



Group EssentialLife (SP) MASTER POLICY SCHEDULE

Group Insurance Plan Name	Group EssentialLife (SP)
Master Policy Number	ESG001
Master Policyholder	UNITED OVERSEAS BANK (MALAYSIA) BHD (“UOB Malaysia”) Company No. (199301017069 (271809-K)) Address: Level 13, Menara UOB, Jalan Raja Laut, 50350 Kuala Lumpur, Malaysia
Eligible Members	Eligible Members who are between age next birthday of 18 and 60 (both ages inclusive).
Effective Date	22 August 2022
Benefit and Sum Assured	As shown in the Insurance Certificate
Frequency of Premium Payment	Single Premium
Premium Amount	As shown in the Insurance Certificate
Coverage Term	As shown in the Insurance Certificate

The benefit(s) payable under eligible certificate/policy is(are) protected by Perbadanan Insurans Deposit Malaysia (“PIDM”) up to limits. Please refer to PIDM’s Takaful and Insurance Benefits Protection System (“TIPS”) Brochure or contact Prudential Assurance Malaysia Berhad or PIDM (visit www.pidm.gov.my).



Group EssentialLife (SP) PROVISION SCHEDULE

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PART I – DEFINITIONS

Unless otherwise required by the context, the following definitions shall apply:

1. **“PAMB” / “We” / “Us” / “Our”** shall mean PRUDENTIAL ASSURANCE MALAYSIA BERHAD, the insurer.
2. **“Master Policyholder”** shall mean UNITED OVERSEAS BANK (MALAYSIA) BERHAD.
3. **“Company”** shall mean the company stated in the Insurance Certificate Schedule of the Insurance Certificate.
4. **“Policy”** shall mean the Master Policy between the Master Policyholder and Us, any riders, addendums, proposal forms, endorsements, the Insurance Certificate, any amendments signed by PAMB, the application attached of the Master Policyholder and the individual applications for membership, statements from the Physicians, and questionnaires of the Company / the Insured Member, which shall constitute the entire contract between the Master Policyholder and Us.
5. **“Coverage Term”** shall mean the period of coverage of the Insurance Certificate. The Coverage Term is shown in the Insurance Certificate Schedule of the Insurance Certificate.
6. **“Certificate Anniversary”** shall mean the anniversary of the Entry Date as specified in the Insurance Certificate Schedule of the Insurance Certificate.
7. **“Entry Date”** shall mean the date as specified in the Insurance Certificate and is the date from which the insurance coverage is effective on the Insured Member. The Entry Date is shown in the Insurance Certificate Schedule of the Insurance Certificate.
8. **“Expiry Date”** shall mean the date as specified in the Insurance Certificate and on which insurance coverage under the Insurance Certificate shall cease for the Insured Member.
9. **“Insurance Certificate”** shall mean the Insurance Certificate delivered by PAMB to the Master Policyholder, Insured Member and/or the Company (if applicable).
10. **“Insured Member”** shall mean the person stated in the Insurance Certificate Schedule of the Insurance Certificate.
11. **“Physician”** shall mean a registered medical practitioner qualified and licensed to practice western medicine. In providing treatment, this person must be practicing within the scope of his licensing and training in the geographical area of practice. This person cannot be the Insured Member, the Insured Member’s husband or wife or a close relative.
12. **“Total and Permanent Disability”** shall mean:
 - (a) while below the age of 16 years, the Insured Member suffers an accident, or illness or sickness and as a direct result of such accident or illness or sickness, he/she:
 - (i) requires constant care and attention; and
 - (ii) is confined to his/her home under medical supervision or in a hospital or similar institution;
 - OR
 - (b) while aged above and including 16 years but below the age of 65 years, the Insured Member:
 - (i) becomes permanently and completely unable to engage in any occupation and is permanently and completely unable to perform any work for remuneration or profit;
 - (ii) totally and irrecoverably loses sight in both eyes;
 - (iii) totally and irrecoverably loses by severance one limb each at or above his/her wrist and ankle, or two limbs at or above his/her wrist or ankle; or
 - (iv) totally and irrecoverably loses sight in one eye and totally and irrecoverably loses by severance one limb at or above his/her wrist or ankle.



