORMATION FOR TAX PURPOSES AND CUSTOMER TAX COMPLIANCE**

In connection with legal and regulatory requirements regarding the international exchange of information for tax purposes, including the U.S. Foreign Account Tax Compliance Act (FATCA) and laws and regulations related thereto, We are required to apply certain due diligence procedures to identify the tax residency or tax residencies of certain persons related to the Certificate of Insurance. In order to comply with this obligation, the Life Assured and any person entitled to access the cash value, change the beneficiary or perform certain other actions with respect to the Certificate of Insurance as described by law must at Our request provide Us with an accurate self-certification regarding the jurisdiction or jurisdictions in which the Life Assured is a tax resident and, if applicable, respond to Our request for documentary evidence and a taxpayer identification number or equivalent as is requested under the relevant regulation.

In accordance with applicable law, We will periodically report certain information about Life Assured, including name and address, date of birth, place of birth and financial details relating to the Certificate of Insurance to the appropriate tax authority/ies or other authority/ies designated by law.

If the Life Assured moves to another country and/or if the tax residency of Life Assured changes or differs from the information provided in a self-certification of tax residency or in documentation provided in connection with the Certificate of Insurance, the Life Assured providing that self-certification or documentation must give Us notice prior to such change but no later than within 30 days or such lesser number of days as required by law of such change.

Please note that should Life Assured move to another country, Life Assured may no longer be eligible to make payments into the Certificate of Insurance or to make any investment decision relating to the Certificate of Insurance. The local laws and regulations of the jurisdiction to which Life Assured move may affect Our ability to continue to service the Certificate of Insurance in accordance with its terms and conditions. Therefore, We reserve all rights to take any steps, including the right to cancel or terminate the Certificate of Insurance with immediate effect or with a notice period of the minimum number of days permitted by law.

If this Certificate of Insurance is transferred/assigned to a new Life Assured or a new Life Assured is added to the Certificate of Insurance the original Life Assured must give Us prior notice of such change to the Certificate of Insurance. Each new or additional Life Assured must promptly or with the minimum number of days permitted by law respond to Our request for an accurate self-certification regarding the jurisdiction or jurisdictions in which the new/additional Life Assured is a tax resident, and respond to Our request for documentary evidence and a taxpayer identification number or equivalent. In addition to the actions described herein, failure to provide Us with such notice or provide Us the full requested information may impair the rights of the Life Assured under the Certificate of Insurance or result in the termination of the Certificate of Insurance.

We execute payments under the Certificate of Insurance such as payments due to maturity of the Certificate of Insurance, partial or full surrender, or loans only to the Life Assured or beneficiary indicated in the relevant contractual document. These payments can only be made by wire transfer and to a bank account in the name of such Life Assured or beneficiary located in the same jurisdiction as the Life Assured's or, as applicable, the beneficiary's (tax) residency. An exception to these restrictions may be granted after evaluation of the facts and circumstances. Under no circumstances We will execute any policy related cash payments to US residents.

At Our request and based upon an indication that the most recent self-certification or tax residency is required respectively may no longer be reliable or accurate, a Life Assured must promptly or with the minimum number of days permitted by law provide a new self-certification and other supporting documentation as requested by Us.

We reserve the rights to take any steps, including the right not to execute payment instructions until We have received all information and documentation, or to cancel the Certificate of Insurance, with immediate effect or with a notice period of the minimum number of days permitted by law, in the event that We discover that a Life Assured and/or beneficiary provided an incorrect self-certification, that any other information or documentation provided in connection with identification and due diligence procedures is inaccurate or incomplete or a Life Assured did not provide Us with a self-certification or other information as requested by Us within the response time set out in Our request.

Failure to fully respond to Our request within the time period allowed may result in the reporting of information about the Life Assured to the appropriate tax authority or other authorities.

We do not provide any tax advice. Any information relating to applicable tax laws and regulations is of a general nature only. This Certificate of Insurance is designed for Life Assured who are resident in Malaysia. If the Life Assured decide to live outside of Malaysia after this Certificate of Insurance has been issued, and any questions or wish to receive additional information with respect to any of the provisions set forth above, We recommend obtaining independent advice.

We reject any responsibility or liability whatsoever for any adverse tax consequences that may arise in respect of the Certificate of Insurance and/ or any payments made under the Certificate of Insurance as a result of changing the country of residency.

