



Corporate Assist
Business Travel Insurance



Corporate Assist Business Travel Insurance – Proposal Form

PLEASE COMPLETE ALL SECTIONS. INCOMPLETE APPLICATIONS WILL BE REJECTED.

IMPORTANT NOTICE:

Pursuant to Schedule 9 of the Financial Services Act 2013 :

(a) Consumer Insurance Contract - Where the Policyholder and the Insured Person have applied for this insurance wholly for purposes unrelated to their trade, business or profession, the Policyholder and the Insured Person have a duty to take reasonable care not to make a misrepresentation in answering the questions in the Proposal Form or when they applied for this insurance i.e. the Policyholder and the Insured Person should have answered the questions fully and accurately. Failure to have taken reasonable care in answering the questions may result in the cancellation of the contract of insurance, refusal or reduction of claim(s), change of terms or termination of the contract of insurance in accordance with Schedule 9 of the Financial Services Act 2013. The Policyholder and the Insured Person are also required to disclose any other matters that they know to be relevant to the Company's decision in accepting the risks and determining the rates and terms to be applied. The Policyholder and the Insured Person also have a duty to inform the Company immediately if at any time after the contract of insurance has been entered into or varied with the Company, any of the information given in the proposal form or any other document related to this insurance is inaccurate or has changed.

(b) Non-Consumer Insurance Contract - Where the Policyholder and the Insured Person have applied for this insurance for purposes related to their trade, business or profession, the Policyholder and the Insured Person have a duty to disclose any matter that they know 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 the cancellation of their contract of insurance, refusal or reduction of claim(s), change of term(s) or termination of the contract of insurance. The Policyholder and the Insured Person also have a duty to inform the Company immediately if at any time after the contract of insurance has been entered into or varied with the Company, any of the information given in the proposal form or any other document related to this insurance is inaccurate or has changed.

Failure to comply with the section 'Consumer Insurance Contract' and 'Non-Consumer Insurance Contract' may:

1. void this Policy from inception (which means treating it as invalid) and the Company may not return the premium or may recover any unpaid premium;
2. result in refusal or reduction of claims that has been or will be made under the Policy;
3. change the terms of this Policy;
4. terminate this Policy and return any premium less the Company's cancellation charge or recover any unpaid premium;
5. entitle the Company to recover any shortfall in premium;
6. entitle the Company to recover from the Policyholder and the Insured Person the total amount of any claim already paid under the Policy or any claim the Company has to pay under any relevant legislation, plus any recovery costs.

Name of Policyholder:	
Business Address:	
Company Registration No.:	
Nature of Business:	
Tax Registration No.:	SST Registration No.:
Name of Person In Charge:	Email Address:
Contact No.:	Designation:
Period of Insurance	From: _____ To: _____

Insured Persons to be Covered							
No.	Name of Employees	NRIC No.	Date of Birth (eg.14-Mar-75)	Occupation	Plan (Corporate or Premier)	Region (Regional or International)	Domestic Option (Yes or No)
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							

ANNUAL PREMIUM PAYABLE Premium Table without West to East trip (RM) [Price for Domestic Plan inclusive of Service Tax 8%]

Plan Type	Premium Per Person (RM)	Headcount	Domestic Option (Additional Premium applicable)		Total Premium (RM)
Corporate Plan					
Regional	<div><div></div><div>180.00</div></div>	<div><div></div></div>	<div><div></div><div>YES (RM54 per person)</div></div>	<div><div></div><div>NO</div></div>	<div><div></div></div>
International	<div><div></div><div>260.00</div></div>	<div><div></div></div>	<div><div></div><div>YES (RM54 per person)</div></div>	<div><div></div><div>NO</div></div>	<div><div></div></div>
Premier Plan					
Regional	<div><div></div><div>255.00</div></div>	<div><div></div></div>	<div><div></div><div>YES (RM54 per person)</div></div>	<div><div></div><div>NO</div></div>	<div><div></div></div>
International	<div><div></div><div>365.00</div></div>	<div><div></div></div>	<div><div></div><div>YES (RM54 per person)</div></div>	<div><div></div><div>NO</div></div>	<div><div></div></div>
Total Annual Premium					<div><div></div></div>
Stamp Duty					<div><div></div></div>
Grand Total					<div><div></div></div>

ANNUAL PREMIUM PAYABLE Premium Table with West to East trip (RM) [price inclusive of Service Tax 8%]

Plan Type	Premium Per Person (RM)	Headcount	Domestic Option (Additional Premium applicable)		Total Premium (RM)
Corporate Plan					
Regional	<input type="text" value="194.40"/>	<input type="text"/>	<input type="checkbox"/> YES (RM54 per person)	<input type="checkbox"/> NO	<input type="text"/>
International	<input type="text" value="280.80"/>	<input type="text"/>	<input type="checkbox"/> YES (RM54 per person)	<input type="checkbox"/> NO	<input type="text"/>
Premier Plan					
Regional	<input type="text" value="275.40"/>	<input type="text"/>	<input type="checkbox"/> YES (RM54 per person)	<input type="checkbox"/> NO	<input type="text"/>
International	<input type="text" value="394.20"/>	<input type="text"/>	<input type="checkbox"/> YES (RM54 per person)	<input type="checkbox"/> NO	<input type="text"/>
Total Annual Premium					<input type="text"/>
Stamp Duty					<input type="text"/>
Grand Total					<input type="text"/>

DECLARATION AND AUTHORISATION

I hereby declare and agree that:

- a) All written information provided by me for this insurance or in any formal questionnaire or other documents submitted by me in conjunction with this application, and statements and answers so made to AIG Malaysia Insurance Berhad (200701037463) ("Company") are full, complete, true, correct and to the best of my knowledge and belief and that I have not withheld or omitted any information, and I understand and agree that the Company, believing them to be such, will rely and act on them, otherwise any policy and endorsements (if applicable) issued (including renewals) or coverage granted may be void at the Company's option.
- b) I understand that pursuant to Schedule 9 of the Financial Services Act 2013:-
- i) if I am applying for this insurance wholly for purposes unrelated to my trade, business or profession, I have a duty to take reasonable care not to make a misrepresentation in answering the questions asked by the Company and a duty to disclose any other matter that I know to be relevant to the Company's decision in accepting the risks and determining the rates and terms to be applied;
- ii) if I am applying for this insurance for purposes related to my trade, business or profession, I have a duty to disclose any matter that I know 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 contract, claim denied or reduced, terms changed or varied, or contract terminated. I also understand that this duty of disclosure shall continue until the time the contract is entered into, varied or renewed.
- c) I will notify the Company of any material change(s) to my/our risk profile, failing which, the Company reserves the right to either continue cover, impose additional terms of discontinue cover. I understand that failure to notify the Company of any material change(s) to my/our risk profile may affect my/our rights during a claim.
- d) I further agree and consent, and if I am submitting information relating to another individual, I represent and warrant that I have the authority to provide that information to the Company, I have informed the individual(s) about the purposes for which his/her personal information is collected, used and disclosed as well as the parties to whom such personal information may be disclosed by the Company, and the individual(s) agrees and consents, that the Company may collect, use and process my/his/her personal information (whether obtained in this form or otherwise obtained) and disclose such information in accordance with the Company's Privacy Notice found at <https://www.aig.my/privacy-notice>.
- e) If this insurance offers medical or health benefits, I hereby further consent to and authorize, and represent and warrant that my covered family member(s) consent to and authorize, any organization, institution or individual that has any records or knowledge of my/my covered family member(s)' health and medical history, treatment, or advice, to disclose such information to the Company. This information (unless amended by/at my/our request) shall bind me/my covered family member(s), successors and assigns, and remain valid, notwithstanding my/my covered family member(s) death or incapacity. A copy of this authorization shall be as valid as the original.

Signed by Policyholder

Date

NRIC/Company Stamp

IMPORTANT
This brochure nor the Proposal Form is a contract of insurance. Your declarations or disclosures shall for the basis of the contract of insurance, the specific terms, conditions and exclusions applicable to this insurance set out in this policy.

DECLARATION BY AGENT / OFFICER

I hereby confirm that the Policyholder/Insured Person(s) has expressly authorized me to act on his/her/their behalf in respect of the information and/or changes relating to the renewal/endorsement of this insurance policy. I agree to undertake any loss, cost or damages incurred by the said Policyholder/Insured Person(s) in relation to this representation. I declare that I have sighted the original NRIC/Certificate of Incorporation of the Policyholder/Insured Person(s) and have done the necessary Anti Money Laundering check(s) which I have been trained to do and verify that the transaction is not prohibited by virtue of the Anti-Money Laundering & Anti-Terrorism Financing Act 2001.