For all cases under (a) or (b) above, such disability must be permanent and must last for a minimum period of six (6) consecutive months.

For the purpose of the definition of “Total and Permanent Disability”, the word “permanent”, shall mean beyond the hope of recovery with current medical knowledge and technology.

13. **“Taxes”** shall mean

- (a) goods and services tax;
- (b) value added tax;
- (c) consumption tax; or
- (d) any other tax, duty, charge or imposition of a similar nature by whatever name called,

which may be imposed or charged under law and regulations, or rules, rulings or guides from the relevant authority.

PART II – CERTIFICATE HOLDER

1. In the Policy, any reference to **“Certificate Holder”** shall mean:

- (a) the Company, if the Parties Arrangement referred to in the Insurance Certificate Schedule of the Insurance Certificate is a 4 parties arrangement; or
- (b) the Insured Member, if the Parties Arrangement referred to in the Insurance Certificate Schedule of the Insurance Certificate is a 3 parties arrangement,

unless otherwise indicated.

2. For the avoidance of doubt, where the Parties Arrangement is a 4 parties arrangement, the Insured Member will not be dealing with the Insurance Certificate and irrevocably authorizes the Company to deal with the Insurance Certificate in accordance with the Insurance Certificate.
3. The provisions of the Insurance Certificate will be binding on the Insured Member’s estate and/or personal representatives.

PART III - TERMINATION

Section A – Termination

1. Termination of the Insurance Certificate

The insurance coverage in the Insurance Certificate shall be terminated on the earliest of the following:

- (a) on the Expiry Date;
- (b) on the date on which the Insured Member dies;
- (c) when the Insurance Certificate is cancelled, voided or surrendered; or
- (d) when the Death Benefit payable is fully reduced as a result of the claim for Total and Permanent Disability Benefit.

Termination of the Insurance Certificate shall not affect any claim that has arisen before the Insurance Certificate terminates.

2. Termination of this Policy

- (a) This Policy may be terminated by either the Master Policyholder or Us by providing thirty (30) days (or any period as provided under the law) prior written notice of termination to the other party. Upon expiration of the notice period, We will stop issuing Insurance Certificate to enrol new Certificate Holder. As for the existing Certificate Holder, the insurance coverage in the Insurance Certificate shall continue until the insurance coverage is terminated in accordance with this Policy. Termination of this Policy shall not affect any claim that has arisen before this Policy terminates.

PART IV – BENEFIT PROVISIONS



Section A – Death Benefit

1. Subject to the provisions of the Policy, if the Insured Member dies while the Insurance Certificate is in force, the Death Benefit payable by PAMB is the Amount of Benefit shown in the Insurance Certificate Schedule of the Insurance Certificate, less any amount to be reduced due to prior approval of any claim for Total and Permanent Disability Benefit.
2. Conditions for Paying Death Benefit
 - (a) Written notice of death of the Insured Member, together with the proof of claim, the relevant claim documents and information that We request to evaluate the claim as well as to establish the cause and circumstances of death of the Insured Member (collectively referred to as “Death Claim Notice”) must be given to Our Head Office as soon as possible within six (6) months of the date of death. They shall only be treated as served when We actually received them.
 - (b) If the Death Claim Notice fails to reach Us within the prescribed period, it shall not mean the claim is invalid if it can be shown that it was not reasonably possible to give the Death Claim Notice within the prescribed period and that the Death Claim Notice was given as soon as was reasonably possible.
 - (c) We are not liable for any expenses incurred to obtain the Death Claim Notice.
 - (d) We can refuse to pay the Death Benefit under the Insurance Certificate if the above conditions are not met.

