



ZURICH

Zurich Life Insurance Malaysia Berhad

Registration No. 196801000442 (8029-A)

**REINSTATEMENT REQUEST SLIP
INTERIM RELIEF MEASURE MHIT REPRICING 2024
(VALUECARE/ MEGAMED / MAXMEDIC RIDER)**

TERMS AND CONDITIONS:

1. Only policies attached with ValueCare, MegaMed, or MaxMedic rider that have experienced medical repricing effective date from **1st June to 31st December 2024** will qualify for this interim relief measure.
2. Policies as mentioned under item (1) that have lapsed or surrendered after the medical repricing effective date, between **1st June 2024 to 28th February 2025** can be reinstated without the need for underwriting, and waiting period and contestability period will be waived.
3. Reinstatement is contingent upon the payment of reinstatement cost, surrender value and outstanding premium (whichever is applicable).
4. Any claims arising during the lapse or surrender period will not be considered.
5. The company reserves the right to make the final decision on the reinstatement request.

Note:

For reinstatement of surrendered policies, please remit **payment equivalent to Surrender Value and outstanding premium** (if any) via online/ bank-in into ZLIMB company account (RHB account no. 21406200052673) **WITHOUT** indicating the policy number during transfer and provide a copy of the payment transfer slip.

Policy Number : _____

Policyowner : _____

Life Assured : _____

Type of Request : Reinstatement of lapsed policy Reinstatement of surrendered policy

Existing Medical Rider (Please tick ✓ whichever applicable)

- | | | | | | |
|--|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|
| <input type="checkbox"/> Zurich MaxMedic Rider (MXMED) | <input type="checkbox"/> Plan 1 | <input type="checkbox"/> Plan 2 | <input type="checkbox"/> Plan 3 | <input type="checkbox"/> Plan 4 | <input type="checkbox"/> Plan 5 |
| <input type="checkbox"/> Zurich MegaMed Rider (ZMEGA) | <input type="checkbox"/> Plan 1 | <input type="checkbox"/> Plan 2 | <input type="checkbox"/> Plan 3 | | |
| <input type="checkbox"/> Zurich ValueCare Rider (ZVC/ZVCB) | <input type="checkbox"/> Plan 1 | <input type="checkbox"/> Plan 2 | <input type="checkbox"/> Plan 3 | | |

DECLARATION:

I, the undersigned, hereby request the reinstatement of the policy under the interim relief measure. I acknowledge and agree to the terms and conditions of this reinstatement.

Signature of Policy Owner/ Assignee

Name : _____

NRIC : _____

Date : _____

For Office Use Only

* Please verify the eligibility before obtaining the customer's signature

1. Medical Repricing Effective Date (Anniversary in 2024)	:	
2. Does the Medical Repricing effective date fall within the period from 1st June 2024 to 31st Dec 2024?	:	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Policy lapsed/surrendered date	:	
4. Did the lapse or surrender date occur after the medical repricing effective date and fall between 1st June 2024, and 28th February 2025?	:	<input type="checkbox"/> Yes <input type="checkbox"/> No

Note: If any of the validated answers are 'No', it indicates that the customer is not eligible for the interim relief measure.

Customer Service Center

Ground Floor, Block B, Plaza Zurich, 12, Jalan Gelenggang, Bukit Damansara, 50490 Kuala Lumpur.
(for other branches, please refer to company website)

☎ 1300-888-622 ✉ callcentre@zurich.com.my 🌐 www.zurich.com.my Customer portal : www.myzurichlife.com.my