LIBERTY GENERAL INSURANCE BERHAD

PERSONAL DATA ACCESS REQUEST FORM

This Personal Data Access Request Form is made to Liberty General Insurance Berhad *(formerly known as AmGeneral Insurance Berhad)* **("Liberty")**
GENERAL INFORMATION

- A Data Subject is an individual who is requesting access to his/her personal data maintained at Liberty.
- A Third Party Requestor is a person other than the Data Subject as defined under Section 1B who is requesting access to the personal data of the Data Subject.
- The Requestor (Data Subject or Third Party Requestor) is to be present at the Liberty branches to submit this form and for verification of identity, information and document required.
- Sensitive personal data comprises of information which relates to the Data Subject's health, political opinion, religious belief or other beliefs of a similar nature and the commission of an offence.

Sections to Fill
- Sections applicable to requests made by a Data Subject: 1A, 2, 3, 4

- Sections applicable to requests made by a Third Party Requestor: 1B, 2, 3, 4

  (If a Third Party Requestor, please tick [√] one of the following):
  [ ] I am acting under the Data Subject's authorization / mandate / Power of Attorney;
  [ ] I am the legal / personal representative of the Data Subject;
  [ ] I have a Warrant / Court Order allowing access to the Data Subject's personal data;
  [ ] I am the executor / administrator of the Data Subject's estate;
  [ ] Others (Please specify) _____

Note: Liberty has the right to refuse to comply with your request under S36 of the Personal Data Protection Act 2010 (PDPA), if the Requestor, for example:

- Fails to furnish sufficient, reliable and valid identification documentation/information to establish the Requestor's identity.
- Provides insufficient, incorrect, inaccurate and non-specific information to locate the personal data.

Supporting documents required
- Data Subject is to furnish a copy of his/her identification card (IC) for a Malaysian or other certified documentary proof of identity for foreigners e.g. Passport etc.
- Third Party Requestor is to furnish by way of an authorization letter from the Data Subject or any document evidencing the right of the Third Party Requestor, where applicable, to access the personal data of the Data Subject and a copy of the Third Party Requestor's IC, Passport or other certified documentary proof of identity.

Processing Time Frame Required
- This request will be processed within 21 days from the date the request is received.

- In line with S31(2) of the Personal Data Protection Act (PDPA), a notification for the delay, if applicable, will be sent to the Data Subject/Third Party Requestor prior to the expiration of 21 days period.

Processing Fee
- A processing fee which depending on the type of request being made as per Table 1 below, is payable and should be submitted with this form.

Table 1

Item	Type of Data Access Request (DAR)	Fee (RM)
1	DAR for Data Subject's personal data with a copy	10
2	DAR for Data Subject's personal data without a copy	2
3	DAR for Data Subject's sensitive personal data with a copy	30
4	DAR for Data Subject's sensitive personal data without a copy	5

Contact Us

If you have any query or require any guidance in completing this form, you may check with our branch officers or contact us during office hours (Monday to Thursday – 8.30 am to 5.30 pm, Friday – 8.30 am to 4.15 pm, excluding public holidays) at the following contact points:

Designation: Customer Service Executive, Customer Contact Centre
Telephone: 1 300 88 8990
E-mail: customer@libertyinsurance.com.my
Address: Liberty Insurance Tower, CT9, Pavilion Damansara Heights, 3, Jalan Damanlela, Pusat Bandar Damansara, 50490 Kuala Lumpur

Designation: Customer Service Executive, Customer Contact Centre
Telephone: 1 800 88 6333
E-mail: customer@amassurance.com.my
Address: Liberty Insurance Tower, CT9, Pavilion Damansara Heights, 3, Jalan Damanlela, Pusat Bandar Damansara, 50490 Kuala Lumpur

Designation: Customer Service Executive, Customer Contact Centre
Telephone: 1 800 88 3833
E-mail: customer@kurnia.com
Address: Liberty Insurance Tower, CT9, Pavilion Damansara Heights, 3, Jalan Damanlela, Pusat Bandar Damansara, 50490 Kuala Lumpur

SECTION 1A: DATA SUBJECT
(To be completed by a Data Subject making this Data Access Request)

I am a policyholder of Liberty and I would like to have access to my personal data.

Data Subject's Particulars
Name of Individual Policyholder : …………………………………………
IC/Passport No.   : …………………………………………
Mailing Address   : …………………………………………
Telephone No. (House)   : …………………………………………
Telephone No. (Office)   : …………………………………………
Mobile No.   : …………………………………………
Email address   : …………………………………………
Policy No.   : …………………………………………
Type of Policy   : …………………………………………

SECTION 1B: THIRD PARTY REQUESTOR
(**To be completed by a Third Party Requestor making this Data Access Request on behalf of the Data Subject**)

Third Party Requestor's Particulars

Name of Third Party Requestor : …………………………………………
IC/Passport No. : …………………………………………
Mailing Address : …………………………………………
Telephone No. (House) : …………………………………………
Telephone No. (Office) : …………………………………………
Mobile No. : …………………………………………
Email address : …………………………………………
Policy No. : ………………………………………..
Type of Policy : ………………………………………..

Data Subject's Particulars
Name of Individual Customer/Policyholder : ………………………………….
IC/Passport No. : ………………………………….

As proof of the above, I hereby enclose the following documents:-
Please tick the appropriate box.
( ) Copy of my IC/Passport; and /or
( ) Original Letter of authorization from the Data Subject
( ) Other documents

SECTION 2: DESCRIPTION OF PERSONAL DATA REQUESTED
Personal data includes one or more of the following:-
Please tick the appropriate box.

( ) Name	( ) IC/Passport No.
( ) Residence/Mailing Address	( ) Contact details
( ) Gender	( ) Race
( ) Nationality	( ) Others, please specify:
( ) Name of employer	………………………………………………

SECTION 3: PREFERRED MANNER OF DELIVERY (To be completed by the Requestor)
Please furnish the Requested Data as follows:-
Please tick the appropriate box.
(   ) Send by registered mail a copy of the Requested Data at the mailing address given in this form.
(   ) Allow me/us to collect a copy of the Requested Data form your branch or Head Office once it is ready.

SECTION 4: DECLARATION BY THE REQUESTOR
I/We hereby certify that the information given in this form and any enclosed documents submitted are true and accurate.

I/We understand(s) that:
i)   It will be necessary for Liberty to verify my/our identities; and
ii) Liberty may contact me/us for more detailed information in order to locate the personal data requested.

I/We also understand (s) that any and/or all personal data provided by me/us in this Personal Data Request Form will be collected and processed by Liberty in accordance with the Personal Data Protection Act 2010.

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(Authorized signature of Data Subject(s)/
Third Party Requestor(s)   Date

FOR LIBERTY USE ONLY

Acknowledgement of Data Access Request Form given by Requestor:

……………………………………….   ………………………..
Officer's Signature and Name   Date and Time

ACKNOWLEDGEMENT BY LIBERTY OF RECEIPT OF PERSONAL DATA ACCESS REQUEST FORM

To   :   …………………………………….
IC/Passport No.:   …………………………………….
Received by:

…………………………………………..
Signature of Attending Officer
Name:
Designation:
Date:
Branch/Head Office: