

**Great Eastern General Insurance (Malaysia) Berhad** (102249-P)

(Formerly known as Overseas Assurance Corporation (Malaysia) Berhad)  
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**CHANGE REQUEST FORM - MOTOR**

Insured's Name : \_\_\_\_\_  
Policy No./Cover Note No. : \_\_\_\_\_  
Period of Insurance : \_\_\_\_\_ To \_\_\_\_\_  
Effective Date of Change : \_\_\_\_\_  
Agency Code and Name : (Code) \_\_\_\_\_ (Name) \_\_\_\_\_

With reference to the above matter, I/We would be grateful if you could effect the following (subject to company's approval and additional premium, if any):-

**GENERAL:**

- Amend insured's name to : \_\_\_\_\_  
NRIC/BR No: \_\_\_\_\_
- Updated correspondence address (New) : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Postcode \_\_\_\_\_ State \_\_\_\_\_
- Extend the period of insurance until : \_\_\_\_\_ (Reason: \_\_\_\_\_)
- Cancel the policy (Reason: \_\_\_\_\_)
- Change the Marketing Consent to:
  - Yes (to be updated on the products & services of the Company and Group of Companies)
  - No (not to be updated on the products & services of the Company and Group of Companies)

**MOTOR:****for Vehicle Registration**

**No:** \_\_\_\_\_

Amend: (a) Vehicle No: \_\_\_\_\_ (b) Make/Model: \_\_\_\_\_  
 (c) Year of Manufacture: \_\_\_\_\_ (d) Engine No: \_\_\_\_\_  
 (e) CC/Tonnage: \_\_\_\_\_ (e) Chassis No: \_\_\_\_\_  
 (f) Log Book No: \_\_\_\_\_

Withdraw the No Claim Discount (NCD) entitlement from (Date): \_\_\_\_\_

No Claim Discount Refund \_\_\_\_\_% From: \_\_\_\_\_ (Insurer)

Transfer of NCD \_\_\_\_\_% To \_\_\_\_\_ Vehicle Reg No: \_\_\_\_\_

Reinstate/Add\* the windscreen coverage Sum Insured RM \_\_\_\_\_

Add/Delete/Revised \*Named Drivers : *Please attach the relevant documents (ex: Photocopy NRIC)*

**OTHERS:**

Other Amendments : \_\_\_\_\_  
 \* to delete whichever not applicable

For your attention, I/We enclosed herewith the:

- ( ) Original Policy ( ) Copy of Log Book ( ) Cash /Cheque - RM  
 ( ) Original Certificate of Insurance ( ) Copy of NRIC ( ) Letter of Authorization  
 ( ) Others: \_\_\_\_\_

_____ <b>(Signature of Insured)</b>	_____ <b>(Company Rubber Stamp)</b>	_____ <b>(Signature of Agent)</b>
	<i>Note: Only for commercial policy</i>	
Name:	Company Name:	Name:
NRIC No:	BR No:	NRIC No:
Contact No:	Contact No:	Contact No:
Date:	Date:	Date:

**DECLARATION OF LOSS OF CERTIFICATE OF INSURANCE (Made Compulsory following PIAM Circular No. 42 of 2007)**

In compliance with Section 102 (1) of the Road Transport Act 1987, I/We hereby declared that the relative Certificate of Insurance issued to me/us under the above policy number has been lost or mislaid and this statement is true to the best of my/our knowledge.

I/We further assume responsibility for any claim or dispute arising out of the lost Certificate and undertake to indemnify the Company in this respect.

_____ (Signature of Insured)	_____ (Company Rubber Stamp)	_____ Duly Witnessed by Commissioners of Oaths
	<i>Note: Only for commercial policy</i>	

**DATA PROTECTION NOTICE/ NOTIS PERLINDUNGAN DATA**

For information on how we process your personal data and your rights over your personal data, kindly refer to our Personal Data Protection Notice posted at [www.greateasterngeneral.com](http://www.greateasterngeneral.com)

Untuk maklumat berkenaan pemprosesan data peribadi dan hak anda ke atas data peribadi anda, sila rujuk Notis Perlindungan Data Peribadi yang dipaparkan dalam laman web [www.greateasterngeneral.com](http://www.greateasterngeneral.com)