



Cheque Amendment Request Form
Borang Permintaan Pindaan Cek

 Collection Station
 Stesen Kutipan

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|  * B 7 7 0 6 0 8 5 * | Policy Number / Nombor Polisi <table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table> | | | | | | | | | | | | | | | | | | | | |
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| Agent Code / Kod Ejen <table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table> | | | | | | | Agency Code / Kod Agensi <table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table> | | | | | | | Dispatch Location / Lokasi Penghantaran <table border="1" style="width: 100%; height: 20px;"> <tr> <td></td> </tr> </table> | | | | | | | |
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| Agent Name / Nama Ejen <table border="1" style="width: 100%; height: 20px;"> <tr> <td></td> </tr> </table> | | Agency Name / Nama Agensi <table border="1" style="width: 100%; height: 20px;"> <tr> <td></td> </tr> </table> | | Agent Tel No. / No. Tel Ejen <table border="1" style="width: 100%; height: 20px;"> <tr> <td></td> </tr> </table> | | | | | | | | | | | | | | | | | |
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| Name of Insured <i>Nama Insured</i> | NRIC No. <i>No. KP</i> | | | | | | | | | | | | | | | | | | | | |
| Cheque No. <i>No. Cek</i> _____ | Amount <i>Amaun</i> _____ | | | | | | | | | | | | | | | | | | | | |
| Bank / Branch <i>Bank / Cawangan</i> _____ | Cheque Date <i>Tarikh Cek</i> _____ | | | | | | | | | | | | | | | | | | | | |
| Payee's Name <i>Nama Penerima</i> _____ | | | | | | | | | | | | | | | | | | | | | |
| <p>*This is to request and authorise AIA Bhd. to amend the above cheque as follows: *Ini adalah untuk meminta dan membenarkan AIA Bhd. meminda cek di atas seperti berikut:</p> <input type="checkbox"/> Amend the Payee's name to <i>Menukar name Penerima kepada</i> _____, NRIC / Passport No. <i>, No. KP / Pasport</i> _____ | | | | | | | | | | | | | | | | | | | | | |
| Reason for amendment <i>Sebab-sebab pindaan</i> _____ | | | | | | | | | | | | | | | | | | | | | |
| Relationship between Owner and New Payee <i>Perhubungan antara Pemilik dan Penerima Baru</i> _____ | | | | | | | | | | | | | | | | | | | | | |
| <p>I shall indemnify and keep indemnified AIA Bhd. against all losses and damages incurred by the said Company arising directly or indirectly out of and/or in connection or as the result of the above request & authorization at all times. / Saya akan membayar ganti rugi dan membolehkan AIA Bhd. menerima ganti rugi terhadap semua kerugian dan kerosakan yang ditanggung oleh syarikat akibat secara langsung atau tidak langsung dan/atau yang berkaitan atau akibat daripada permintaan dan pemberikuasaan di atas pada bila-bila masa.</p> | | | | | | | | | | | | | | | | | | | | | |
| Signature of Witness <i>Tandatangan Saksi</i> _____ | Signature of Policy Owner / Trustee (whichever is applicable) <i>Tandatangan Pemilik Polisi / Pemegang Amanah (jika sesuai)</i> _____ | | | | | | | | | | | | | | | | | | | | |
| Name / Nama _____ | Name / Nama _____ | | | | | | | | | | | | | | | | | | | | |
| NRIC No. / No. KP _____ | NRIC No. / No. KP _____ | | | | | | | | | | | | | | | | | | | | |
| Mobile No. / No. Telefon Bimbit _____ | | | | | | | | | | | | | | | | | | | | | |
| Date / Tarikh (DD/MM/YYYY) / (HH/BB/TTTT) _____ | | | | | | | | | | | | | | | | | | | | | |
| FOR OFFICE USE ONLY / UNTUK KEGUNAAN PEJABAT SAHAJA | | | | | | | | | | | | | | | | | | | | | |
| Authorised Signatory <i>Penandatangan Pihak Berkuasa</i> _____ | on <i>pada</i> _____ (DD/MM/YYYY) / (HH/BB/TTTT) | | | | | | | | | | | | | | | | | | | | |
| New Cheque No. <i>No. Cek Baru</i> _____ | New Cheque Date <i>Tarikh Cek Baru</i> _____ | | | | | | | | | | | | | | | | | | | | |

 For Office Use
 Untuk Kegunaan Pejabat

Request for Foreign Bank Draft / Draf Bank Mata Wang Asing

I wish to request that the amount due to me from the above mentioned policy be replaced by bank draft incurrency (please state currency e.g A\$, US\$, GB pound sterling...). / Saya ingin meminta supaya jumlah yang perlu dibayar kepada saya daripada polisi disebut di atas dibayar dengan draf bank dalam mata wang.....(sila nyatakan mata wang e.g. A\$, US\$, GB pound sterling...).

I understand that according to the provisions of the policy contract, all payments related to the policy shall be paid out in Malaysian Ringgit. However, I also understand that the Company at this discretion, on a request basis, may pay in foreign currency. I hereby absolve the Company from any foreign exchange loss to have the amount due converted into the requested currency, or as a result of the Company having to replace any mislaid or lost bank draft despatched to me earlier. Any incidental bank charges incurred by the Company in processing this request will borne by me and will be deducted from the amount payable to me under the Policy, if any. / Saya memahami bahawa mengikut peruntukan kontrak polisi, semua bayaran yang berkaitan dengan polisi tersebut hendaklah dibayar dalam Ringgit Malaysia. Walau bagaimanapun, saya turut memahami bahawa pihak Syarikat mempunyai mutlak ke atas permintaan saya supaya bayaran dibuat dalam mata wang yang lain. Saya dengan ini membebaskan pihak Syarikat daripada sebarang kerugian akibat tukaran asing yang berlaku apabila jumlah yang perlu dibayar ditukar kepada mata wang seperti yang saya minta atau kerugian akibat dari penggantian draf bank oleh Syarikat apabila draf bank yang dihantar kepada saya sebelum itu telah tersalah letak atau hilang. Sebarang caj bank yang berkaitan yang ditanggung oleh pihak Syarikat bagi memproses permohonan ini akan ditanggung oleh saya dan boleh ditolak dari jumlah yang perlu dibayar kepada saya di bawah Polisi tersebut, jika ada.

Signature of Witness

Tandatangan Saksi

Signature of Policy Owner / Assignee

Tandatangan Pemilik Polisi / Pemegang Serah Hak

Signature of Trustee (if applicable)

Tandatangan Pemegang Amanah (jika berkenaan)

Name / Nama

Name / Nama

Name / Nama

NRIC No. / No. KP

NRIC No. / No. KP

NRIC No. / No. KP

Mobile No. / No. Telefon Bimbit

Date / Tarikh (DD/MM/YYYY) / (HH/BB/TTTT)

Important Note: / Nota Penting:

For Local cheque and Foreign Bank Draft Amendment / Untuk Pindaan Cek Tempatan dan Draft Bank Mata Wang Asing