This Certificate of Insurance has been concluded based on the legal and regulatory requirements in force and applicable at the time of conclusion. Should the mandatory legal and regulatory requirements applicable to this Certificate of Insurance change, in particular if changes to the country of residency, and as a consequence We are not able to continue performing the Certificate of Insurance without potential material adverse effect to Us, to meet the changed legal and regulatory requirements We are entitled to modify the contractual terms and conditions, or to terminate the Certificate of Insurance.

We will inform whenever reasonably possible in advance about the changes in the contractual terms and conditions. In the case of termination of the Certificate of Insurance, We will send a termination notice and the Certificate of Insurance will terminate in accordance with the termination notice.

We reject any responsibility or liability whatsoever for any cost incurred by, or liability imposed on, a Life Assured as a result of Our good faith efforts to comply with requirements regarding the identification, due diligence or reporting of information relating to Life Assured for tax purposes.

## **SECTION 9 – SANCTIONS**

All financial transactions are subject to compliance with applicable trade or economic sanctions laws and regulations. We will not provide the Master Policy Owner, Life Assured, beneficiary or any third party with any services or benefits including but not limited to acceptance of Premium payments, claim payments and other reimbursements, if in doing so We violate applicable trade sanctions laws and regulations.

We may terminate the Certificate of Insurance if We identify the Master Policy Owner, Life Assured, beneficiary or the Master Policy Owner's directors or officers as sanctioned persons, or the Master Policy Owner, Life Assured, beneficiary or the Master Policy Owner's directors or officers conduct an activity which is sanctioned, according to trade or economic sanctions laws and regulations.

## **SECTION 10 – GOVERNING LAW**

This Certificate of Insurance is issued under the laws of Malaysia and is subject and governed by the laws prevailing in Malaysia.

## **SECTION 11 – NOTICE**

Any notices, requests, instructions or correspondences to be given by Us shall be sent by post, electronic means or any other methods deemed practicable, and such communication shall be conclusively deemed to have been received by the Life Assured.

## **SECTION 12 – ALTERATION**

No alterations in the terms of this Certificate of Insurance or any Endorsement thereon will be held valid unless the same is signed or initialed by Our authorised representative with three (3) months advance notice by providing valid reason.

## **SECTION 13 – COOLING-OFF PERIOD**

The Life Assured shall have the right to cancel the Certificate of Insurance by giving notice to Us within fifteen (15) days after the delivery of this Certificate of Insurance. Upon cancellation, We shall refund the full premium paid. Upon refund of the premium, Our liability under the coverage for the Life Assured shall cease. Cooling-off Period is not applicable at renewal of the Certificate of Insurance.

## **SECTION 14 – PREMIUM PROVISIONS**

All Premiums payable under this Certificate of Insurance must be paid to Us on or before the due date, in the currency and amount specified in the Schedule of Benefits or Endorsement.

The premiums applicable are not guaranteed. Premiums are payable at the premium rate according to the Life Assured's attained age, sex, smoker status, selected plan option and shall be based on the rates at the time of renewal. We may change premium, by giving an advance notification to the Life Assured at least thirty (30) days prior to the anniversary of the Certificate of Insurance.

We allow a Grace Period of thirty-one (31) days from the premium due date to make payment. The Certificate of Insurance will remain in force during this Grace Period. If the premium is not paid by the end of the Grace Period, the Certificate of Insurance will Lapse and coverage will cease.

Upon payment of benefit under Critical Illness, any unpaid premiums for the full certificate year will be deducted from the amount payable.

### **SECTION 15 – CANCELLATION**

Life Assured may cancel this Certificate of Insurance at any time by giving advance notice to Us. Upon cancellation (other than cancellations during the cooling-off period), the Life Assured is entitled for a refund of premium as per the schedule below, provided that the Life Assured has not made a claim and the premium is paid annually. The amount of premium refund shall be based on the duration the Certificate of Insurance has been in force. For avoidance of doubt, no premium refund will be given if the Life Assured has selected to pay premiums on a monthly basis.