Section B – Total and Permanent Disability Benefit

1. Subject to the provisions of the Policy, if the Insured Member suffers from Total and Permanent Disability (“TPD”) prior to the Certificate Anniversary of the Insured Member’s age next birthday of sixty-five (65) years old and the TPD has been diagnosed by a Physician while the Insurance Certificate is in force, the TPD Benefit payable by PAMB is the Amount of Benefit shown in the Insurance Certificate Schedule of the Insurance Certificate.
2. After a claim is approved for the TPD Benefit, if the Amount of Benefit for TPD Benefit is:
 - (a) the same as the Amount of Benefit for Death Benefit, We shall fully reduce the Death Benefit payable. Accordingly, there shall be no more Death Benefit payable and the Insurance Certificate shall terminate; or
 - (b) less than the Amount of Benefit for Death Benefit, We shall deduct the Amount of Benefit for TPD Benefit from the Amount of Benefit for Death Benefit.
3. When the amount payable as the TPD Benefit under the Insurance Certificate and any benefit due for TPD under any other annexure or policy covering the same Insured Member:
 - (a) is less than or amounts to RM1,000,000, We shall pay it in one lump sum; or
 - (b) exceeds RM1,000,000, We shall pay:
 - (i) a lump sum payment of RM1,000,000; and
 - (ii) subject to proof of the Insured Member’s continued TPD, We shall pay the balance of the TPD Benefit due on the first anniversary of TPD of the Insured Member. However, if the Insured Member dies before the first anniversary of the TPD, We shall pay the balance of the TPD benefit to any entitled person(s).
4. Conditions for Paying TPD Benefit
 - (a) Written notice of any claim for the TPD Benefit, together with the proof of claim, the relevant claim documents and information that We request to evaluate the claim as well as to establish the cause and circumstances of the Insured Member’s TPD condition (collectively referred to as “TPD Claim Notice”) must be given to Our Head Office within six (6) months of the date of event giving rise to the claim, while the Insured Member is alive.
 - (b) If the Certificate Holder fail to do so, it shall not mean the claim is invalid if it can be shown that it was not reasonably possible to give that TPD Claim Notice within the prescribed period and that notice was given as soon as it was reasonably possible.



- (c) We are not liable for any expenses incurred to obtain the TPD Claim Notice.
- (d) After submitting the TPD Claim Notice, the Insured Member must agree to a medical examination carried out by a Physician We have appointed as may be required.
- (e) In order to assess the claim, the Insured Member may be subject to more than one medical examination. If he/she fails to have a medical examination when We ask or We do not receive the proof of the continued TPD of the Insured Member, the TPD Benefit shall terminate immediately on the date of Our request.
- (f) We can refuse to pay TPD Benefit under the Insurance Certificate if the above conditions are not met.

Section C – Exclusions

1. We shall not pay the Death Benefit if the death of the Insured Member is directly or indirectly caused by or in connection with the Insured Member's suicide within one (1) year from the Entry Date shown in the Insurance Certificate Schedule of the Insurance Certificate. In the event of the above, We shall pay the total premiums paid (excluding Taxes, if any) less any amount that the Master Policyholder or Certificate Holder owed to Us during the Coverage Term.
2. We shall not pay a claim for TPD if the TPD of the Insured Member occurs due to any condition, illness, injury or event which is directly or indirectly caused by or in connection with:
 - (a) any attempted suicide or self-inflicted injury whether attempted/inflicted while sane or insane;
 - (b) any travelling in an aircraft other than as a pilot, member of a crew or a fare paying passenger in a commercial aircraft licensed for passenger service on scheduled flights over established routes only; or
 - (c) any involvement in any aerial sporting activities such as hang-gliding, ballooning, parachuting, sky-diving, bungee jumping and other such similar activities.

Section D – Payment

Payment of any monies under the Insurance Certificate will be paid to the Master Policyholder.

If there is any indebtedness by the Certificate Holder to the Master Policyholder, the payment of any monies under the Insurance Certificate shall be used to offset such indebtedness and the monies in excess of such indebtedness will be paid to the Certificate Holder.

If there is no indebtedness by the Certificate Holder to the Master Policyholder, any monies under the Insurance Certificate shall be paid to the Certificate Holder.

Section E – Surrender

1. The Master Policyholder (or the Certificate Holder, if there is no indebtedness by the Certificate Holder to the Master Policyholder) may surrender the Insurance Certificate before the Expiry Date stated in the Insurance Certificate by giving instructions in writing to Us and returning the original of such Insurance Certificate to Us. The written notice for the surrender can be obtained from PAMB upon request.
2. Upon the surrender of the insurance coverage of the Insurance Certificate, We shall pay the surrender value after deducting any indebtedness by the Master Policyholder or Certificate Holder to Us.