Signed by Producer

Date

NRIC/Company Stamp

Producer Name:

Producer Code:

Contact No.:

Summary of Coverage

Schedule of Benefits

Section	Benefits	Maximum Benefit Level	
		Corporate Plan	Premier Plan
	Personal Accident Benefit		
1	Personal Accident	RM200,000	RM500,000
	Overseas Medical & Evacuation Benefits		
2	Medical Expenses	RM100,000	RM300,000
3	Post Hospitalization	Up to RM100 per visit (max. 3 visits)	Up to RM150 per visit (max. 3 visits)
4	Hospital Confinement	RM150 per day (max 60 days)	RM200 per day (max 60 days)
5	Double Hospital Confinement Benefit in ICU	RM300 per day (max 60 days)	RM400 per day (max 60 days)
6	Emergency Medical Evacuation	Unlimited	
7	Repatriation of Mortal remains	Unlimited within Malaysia	
		RM15,000 out of Malaysia	RM30,000 out of Malaysia
8	Compassionate Visit	RM5,000	RM8,000
	Travel Inconvenience Benefits		
9	Trip Cancellation	RM8,000	RM10,000
10	Trip Curtailment	RM5,000	RM8,000
11	Travel Delay	RM200 for every 6 hours up to 1,000	
12	Missed Departure	RM250	RM500
13	Baggage Delay	RM200 (up to RM1,000 per person for over 6 hours delay)	RM200 (up to RM1,600 per person for over 6 hours delay)
14	Loss of Baggage & Personal Effects	RM5,000	RM5,000
15	Damage or Loss of Laptop Computer	RM1,000	RM1,250
16	Loss of Travel Documents	RM2,000	RM2,000
17	Loss of Personal Money	RM500	RM1,000
18	Legal Fees	RM15,000	RM15,000
19	Personal Liability	RM500,000	RM1,000,000
20	Credit Card Indemnity	RM3,000	RM5,000
21	Child Education Fund	RM5,000 per year (up to max. 5 years)	
	24 hours Worldwide Travel Assist	Included	

OPTIONAL Domestic Travel

Section	Benefits	Maximum Benefit Level
22	Medical Expenses (due to accident)	RM20,000
23	Evacuation & Repatriation	Unlimited
24	Trip Cancellation	RM500
25	Flight Delay	Up to RM1,000 (RM200 every 6 hours)
26	Baggage Delay	RM200 (by flight only)
27	Loss of Baggage	RM2,000 (excess RM50)
28	Personal Computer	RM2,000
29	Golf Equipment	RM1,000
30	Personal Liability	RM1,000,000

* If travel by land, destination is beyond 100km from the normal place of business or place of residence

REGIONAL COUNTRIES : ASEAN countries, China, Hong Kong, Macau, Taiwan, Korea, Australia, New Zealand, Japan & India.
INTERNATIONAL : Regional countries and Rest of the World.

This policy does not cover any loss, injury, damage or legal liability arising directly or indirectly from planned or actual travel in, to, or through Cuba, Iran, Syria, North Korea, the Crimea region or Donetsk People’s Republic (DNR) and the Luhansk People’s Republic (LNR) regions of Ukraine.

IMPORTANT NOTE:

1. Corporate Assist Business Travel Insurance is only applicable for companies or organizations.
2. Minimum Premium of RM750 (excluding Service Tax and Stamp Duty).
3. Minimum group size of 5 employees.
4. Service Tax (ST) of 8% is applicable for Domestic Option only.
5. Domestic Travel Plan can only be taken on condition that either Corporate Plan or Premier Plan is selected.

Product Disclosure Sheet

Read this Product Disclosure Sheet before you decide to take up Corporate Assist. Be sure to also read the general terms and conditions.

1. What is this product about?

This policy provides compensation in the event of injuries, disability or death caused by sudden and unforeseen accident, medical expenses incurred as a result of an accident or illness, travel inconvenience and travel assistance for trips out of Malaysia to a maximum of 90 days. Domestic travel plan is an optional cover.

2. Who can purchase this cover?

This policy can be purchased by a company to cover the employees who are ordinarily reside in Malaysia and travel. The policy is null and void as to non-residents of Malaysia.