<b>Period Not Exceeding</b>	<b>Refund of Annual Premium Paid</b>
15 days	90% (applicable to renewal only)
1 month	80%
2 months	70%
3 months	60%
4 months	50%
5 months	40%
6 months	30%
7 months	25%
8 months	20%
9 months	15%
10 months	10%
11 months	5%
Period Exceeding 11 months	No refund

### **SECTION 16 – TERMINATION**

This Certificate of Insurance shall automatically terminate on earliest of the following events:

- a. On the death of the Life Assured;
- b. Upon the full payment of claim under CI Income;
- c. If this Certificate of Insurance becomes lapsed, is cancelled or not renewed;
- d. At the end of the certificate year following the Life Assured attains seventy-one (71) years old; or
- e. Up to end of the certificate year upon termination of the Master Policy.

Termination of this Certificate of Insurance will have no effect on any claim arising prior to such termination. The payment or acceptance of any Premium hereunder subsequent to the termination of this Certificate of Insurance shall not create any liability but We shall refund any such Premium received without interest.

## PART 4 – DEFINITION OF CRITICAL ILLNESS

Critical Illness	Definition
<b>Cancer</b>	<p>Any malignant tumour positively diagnosed with histological confirmation and characterized by the uncontrolled growth of malignant cells and invasion of tissue. The term malignant tumour includes leukemia, lymphoma and sarcoma.</p> <p>For the above definition, the following are not covered:</p> <ol style="list-style-type: none"> <li>i. All cancers which are histologically classified as any of the following: <ul style="list-style-type: none"> <li>• pre-malignant</li> <li>• non-invasive</li> <li>• carcinoma in situ</li> <li>• having borderline malignancy</li> <li>• having malignant potential</li> </ul> </li> <li>ii. All tumours of the prostate histologically classified as T1NOMO (TNM classification)</li> <li>iii. All tumours of the thyroid histologically classified as T1NOMO (TNM classification)</li> <li>iv. All tumours of the urinary bladder histologically classified as T1NOMO (TNM classification)</li> <li>v. Chronic Lymphocytic Leukemia less than RAI Stage 3</li> <li>vi. All cancers in the presence of HIV</li> <li>vii. Any skin cancer other than malignant melanoma.</li> </ol>
<b>Heart Attack</b>	<p>Death of heart muscle, due to inadequate blood supply, that has resulted in all of the following evidence of acute myocardial infarction:</p> <ol style="list-style-type: none"> <li>i. A history of typical chest pain;</li> <li>ii. New characteristic electrocardiographic changes; with the development of any of the following: ST elevation or depression, T wave inversion, pathological Q waves or left bundle branch block; and</li> <li>iii. Elevation of the cardiac biomarkers, inclusive of CPK-MB above the generally accepted normal laboratory levels or Troponins recorded at the following levels or higher: <ul style="list-style-type: none"> <li>• Cardiac Troponin T or Cardiac Troponin I &gt; / = 0.5 ng/ml</li> </ul> </li> </ol> <p>The evidence must show the occurrence of a definite acute myocardial infarction which should be confirmed by a cardiologist or physician.</p> <p>For the above definition, the following are not covered:</p> <ul style="list-style-type: none"> <li>• occurrence of an acute coronary syndrome including but not limited to unstable angina.</li> <li>• a rise in cardiac biomarkers resulting from a percutaneous procedure for coronary artery disease.</li> </ul>
<b>Stroke</b>	<p>Death of brain tissue due to inadequate blood supply, bleeding within the skull or embolization from an extra cranial source resulting in Permanent Neurological Deficit with Persisting Clinical Symptoms. The diagnosis must be based on changes seen in a CT scan or MRI and certified by a neurologist. A minimum Assessment Period of three (3) months applies.</p> <p>For the above definition, the following are not covered:</p> <ol style="list-style-type: none"> <li>i. Transient ischemic attacks</li> <li>ii. Cerebral symptoms due to migraine</li> <li>iii. Traumatic injury to brain tissue or blood vessels</li> <li>iv. Vascular disease affecting the eye or optic nerve or vestibular functions.</li> </ol>
<b>Serious Coronary Artery Disease</b>	<p>The narrowing of the lumen of Right Coronary Artery (RCA), Left Anterior Descending Artery (LAD) and Circumflex Artery (not inclusive of their branches) occurring at the same time by a minimum of sixty percent (60%) in each artery as proven by coronary arteriography (non-invasive diagnostic procedures are not covered). A narrowing of sixty percent (60%) or more of the Left Main Stem will be considered as a narrowing of the Left Anterior Descending Artery (LAD) and Circumflex Artery. This covered event is payable regardless of whether or not any form of coronary artery surgery has been performed.</p>
<b>Kidney Failure</b>	<p>End-stage kidney failure presenting as chronic irreversible failure of both kidneys to function, as a result of which regular dialysis is initiated or kidney transplantation is carried out.</p>
<b>End-Stage Liver Failure</b>	<p>End-stage liver failure as evidenced by all of the following:</p> <ul style="list-style-type: none"> <li>• Permanent jaundice;</li> <li>• Ascites (excessive fluid in peritoneal cavity); and</li> <li>• Hepatic encephalopathy.</li> </ul> <p>Liver failure secondary to alcohol or drug abuse is not covered.</p>
<b>End-Stage Lung Disease</b>	<p>End-stage lung disease causing chronic respiratory failure.</p>