Section F – Refund Of Premium (ROP) Rider (if applicable)

If Refund Of Premium (ROP) – 100% or Refund Of Premium (ROP) – 106% (collectively referred to as “**ROP Rider**”) is in force:

1. Subject to the provisions of the Policy, if there is no claim made for any of the Basic Benefits during the



Coverage Term and the Insurance Certificate remains in force up to Expiry Date, We will pay the Amount of Benefit for Refund of Premium shown in the Insurance Certificate Schedule of the Insurance Certificate after the Expiry Date, less any amount that the Master Policyholder or Certificate Holder owes Us during the Coverage Term.

2. The Rider shall terminate automatically when:
 - (a) the Insurance Certificate terminates before the Expiry Date shown in the Insurance Certificate Schedule of the Insurance Certificate;
 - (b) the ROP Rider is cancelled, voided or surrendered;
 - (c) a claim for Death Benefit or TPD Benefit under the Insurance Certificate is approved; or
 - (d) We pay the Amount of Benefit for the ROP Rider,

whichever happens first.

PART V – PREMIUM PROVISIONS

Section A – Premium Payments

The premium payable is the Total Single Premium shown in the Insurance Certificate Schedule of the Insurance Certificate.

PART VI – GENERAL PROVISIONS

Section A – The Contract

1. The rights of the Master Policyholder or any Company (if applicable) or any Insured Member or any beneficiary under this Policy shall not be affected by any provision other than those contained in this Policy.
2. The Master Policyholder shall have the right to exercise every option, benefit, right or privilege conferred by the provisions in this Policy. Every transaction between the Master Policyholder and Us relating to this Policy shall be valid and binding on the Master Policyholder, the Company (if applicable) and the Insured Member. Further, the Master Policyholder shall indemnify and keep Us indemnified against any and all actions, claims, costs (including all legal costs on solicitor and client basis), damages (including any damages or compensation paid by Us on the advice of Our legal advisers to compromise or settle any such claim), demands, expenses, fines, losses, penalties, proceedings, that We may incur or suffer as a result of the Master Policyholder's failure to perform, fulfil or observe its obligations under this Policy and carrying out any instructions from the Company (if applicable) and/or the Insured Member.
3. No person except the authorized personnel from Us is authorized to alter or amend this Policy, to accept premiums in arrears or to extend the period for payment of premium, to waive any notice or proof of claim required by this Policy, or to extend the date before which any such notice or proof must be submitted. No changes in this Policy shall be valid unless approved by Us and the Master Policyholder and evidenced by endorsement hereon, or by amendment hereto signed by Us and the Master Policyholder.
4. Neither party may assign, transfer or charge all or any of its rights or obligations under this Policy without the other party's prior written consent.

Section B – Interpretation

1. In this Policy, unless We say something else or unless it should in the circumstances be understood differently:
 - (a) a masculine personal pronoun as used in this Policy includes the feminine;
 - (b) the singular words will include the plural and vice-versa; and
 - (c) the headings are inserted for convenience only and shall not affect the interpretation of this Policy.
2. If any provision or part of a provision of this Policy is invalid or unenforceable under the law, the validity and enforceability of the remaining provisions are not affected. The affected provision or part of the provision is deemed to be severed.



Section C – Ownership of Policy

Unless otherwise expressly provided for by an endorsement in this Policy, the Master Policyholder shall be the absolute owner of the Policy. We shall not recognize any equitable or other claim to or interest in the Policy. As such, the Master Policyholder's (or its legal or authorized representative's) receipt of this Policy and/or any benefits under it shall be an effective discharge of all Our obligations and liabilities. The Master Policyholder shall be deemed to be responsible as the principal or agent of the Insured Members covered under this Policy and any Annexure.

Section D – Misstatement

If the age or date of birth relating to the Insured Member shall be found to have been misstated, We shall use the true age when determining the benefits that should have been provided and make an equitable adjustment of premiums or benefits.