3. What are the covers/benefits provided?

Please refer to the Schedule of Benefits in the brochure.

(a) Accidental death and disablement

- (i) Pays for accidental death or permanent disablement up to the percentage stated in the compensation scale.
- (ii) The loss must occur within 90 days from the date of policy.

(b) Medical expenses incurred whilst overseas

- (i) Reimburses the medical expenses incurred due to sickness and injury.
- (ii) If medical treatment had not been sought overseas, subsequently medical treatment must be sought in Malaysia within 7 days of return to Malaysia.
- (iii) Reimbursement for follow-up treatment is limited to 21 days from the arrival date in Malaysia or 5% of your sum insured, whichever occurs first.
- (iv) If medical treatment had already been sought overseas, then there is a 21 days limit to continue medical treatment in Malaysia, or 5% of your sum insured, whichever occurs first.
- (v) Cover is extended to alternative medicine.
- (vi) Only applicable if the trip is not undertaken against the advice of a doctor, and there are no pre-existing medical conditions.

(c) Medical expenses for domestic travel

Limited to accidental causes only.

(d) Post hospitalization

Reimburses the expenses of physiotherapy and transportation for follow-up treatment in Malaysia up to 3 visits within 35 days after discharge.

(e) Hospital confinement

You will be paid a daily allowance when admitted to a hospital while overseas for up to 60 days.

(f) Double hospital confinement benefit in ICU

- (i) You will be paid a daily allowance when admitted to an intensive care unit while overseas up to 60 days.
- (ii) Payment for each day if claimed under this benefit will not be payable under item (e).

(g) Emergency medical evacuation

- (i) Reimburses the expenses incurred by our appointed service provider to move an employee to another location for treatment, or back to Malaysia.
- (ii) Covers both accident and illness.
- (iii) Decision to evacuate (including service provider, mode and location) will be arranged by us.

(h) Repatriation of mortal remains

- (i) Reimburses the expenses incurred to return the employee's mortal remains back to Malaysia or to the employee's country of origin (includes expenses for a mortician or undertaker).
- (ii) Covers both accident and illness.

(i) Compassionate visit

- (i) Reimburses the expenses of economy travel fare and hotel accommodation incurred by a friend or relative to visit and stay with you when hospitalized overseas for more than 5 days.
- (ii) Only applicable upon doctor's recommendation.

(j) Trip cancellation

Reimburses the expenses of travel and accommodation which has been paid in advance and is not recoverable if the trip is cancelled due to the following occurring within 30 days before departure date:

- (i) Death, illness or compulsory quarantine occurring to you or our close relative who is residing in Malaysia.
- (ii) You have been certified by the doctor to be unfit to travel.
- (iii) Strike, riot, civil commotion or natural disaster occurring at your planned destination.
- (iv) Serious damage to your house due to fire or natural disaster occurring within 7 days before the departure date.
- (v) You have been called to be a witness or to serve as a jury.

(k) Trip curtailment

Reimburses the expenses of additional travel and accommodation incurred for early return to Malaysia due to the following unexpected events:

- (i) Death or illness occurring to you or your close relative who is residing in Malaysia.
- (ii) You have been certified by the doctor to be unfit to travel.
- (iii) Strike, riot or civil commotion, terrorist act or natural disaster.
- (iv) Hijacking of a common carrier which you are traveling in as a passenger.

(l) Travel delay

- (i) Pays for every 6 consecutive hours if your common carrier's scheduled departure is delayed due to:
- Strike/industrial action.
 - Bad weather condition.
 - Mechanical breakdown.
 - Structural defect in the common carrier.
- (ii) This benefit is not applicable if:
- The delay is caused due to cancellation by the common carrier.
 - You failed to check in on time.
 - You were aware of any strike/industrial action when your trip was arranged.

(m) Missed departure

- (i) Reimburses the expenses of hotel accommodation and meals incurred when you miss your connecting common carrier at the transfer point due to the late arrival of your incoming common carrier and no onward transportation is provided within 6 consecutive hours.
- (ii) This benefit is not applicable if you failed to check in on time.

(n) Baggage delay

Pays for every 6 consecutive hours if your baggage is delayed, misdirected or misplaced by the common carrier upon your arrival at the baggage pick-up point.

