

**TOYOTA CAPITAL MALAYSIA SDN BHD**

**PRIVATE & CONFIDENTIAL**

**INSURANCE BENEFICIARY NOMINATION FORM**

1. **CAR LIFE INSURANCE - TCAP EZ PROTECT**

**PERSONAL INFORMATION**

<b>POLICY NUMBER.</b>	
<b>NAME OF PROPOSER/ INSURED</b>	

**IMPORTANT NOTICE - PLEASE READ BEFORE YOU MAKE YOUR NOMINATION**

Pursuant to **Schedule 10 of Financial Services Act 2013:**

- a. A nomination made by a non-Muslim policy owner creates a trust in favour of the nominee of the policy moneys payable upon the death of the policy owner, if (i) the nominee is his spouse or child; or (ii) the nominee is his parent (if there is no spouse or child living at the time making the nomination);
- b. If your intention is for your nominee (other than spouse, child or parent) to receive the policy benefits, you have to assign the policy benefits beneficially. You may request for an Assignment Form from Toyota Capital Malaysia Sdn Bhd;
- c. A nominee of a Muslim policy owner upon receipt of the policy moneys shall distribute the policy moneys in accordance with Islamic law;
- d. The nomination must be witnessed by a witness who must be 18 years old and above, of sound mind and not a named nominee herein;
- e. The nomination you made will be carried forward on subsequent renewal(s) of this policy unless changed by you;
- f. For full details on power to make nomination, please refer to Schedule 10 of Financial Services Act 2013.

**This Nomination Form must be fully completed, signed, witnessed and returned to Toyota Capital Malaysia Sdn Bhd, failing which, the nomination may be deemed invalid and may eventually result in a delay in the payment of policy moneys.**

**BENEFICIARY (IES)**

I, the above named Proposer/ Insured hereby nominate the following nominee(s) to receive as beneficiary(ies) upon my death, all and any moneys upon full settlement of the Hire Purchase Facility, Agreement No: \_\_\_\_\_ which may be payable to Toyota Capital Malaysia Sdn Bhd under the policy (which moneys are hereinafter referred to as "the Policy Moneys")

Name of Nominee (full name as per IC)	Relationship	NRIC No/Birth Cert No/Passport	%

**DECLARATION AND ACKNOWLEDGEMENT**

I, HEREBY declare that the policy money paid to my nominee(s), the receipt of the policy money(ies) by the nominee(s) will be a complete discharge for Toyota Capital Malaysia Sdn Bhd for all liability in respect of the policy money(ies) paid to the nominee(s).

I ACKNOWLEDGE that my nomination made herein shall be irrevocable save with the prior written consent of the Policy Owner

IF ANY nomination has been made by me before the date hereof, I hereby revoke such nomination.

DATED THIS \_\_\_\_\_ Day of \_\_\_\_\_ 20\_\_\_\_\_ X

----- (Signature of Insured)	X	----- (Signature of Witness)
Name :	X	Name :
I.C No. :		I.C No. :
Address :		Address :

<b>FOR OFFICE USE:</b>	A Copy of this form has been diled at of Toyota Capital Malaysia on _____
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**Underwritten by**  
**Hong Leong Assurance Berhad - Car Life Secure Insurance**  
*Application are subject to term and condition.*