Section E – Applicable Law

This Policy shall be interpreted and governed by the laws of Malaysia. The parties shall submit to the exclusive jurisdiction of the Courts in Malaysia.

Section F - Legal Proceedings

No action in law or in equity shall be brought to recover on this Policy prior to the expiration of sixty (60) days after the written proof of claim has been submitted to Us in line with the requirements set out in this Policy.

Section G – Incontestability

The Insurance Certificate shall be incontestable, except for fraud, after it has been in force during the lifetime of the Insured Member for two (2) years from the Entry Date.

Section H – Non-participating Policy

This Policy shall not participate in any surplus distribution of PAMB.

Section I – Free Look Period

The Certificate Holder may within thirty (30) days (or such longer period as may be specified by Bank Negara Malaysia) after the delivery of the Insurance Certificate ("Free Look Period"), cancel the Insurance Certificate. If the Certificate Holder decides to cancel the coverage under the Insurance Certificate, the Certificate Holder must provide PAMB a copy of the written consent of the Master Policyholder and return the Insurance Certificate to PAMB within the Free Look Period. PAMB shall refund the premiums paid less any medical expenses incurred which PAMB may have already paid or agreed to pay in respect of any medical examination of the Insured Member.

Section J – Proof of Age

Proof of age is required before the payment of claim. The Insurance Certificate will state whether the age of the Insured Member has been admitted. If it has not been admitted, the Insured Member is required to send a photocopy of the Insured Member's identity card or birth certificate to Us for Our record immediately.

Section K – Change of Address and Any Other Personal Details

In order for Us to keep the Certificate Holder informed of material information, the Certificate Holder must make sure We have the latest Certificate Holder's contact details.

Section L –Taxes

Taxes may be imposed or increased, at any time on any of the premiums, charges or other payments due and payable for this Policy. If so, the Master Policyholder or the Certificate Holder, whichever applies, shall pay the Taxes at the applicable prevailing rate.

Section M – Misrepresentation / Fraud



1. If the Master Policyholder's and/or the Company's (if applicable) and/or the Insured Member's answer or statement or information provided before this Policy was entered into, varied or renewed is found to be false or misleading, or if the Master Policyholder and/or the Company (if applicable) and/or the Insured Member has failed to disclose information as required, We have the right to void this Policy or exercise any of the rights available to Us in Schedule 9 of the Financial Services Act 2013 or any other law that replaces this Act. In this regard, any refund made shall be paid to the Master Policyholder.
2. If any information given to support any benefits or claim made is fraudulent or exaggerated, or any false declaration was made in support of such claim, We have the right to terminate this Policy.

Section N – Changes to this Policy

1. We can change any provisions in this Policy by giving the Master Policyholder notice for any of the following reasons:
 - (a) if in view of any laws, regulations, rules, orders, directives, requirements, standards, guidelines and code of practice by any governmental statutory or regulatory body or association, We think it is necessary to make such changes;
 - (b) to respond to changes in the way this Policy by is managed or administered, with proper regard to the need to treat the Master Policyholder (or the Certificate Holder when required under the law) fairly;
 - (c) to respond to changes in technology or general practice in the insurance industry; or
 - (d) to correct errors, if it is reasonable to do so.

Section O – Notices

1. All notices must be in writing and shall be treated as served on the Master Policyholder if delivered or sent to or left at the Master Policyholder's latest business address or any other address the Master Policyholder gives Us in writing. Any notice sent by post shall be treated as a written notice and received three (3) days after it is posted.
2. We may give the Master Policyholder or the Certificate Holder notice by fax, e-mail, text message, or electronic means. We may also give the Master Policyholder or the Certificate Holder notice by any other method, if We feel the circumstances are appropriate after considering the market development on such method. Any notice sent by fax shall be treated as a written notice and served when We get confirmation of the transmission. If notice is sent by e-mail or text message or electronic means or any other method, it shall be treated as a written notice and served on the next business day after sending.
3. All notices and/or claims must be served on Us in writing. They shall only be treated as served if personally delivered, or sent by registered post addressed to Our Head Office, or they are sent to Us and We actually received them.

