MALAYAN'S BUSINESS PROTECT

APPLICATION FORM

Name: _____
Last Name First Name Middle Name

Address (Mailing Address): _____
Number Street Name

_____
Subdivision/Village Barangay Municipal/City Province Zip Code

Contact Number/s: Home: _____ Office: _____

Email Address: _____

Would you like to receive company notifications via email? ☐ *Yes* ☐ *No*

Age: _____ Citizenship: _____

Date of Birth (mm) ___ / (dd) ___ /(yyyy) _____

Civil Status: ☐ Single ☐ Married ☐ Separated ☐ Widowed

Gender: ☐ Male ☐ Female

Registered Business Name: _____

Business Address: _____
Number Street Name Subdivision/Village

_____
Barangay Municipal/City Province Zip Code

Name of Authorized Representative: _____

Details of Authorized Representative: _____
(Position, email address, contact number)

Contact Person (if different from Authorized Representative): _____

Details of Contact Person: _____
(Position, email address, contact number)

Date Established: _____

Type of Business: ☐ Single Proprietorship ☐ Partnership ☐ Corporation

Corporate Group Affiliation, if any: _____

Tax Identification Number (TIN): _____

VAT Registered? ☐ Yes ☐ No

Principal Stockholders/Partners as of _____ (Date)

1. _____
2. _____
3. _____

List of Directors as of _____ (Date)

1. _____
2. _____
3. _____

Desired Effectivity Date: _____

Are you the: ☐ Property/Building Owner ☐ Tenant

Is the property mortgaged? ☐ Yes ☐ No (Please specify) _____

	SUM INSURED
STRUCTURE/BUILDING	
LEASEHOLD IMPROVEMENT	
FURNITURE, FIXTURE & FITTINGS	
MACHINERY & EQUIPMENT	
STOCKS IN TRADE	
OTHERS	
TOTAL	

Is the property occupied as a commercial space?

☐ Yes ☐ No (Please specify) _____

Exterior Walls: ☐ Concrete ☐ Part Concrete/Timber ☐ Timber ☐ Others (pls. specify): _____

Roof: ☐ Concrete ☐ Plastic Material ☐ Timber ☐ Ceramic Materials/Tiles ☐ G.I. Sheet ☐ Others (pls. specify): _____

Boundaries (facing street): Front: _____ Left: _____ Rear: _____ Right: _____

Other Business with Malayan: _____

Loss Experience (whether insured or not): _____

EMPLOYEES PERSONAL ACCIDENT INSURANCE:

Please indicate personal details of each employee. (Please use additional sheets if necessary)

NAME	ROLE/POSITION	DATE OF BIRTH

DATA PRIVACY I acknowledge that Malayan Insurance Company, Inc. (Malayan) may collect, use, process and share his/her personal data to its employees, duly authorized representatives, other insurers, reinsurers, adjusters, intermediaries, industry associations, investigators, regulators, and other third party providers for purposes such as underwriting, administration, claims adjudication and management, reinsurance, investment, data analytics, statistical analysis, risk analysis/ assessment/management, financial and tax monitoring/review/reporting, protection against fraud, errors, or misrepresentations, profiling, research, due diligence, company evaluation, studies/customer satisfaction surveys, and compliance with legal, regulatory or contractual requirements. Further, I agree that Malayan may notify, market and offer him/her any of its products and services that may be useful to me. In furtherance of these purposes, I am fully aware that my personal data, unless prohibited, may be processed outside the Philippines and be subject to different data protection standards.

AUTHORITY TO VERIFY INFORMATION I also authorize Malayan to verify and investigate the information given including submitted documents from whatever source it may consider appropriate.

RIGHTS OF THE DATA SUBJECT I acknowledge that I have the right to access the given information and I undertake to correct, rectify or supplement the same should any information be found to be inaccurate or incomplete.I shall notify Malayan in writing of any changes in the information given above.

UNDERTAKING I hereby warrant that all personal information given by me are true, correct, updated to the best of my knowledge, and freely and voluntarily given to Malayan. I agree and consent that the above information are being collected, used, processed and recorded for purposes of securing insurance protection or any other business transaction(s) with Malayan and for other purposes as indicated herein.

If purchasing, transacting and/or acting on behalf of other person(s), I hereby warrant that I have been duly authorized to perform such acts and permitted to give their information to Malayan. I hereby bind myself to advise all other persons in whose behalf I have acted, transacted with and/or purchased any product or services from Malayan of all the terms and conditions herein. I will hold Malayan, directors, officers, employees, agents, successors and assigns free and harmless from any liability that may arise as a result of the authorization given above.

By signing this form, I hereby certify that I have read and understood the foregoing and this consent remains valid and binding unless I submit a written notice to Malayan revoking or altering the same.

☐ By ticking the box, I consent for Malayan and the other members of the Yuchengco Group of Companies (YGC), their affiliates, subsidiaries, contractors, partners, agents and representatives, and intermediaries to access and use my personal data, for purposes of marketing, sales or promotional information campaigns, cross selling activity, and provision of any products, services or offers through mail/email/SMS/telephone, social media, e-commerce and telemarketing platforms or any type of electronic facility or relevant messaging system as may be deemed appropriate for the purpose.

Signature: _____
(Client's signature over Printed Name) (Date Signed)

Signature: _____
(Broker, Agent or other Authorized Representative of Client) (Date Signed)

This portion is to be filled out by Malayan Personnel

MANAGEMENT REFERRED? ☐ Yes ☐ No If YES, Referrer's Name: _____

Verified by: _____ _____
(Printed Name & Signature of Malayan Personnel) *(Date Received)*

Note: Please submit accomplished Form together with a copy of any government issued ID (For ex. TIN/SSS/GSIS/Philhealth, Driver's License, Passport, etc.)