1. If the above policy has been assigned, then the Assignee must also sign this form. / Sekiranya polisi ai atas telah diserahkan hak, Pemegang Serah HAK hendaklah menandatangani borang ini.
2. If the Policy has been taken out under Section 23 of the Civil Law Act 1956 or Financial Services Act 2013 the appointed Trustees or if no trustee is appointed, the nominee is deemed as trustee should also sign this form. / Sekiranya polisi telah dikeluarkan di bawah Seksyen 23 Akta Undang-Undang Sivil 1956 atau Akta Perkhidmatan Kewangan 2013, Pemegang Amanah yang dilantik atau jika tiada pemegang amanah dilantik, penama akan dianggap sebagai pemegang amanah perlu juga menandatangani borang ini.
3. If there are trustees being appointed under Section 23 of Civil Law Act 1956, the cheque will be issued under the trustees names jointly. As such, a joint account is required for cheque clearance. / Sekiranya Pemegang Amanah-Pemegang Amanah dilantik di bawah Seksyen 23 Akta Undang Sivil 1956, cek akan dikeluarkan di atas nama Pemegang Amanah-Pemegang Amanah tersebut secara bersama. Dengan itu, akaun bersama diperlukan untuk penjelasan cek.
4. The above request must be submitted together with the following documents: / Permintaan di atas hendaklah disokong dengan dokumen seperti yang berikut:
 - a. If Recipient is a Foreigner, kindly submit a photocopy of the passport / jikalau Penerima adalah Wangsa negara Asing, sila serahkan salinan foto passport
 - b. If Recipient is a Malaysian, kindly submit a photocopy of the Oversea IC with permanent residency address with a Letter from Employer for those who is working at oversea or the student identity card from University abroad for those who is studying. / jikalau Penerima adalah Wangsa negara Malaysia, sila serahkan salinan foto Kad Pengenalan negara asing dengan surat majikan untuk yang bekerja di luar negara atau kad pengesahan pelajar dari Universiti untuk yang sedang belajar di luar negara.
5. For amendments on the payee's name is only applicable to Civil Law Act (CLA) policies with joint trustees, Absolute Assignment policies (assignor to assignee or vice versa), and Applicant Owner policies (owner to insured or vice versa). / Bagi nama penerima hanya boleh diguna pakai bagi polisi Akta Undang-undang Sivil dengan Pemegang Amanah bersama, polisi Penyerahan Hak Mutlak (pemegang serah hak kepada penyerah serah hak atau sebaliknya), dan polisi Pemohon Pemilik (pemohon kepada pemilik atau sebaliknya).

Declaration And Authorization / Pengisytiharan Dan Pemberikuasaan

I/We confirm that this policy has not been assigned. / Saya/Kami mengesahkan bahawa polisi ini belum diserahkan hak.

I/We understand and agree that any personal information collected or held by AIA Bhd. (whether contained in this application or otherwise obtained, including through credit reporting agencies) may be held, used, and disclosed by AIA to individuals/organizations related to and associated with AIA or any selected third party (within or outside of Malaysia, including but not limited to reinsurance companies, claims investigation companies and industry associations/federations) for the purpose of (a) processing this application; (b) providing subsequent service for this; (c) for AIA data matching; and (d) to review and advice on my/our coverage with AIA. I/We understand that I/we have a right to obtain access to and to request correction of any personal information held by AIA concerning me/us. Such request can be made to any of AIA's Customer Centre. / Saya/Kami faham dan bersetuju bahawa sebarang maklumat peribadi yang dikumpulkan atau dipegang oleh AIA Bhd. (sama ada terkandung dalam permohonan ini atau diperolehi dengan cara lain, termasuk melalui agensi pelaporan kredit) boleh dipegang, digunakan dan diberikan oleh AIA kepada individu/ organisasi yang berhubung dan berkaitan dengan AIA atau mana-mana pihak ketiga yang dipilih (di dalam atau di luar Malaysia, termasuk tetapi tidak terhad kepada syarikat reinsurans dan syarikat penyiasatan tuntutan dan persatuan industri/persekutuan) bagi tujuan (a) memproses permohonan ini (b) memberikan khidmat seterusnya (c) untuk pepadanan data AIA; dan (d) menyemak dan memberi nasihat mengenai perlindungan saya/kami dengan AIA. Saya/Kami faham bahawa saya/kami berhak memperoleh akses kepada, dan memohon pembedahan sebarang maklumat peribadi yang dipegang oleh AIA berkaitan dengan saya/kami. Permohonan seperti itu boleh dibuat di mana-mana Pusat Pelanggan AIA.

Important Note: / Nota Penting:

AIA may review and/or update the Privacy Statement from time to time to reflect the changes in law and/or AIA internal policy. For more information on how AIA deals with personal information, please refer to the latest Privacy Statement on our website at www.aia.com.my. / AIA mungkin menyemak semula dan/atau mengemas kini Pernyataan Privasi dari masa ke semasa berdasarkan perubahan dalam undang-undang dan/atau polisi dalaman AIA. Untuk maklumat lanjut mengenai cara AIA menguruskan maklumat peribadi, sila rujuk Kenyataan Privasi terbaru di laman web kami di www.aia.com.my.