	<p>All of the following criteria must be met:</p> <ul style="list-style-type: none"><li>i. The need for regular oxygen treatment on a permanent basis;</li><li>ii. Permanent impairment of lung function with a consistent Forced Expiratory Volume (FEV) of less than 1 liter during the first second;</li><li>iii. Shortness of breath at rest; and</li><li>iv. Baseline Arterial Blood Gas analysis with partial oxygen pressures of 55mmHg or less.</li></ul>
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**PART 5 – DEFINITION OF EARLY-STAGE ILLNESS**

Early-Stage Illness	Definition
<p><b>Carcinoma in situ of Specified Organs or Early Stage of Prostate/Thyroid/Bladder/Chronic Lymphocytic Leukemia/ Melanoma</b></p>	<p><b>Carcinoma in situ of Specified Organs</b>                      If one of the following minor cancer conditions is met:</p> <ul style="list-style-type: none"> <li>• Carcinoma-in-situ of the following sites: Breast, uterus, ovary, fallopian tube, vulva, vagina, cervix uteri, colon, rectum, penis, testis, lung, liver, stomach, nasopharynx or bladder.</li> </ul> <p>Carcinoma in situ means the focal autonomous new growth of carcinomatous cells confined to the cells in which it originated and has not yet resulted in the invasion and/or destruction of surrounding tissues. 'Invasion' means an infiltration and/or active destruction of normal tissue beyond the basement membrane. The diagnosis of the Carcinoma in situ must always be supported by a histopathological report. Furthermore, the diagnosis of Carcinoma in situ must always be positively diagnosed upon the basis of a microscopic examination of the fixed tissue, supported by a biopsy result. Clinical diagnosis does not meet this standard.</p> <p>Clinical diagnosis or Cervical Intraepithelial Neoplasia (CIN) classification which reports CIN I, CIN II, and CIN III (severe dysplasia without carcinoma-in-situ) does not meet the required definition and are specifically excluded. Carcinoma-in-situ of the biliary system is also specifically excluded.</p> <p><b>Early-Stage Prostate Cancer</b>                      Prostate Cancer that is histologically described using the TNM Classification as T1a or T1b or T1c or Prostate cancers described using another equivalent classification.</p> <p><b>Early-Stage Thyroid Cancer</b>                      Thyroid Cancer that is histologically described utilising the TNM Classification as T1N0M0 as well as Papillary microcarcinoma of thyroid.</p> <p><b>Early-Stage Bladder Cancer</b>                      Urinary Bladder Cancer that is histologically described using the TNM Classification as TaN0M0 or T1N0M0.</p> <p><b>Early-Stage Chronic Lymphocytic Leukemia</b>                      Chronic Lymphocytic Leukaemia (CLL) Rai Stage 1 or 2. CLL Rai stage 0 or lower is excluded.</p> <p><b>Early-Stage Melanoma</b>                      Invasive melanomas of less than 1.5mm Breslow thickness, or less than Clark Level 3. Non-invasive melanoma histologically described as "in-situ" is excluded.</p>
<p><b>Cardiac Pacemaker Insertion or Pericardectomy</b></p>	<p><b>Cardiac Pacemaker Insertion</b>                      Insertion of a permanent cardiac pacemaker that is required as a result of serious cardiac arrhythmia which cannot be treated via other means. The insertion of the cardiac pacemaker must be certified as absolutely necessary by a consultant cardiologist.</p> <p><b>Pericardectomy</b>                      The undergoing of a pericardectomy or undergoing of any surgical procedure requiring keyhole cardiac surgery as a result of pericardial disease. Both these surgical procedures must be supported with relevant investigation reports and certified to be absolutely necessary by a consultant cardiologist.</p>
<p><b>Brain Aneurysm Surgery or Cerebral Shunt Insertion</b></p>	<p><b>Brain Aneurysm Surgery</b>                      The actual undergoing of surgical craniotomy to repair either an intracranial aneurysm or to remove an arteriovenous malformation. The surgical intervention must be certified to be absolutely necessary by a consultant neurologist. Endovascular repair or procedures are not covered.</p> <p><b>Cerebral Shunt Insertion</b>                      The actual undergoing of surgical implantation of a shunt from the ventricles of the brain to relieve raised pressure in the cerebrospinal fluid. The need of a shunt must be certified to be absolutely necessary by a consultant neurologist.</p>
<p><b>Moderately Severe Coronary Artery Disease</b></p>	<p>Mild coronary artery disease in which at least two(2) major coronary arteries are individually occluded by a minimum of sixty percent (60%) or more, as proven by direct coronary angiogram only (non-invasive diagnostic procedures such as CT or MRI are all excluded). For purposes of this definition, "major coronary artery" refers to any of the left main stem artery, left anterior descending artery, circumflex artery and right coronary artery (but not including their branches).</p>
<p><b>Surgical Removal of One Kidney</b></p>	<p>The complete surgical removal of one kidney necessitated by any illness or accident. The need for the surgical removal of the kidney must be certified to be absolutely necessary by a nephrologist. Kidney donation is excluded.</p>
<p><b>Liver Surgery</b></p>	<p>Partial hepatectomy of at least one entire lobe of the liver that has been found necessary as a result of illness or accident of the Life Assured. Liver disease secondary to alcohol or drug abuse and liver donation are excluded.</p>