MALAYAN'S BUSINESS PROTECT

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To learn more about other Malayan products, call (02) 8242-8888 or visit your nearest Malayan Insurance branch.

Facebook & Instagram: MalayanInsurancePH

MALAYAN INSURANCE
Insure to be Sure.

Yuchengco Tower I, 500 Quintin Paredes St., Binondo, Manila 1006
Tel. No. : (02) 8242-8888 | Fax No.: (02) 8242-2222
E-mail: malayan@malayan.com

DISCLAIMER:
This brochure is intended to be a general summary. Malayan Insurance Co., Inc. reserves the right to modify terms, coverage, and limits or decline coverage as it deems appropriate. Submission of the filled-out application form does not constitute a commitment to cover and is not a guarantee by the Company.

AVIATION | ENGINEERING | FIRE | MARINE | MISC. CASUALTY | MOTORCAR | PERSONAL ACCIDENT | SURETY

F-A004-1123-1

www.malayan.com

MALAYAN INSURANCE
Insure to be Sure.

MALAYAN'S BUSINESS PROTECT

YOUR PARTNER TO SECURING YOUR BUSINESS

Insure to be Sure.

DON'T LET SETBACKS HINDER YOUR BUSINESS'S GROWTH. PROTECT YOUR INVESTMENT WITH MALAYAN'S BUSINESS PROTECT.

Embrace the freedom to grow your business without worrying about risks. Malayan's Business Protect, a tailored insurance solution for Small and Medium Enterprises (SME's), is your trusted ally in securing your venture.

PRODUCT FEATURES AND BENEFITS

Property Insurance

Safeguards you and your business from financial losses caused by a range of risks, including:

- Fire and Lightning
- Typhoon and Flood
- Earthquake Fire and Earthquake Shock
- Smoke Damage
- Explosion
- Vehicular Impact
- Falling Aircraft
- Riots, Strikes, and Malicious Damage
- Sprinkler Leakage
- Bursting or Overflowing of Water Tanks, Apparatus, and/or Pipes (BOWTAP)

Business Protect also provides additional coverage for:

- Fire Fighting Expenses
- Debris Removal Compensation
- Architect & Surveyor's Fee

Comprehensive General Liability

Secures your business by offering protection against Third Party Claims stemming from property damage and/or bodily injury arising from business operations.

- Fire Legal Liability
- Tenant's Legal Liability
- Premises Medical Payment
- *Deleterious Matter in Food and Drinks
- **Carpark Liability

** Applicable only to Restaurants, Kiosks, and Water Stations*
*** Applicable only to Restaurants*

Employee Personal Accident Insurance

Ensures 24/7 protection for your employees in unexpected situations, covering up to four (4) specified employees aged up to 64 years old, both during and outside of work hours.

Money, Securities and Payroll Insurance

Provides compensation for the loss of your monetary assets stored within your business premises due to burglary or robbery. This coverage also extends to losses during the transportation of money to and from the bank due to robbery.

MALAYAN'S BUSINESS PROTECT

COVERS THE FOLLOWING BUSINESS ESTABLISHMENTS

Restaurants - dining establishments licensed to serve meals and/or beverages (excluding bars, nightclubs and the like)

Barbershops and Salons - establishments offering beauty and grooming services such as hair care, spa treatments, and cosmetics

Kiosks - open-sided booth located inside shopping malls and commercial spaces

Clinics - medical facilities accredited with the Department of Health and supervised by a licensed medical practitioner or allied medical professionals

H2O Stations - filling and re-filling outlets of distilled or purified water

Retail Stores - businesses selling goods directly to consumers, whether it be products or services

Offices - workplaces that serve as central location for business operations and administrative activities

COVERAGE AND LIMITS

PROPERTY INSURANCE		
1	Fire & Lightning with Allied Perils: Typhoon, Flood, Earthquake Fire & Earthquake Shock, Smoke Damage, Explosion, Vehicular Impact, Falling Aircraft, Riots, Strikes and Malicious Damage, Sprinkler Leakage, and Bursting or Overflowing of Water Tanks, Apparatus, and/or Pipes (BOWTAP).	Property's Declared Sum Insured
PROPERTY-RELATED EXTENSIONS		
2	Debris Removal, Professional Fees, and Fire Fighting Expense	5% of Sum Insured (Combined Single Limit)
COMPREHENSIVE GENERAL LIABILITY INSURANCE		
4	*Php 500,000.00 combined single limit; underlying sublimits to form part of and not in addition to this.	
	Fire Legal Liability	Php 500,000.00
	Tenant's Legal Liability	Php 500,000.00
	Premises Medical Payment	
	Per Person Per Occurence Annual Aggregate	Php 5,000.00 Php 50,000.00 Php 250,000.00
	Deleterious Matter in Food & Drinks (Resto, Kiosks, and Water Stations)	
	Per Person Per Occurence and Annual Aggregate	Php 10,000.00 Php 500,000.00
	Carpark Liability (resto variant only)	
	Per Vehicle Per Occurence and Annual Aggregate	Php 50,000.00 Php 500,000.00
EMPLOYEE PERSONAL ACCIDENT INSURANCE		
4	Accidental Death and Dismemberment	Php 50,000.00
	Medical Reimbursement	Php 5,000.00
MONEY, SECURITIES & PAYROLL INSURANCE		
5	Inside and Outside Premises	Php 50,000.00

PREMIUM RATES ARE SUBJECT TO QUOTATION OF MALAYAN INSURANCE