Section P - Anti-Money Laundering, Anti-Terrorism Financing and Proceeds of Unlawful Activities

1. Regardless of anything to the contrary contained in this Policy, (i) if We learn or are notified that the Master Policyholder, the Company, the Insured Member, or any other beneficial owner named at the application stage, nominee, beneficiary, individual or entity that is associated with this Policy, is named on any Sanctions list, or is threatened with being added to any Sanctions list, or (ii) if We or any bank or other relevant third party could be found to be in breach of Sanctions obligations as a result of taking any action under this Policy, then We may:
 - (a) terminate this Policy with immediate effect with or without prior notice to the Master Policyholder and Certificate Holder; and/or
 - (b) take any other action We may deem appropriate, including but not limited to notifying any relevant government authority, withholding any payments, freezing any monies paid to Us, and transferring any such payments or monies to any relevant government authorities.
2. We shall not be liable for any losses of whatever nature that the Master Policyholder, Company, Insured Member, or anyone else may incur as a result of Us taking action under this section. This section, and Our



ability to claim for any losses that We may incur arising out of the operation of this section, shall survive any termination of this Policy.

For the purpose of this section, “Sanctions” mean:

restrictive measures imposed on targeted regimes, countries, governments, entities, individuals and industries by international bodies or governments in Malaysia or outside of Malaysia, including but not limited to the Office of Financial Sanctions Implementation HM Treasury, the United Nations, the European Union, the US Treasury Department’s Office of Foreign Assets Control, and Ministry of Home Affairs in Malaysia.

Section Q – Notice to Master Policyholder (Ombudsman for Financial Services and Customer Services)

1. Customer Service

We are committed to providing quality service to all Our customers. Please feel free to contact Our Customer Service representatives if you have any enquiries on the Insurance Certificate. If something is amiss, We also need to know about it, in order to resolve it for you. You can reach Us regarding your enquiry or complaint by calling Our dedicated Customer Service Hotline for UOB Malaysia customers at 03-2771 2499 or Our general Customer Service Hotline at 03-2771 0228, which is available during office hours, 8.30am - 5.15pm; Monday to Friday, or email to customer.mys@prudential.com.my.

2. Consumer Awareness

Interested customers can refer to the relevant consumer education booklet used under the Consumer Education Programme or published materials in the insuranceinfo website at <http://www.insuranceinfo.com.my>.

BNMLINK and BNMTELELINK provide customer service on general enquiries and public complaints in matters related to the financial sector. Besides that, it also provides information on the regulatory aspects of insurance products and services. BNMLINK and BNMTELELINK can be contacted at the following address:

BNMLINK

(Walk-in Customer Service Centre)
Ground Floor, D Block,
Jalan Dato’ Onn,
50480 Kuala Lumpur
Operating hours: 9.00am-5.00pm (Monday-Friday)

BNMTELELINK

Jabatan LINK & Pejabat Wilayah
Bank Negara Malaysia
P.O.Box 10922
50929 Kuala Lumpur
Tel: 1-300-88-5465 (LINK)
Fax: 03-2174 1515
E-mail: bnmtelelink@bnm.gov.my

3. Ombudsman for Financial Services

The Ombudsman for Financial Services is set up to offer consumer protection to policyholders, and to resolve disputes over claims settlement between the insurance company and consumers/policyholders. Any policyholder who is not satisfied with the decision of the insurance company may write to the ombudsman at the following addresses:

Ombudsman for Financial Services

(Formerly known as Financial Mediation Bureau)
Level 14, Main Block,
Menara Takaful Malaysia
No.4, Jalan Sultan Sulaiman,
50000 Kuala Lumpur
Tel: 03-2272 2811
Fax: 03-2272 1577
Website: www.ofs.org.my



4. Jabatan LINK & Pejabat Wilayah
Jabatan LINK & Pejabat Wilayah in Bank Negara Malaysia oversees and monitors public complaints and inquires on insurance and insurance related matters. Jabatan LINK & Pejabat Wilayah can be contacted at the following address:

Jabatan LINK & Pejabat Wilayah
Bank Negara Malaysia
Tingkat 13C
P.O. Box 10922
50929 Kuala Lumpur
Tel: 03-2698 8044
Fax: 03-2693 4051