(o) Loss of baggage & personal effects

Reimburses the loss or damage to your baggage and personal effects provided that:

- (i) The loss is reported to the police or authorities within 24 hours from the loss.
- (ii) You take all the necessary steps to ensure that your baggage is not left unattended.
- (iii) Reimbursement if claimed under this benefit will not be payable under item (n).

(p) Damage or loss of laptop

Reimburses the loss or damage to your laptop provided that:

- (i) The loss is reported to the police or authorities within 24 hours from the loss.
- (ii) You take all the necessary steps to ensure that your laptop is not left unattended.
- (iii) Reimbursement if claimed under this benefit will not be payable under item (o).

(q) Loss of travel documents

- (i) Reimburses the following expenses for loss of travel documents due to burglary, robbery or theft while overseas:
- Cost of obtaining replacement.
 - Additional travel expenses and hotel accommodation incurred.
- (ii) The loss must be reported to the police or authorities within 24 hours from the loss and must not be due to confiscation by the authorities.

(r) Loss of personal money

Pays for the loss of money sustained overseas due to robbery, burglary or theft provided that the loss must be reported to the police within 24 hours of such loss.

(s) Legal Fees

Reimburses the legal costs and expenses arising from dealing with a claim against a third party which caused death or permanent disablement while overseas.

(t) Personal Liability

Pays for legal liability to a third party arising due to:

- (i) death or permanent disablement caused to third party.
- (ii) accidental loss or damage to property of third party.

(u) Credit Card Indemnity

Pays for the credit card expenses incurred during the overseas trip due to death or permanent disablement.

(v) Child Education Fund

Pays an annual payment up to 5 years for each dependant child up to a maximum of 3 children (who are studying) in event of accidental death while overseas.

4. How much premium do I have to pay?

- (a) Please refer to the premium table in the brochure.
- (b) Premium is payable annually.
- (c) Payment must be made within 60 days from the inception of the policy.
- (d) Please keep the proof of premium payment for future reference.

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

- (a) Stamp Duty of RM10 per policy.
- (b) Service Tax (ST) of 8% is applicable for Domestic Option only.
- (c) Commission is payable up to 25% or you may refer to the commission table below.
Commission Table (RM) (per person)

Without West to East Trip

Plan Type	Regional	International	Domestic (optional)
Corporate Plan	45.00	65.00	12.50
Premier Plan	63.75	91.25	

With West to East Trip

Plan Type	Regional	International	Domestic (optional)
Corporate Plan	48.60	70.20	12.50
Premier Plan	68.85	98.55	

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

- (a) Importance of disclosure:

You must take reasonable care to ensure that all your answers to the questions are full, complete, correct and honest and to the best of your knowledge.

You also have a duty to inform **AIG Malaysia** of any change in the information given to us earlier before we issue the policy schedule to you, before you renew or change any of the terms of your policy. If you don't, your policy may be cancelled, or treated as if it never existed, or your claim rejected or not fully paid.

- (b) Claims:

- (i) All claims must be notified to us within 30 days from the date of loss.
- (ii) All supporting documents proving the loss must be submitted 60 days from the date of loss.
- (iii) No claim will be admissible if notified after one year from the date of loss.
- (iv) All claims will be paid to the company or the service provider where applicable.

- (c) Number of policies: You are only entitled to be covered under one policy in respect of this insurance.

- (d) Age:

- (i) You must be 18 years and above and below the age of 70 to qualify for the cover.
- (ii) You will be covered up to the age of 75.
- (iii) Your age will be based on the age as of your last birthday.

- (e) Renewal: Renewal of the policy is at our consent.

7. What are the major exclusions under the policy?

This policy does not cover death or injury caused by or to:

- (a) Members of the armed forces, professional sportsmen.
- (b) Engaging in manual works, offshore activities like diving, oil-rigging, mining, handling explosives or aerial photography.
- (c) Suicide or intentional self inflicted injuries or an attempt to do so while being sane or insane.
- (d) During air travel unless as a fare paying passenger in a licensed private or commercial aircraft.
- (e) Violation of law.
- (f) Mental or nervous disorders.
- (g) Condition where you:
 - (i) are receiving treatment or;
 - (ii) advice, treatment or diagnosis has been recommended or;
 - (iii) symptoms are evident or;
 - (iv) the condition is apparent.
- (h) Acquired Immune Deficiency Syndrome (AIDS) or Human Immune Deficiency Virus (HIV).
- (i) Driving or riding in any type of race.
- (j) Nuclear, chemical or biological materials.
- (k) War.
- (l) Any loss, injury, damage or legal liability arising directly or indirectly from planned or actual travel in, to, or through Cuba, Iran, Syria, North Korea, the Crimea region or Donetsk People's Republic (DNR) and the Luhansk People's Republic (LNR) regions of Ukraine.
- (m) Any loss, injury, damage or legal liability suffered or sustained by residents of Cuba, Iran, Syria, North Korea, the Crimea region or Donetsk People's Republic (DNR) and the Luhansk People's Republic (LNR) regions of Ukraine.
- (n) The Insurer shall not be deemed to provide cover and the Insurer shall not be liable to pay any claim or provide any benefit hereunder to the extent that provision of such cover, payment of such claim or provision of such benefit would expose the Insurer, its parent company or its ultimate controlling entity to any sanction, prohibition, or restriction under United Nations resolutions or the trade or economic sanctions, laws, or regulations of the European Union or the United States of America.

Note:

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

8. Can I cancel my policy?

- (a) The company may cancel the cover by giving us 30 days written notice. The company will be entitled to a refund on a prorated basis.
(b) We can cancel this policy by giving 30 days written notice. The company will be entitled to a refund on a prorated basis.

9. What do I need to do if there are changes to my contact/personal details?

It is important to inform us of any change via written notice or by contacting our Customer Service at 1800 88 8811 / 603 2118 0188.

10. Where can I get further information?

Should you require additional information about Personal Accident Insurance, please refer to the insurance info booklet on "Personal Accident Insurance", available at all our branches or you can obtain a copy from the insurance agent or visit www.insuranceinfo.com.my

If you have any enquiries, please contact us at:

AIG Malaysia Insurance Berhad
P O Box 11768,
50756 Kuala Lumpur
Phone : 1800 88 8811 / 603 2118 0188
Fax: 603-2118 0288
E-mail: AIGMYCare@aig.com

11. Other types of personal accident cover available.

Please refer to our website at: www.aig.my

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 THE PERSONAL ACCIDENT POLICY THAT YOU HAVE PURCHASED.

YOU SHOULD READ AND UNDERSTAND THE CONTRACT TERMS AND DISCUSS FURTHER WITH THE INSURANCE COMPANY IF THERE ARE ANY TERMS THAT YOU DO NOT UNDERSTAND BEFORE ACCEPTING THE POLICY CONTRACT. IF THERE ARE ANY QUESTIONS REGARDING THE TERMS AND CONDITIONS OF THIS PRODUCT DISCLOSURE SHEET, THE INSURED PERSON MAY CONTACT THE INSURANCE COMPANY.

BY ACCEPTING THE POLICY CONTRACT, YOU ACKNOWLEDGE THAT THE KEY CONTRACT TERMS HAVE BEEN ADEQUATELY EXPLAINED BY THE AGENT OR INSURANCE COMPANY TO YOU AND THAT THE POLICY CONTRACT OFFERED IS SUITABLE FOR YOUR INSURANCE NEEDS.

AIG Malaysia Insurance Berhad is licensed under the Financial Services Act 2013 and regulated by Bank Negara Malaysia.

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

The information provided in this disclosure sheet is valid as at 01st March 2025.



Why choose Corporate Assist?

- A complete solution for your business travel insurance needs
- Simple to understand and easy to use
- Totally flexible to suit the changing needs of your company
- Cost effective
- Offers complete peace of mind for you and your company

For the frequent business traveler, we offer a choice of two annual plans: **Corporate Plan** and **Premier Plan**.

Corporate Plan

Our corporate plan is a policy designed the way frequent business travelers want it – convenient and with comprehensive protection. This includes personal accident, medical and travel inconvenience benefits. For complete peace of mind, we also offer 24-hour worldwide emergency assistance service, which is just a call away.

Premier Plan

In addition to the convenience of a 24-hour worldwide emergency assistance service, our Premier Plan offers a higher amount of coverage for personal accident, medical expenses and personal liability benefits. The increased levels of coverage will give our business travelers maximum protection.



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For inquiries, please contact :

Telephone	: 1 800 88 8811
	: 603 2118 0188
Facsimile	: 603 2118 0288
Email	: AIGMYCare@aig.com