**Acute Severe Asthma or Veno-Cava Filter Insertion**

**Acute Severe Asthma**

Evidence of an acute attack of Severe asthma with persistent status asthmaticus that requires hospitalisation and assisted ventilation with a mechanical ventilator for a continuous period of at least 4 hours on the advice of a respiratory physician

**Veno-Cava Filter Insertion**

The surgical insertion of a veno-cava filter after there has been documented proof of recurrent pulmonary emboli. The need for the insertion of a veno-caval filter must be certified to be absolutely necessary by a specialist in the relevant field.

## CERTIFICATE INFORMATION STATEMENT

We wish to draw your attention to the following important information:

- (a) Proof of Age will be required at times of maturity/claims if age has not been admitted.
- (b) Premium payments can be made using any payment method available on the Master Policy Owner's app and its affiliate's app or online platform.
- (c) Life Assured can contact our call centre at Head Office for any enquiries or service relating to this Certificate of Insurance.
- (d) If there is a change in Life Assured's or nominee's address, contact number or other personal details, it should be notified to us so that all correspondence can be directed promptly.
- (e) For this Certificate of Insurance to remain in-force, Life Assured is obligated to make premium throughout the certificate term. In the event premium is not made at the end of the Grace Period, this Certificate of Insurance will automatically lapse.
- (f) The Life Assured shall have the right to cancel the Certificate of Insurance by giving notice to Us within fifteen (15) days after the delivery of this Certificate of Insurance. Upon cancellation, We shall refund the full premium paid. Upon refund of the premium, Our liability under the coverage for the Life Assured shall cease. Cooling-off Period is not applicable at renewal of the Certificate of Insurance.
- (g) In the event of any dispute, you may seek arbitration for your case. You may contact:-

i) Financial Markets Ombudsman Services (FMOS)  
Level 14, Main Block, Menara Takaful Malaysia,  
No. 4, Jalan Sultan Sulaiman  
50000 Kuala Lumpur  
Tel: 603-22722811 Fax: 603-22721577  
E-mail : enquiry@ofs.org.my  
Website: www.ofs.org.my

iii) Contact Centre (BNMLINK)  
Bank Negara Malaysia  
4th Floor, Podium Bangunan AICB,  
No.10, Jalan Dato' Onn,  
50480 Kuala Lumpur  
Tel: 1-300-88-5465  
[bnm.gov.my/BNMLINK](http://bnm.gov.my/BNMLINK)

ii) Zurich Life Insurance Malaysia Berhad  
Level 23A, Mercu 3,  
No. 3, Jalan Bangsar,  
KL Eco City, 59200 Kuala Lumpur  
Tel: 603-21096000  
Call Centre: 1-300-888-622  
E-mail: callcentre@zurich.com.my