

**REASSIGNMENT OF CERTIFICATE (PSF21)**  
**PENYERAHAN SEMULA HAK SIJIL**



Certificate No. <i>No. Sijil</i>	<input type="text"/>	New NRIC No. <i>No. KP Baru</i>	<input type="text"/> - <input type="text"/> - <input type="text"/>	STAMP DUTY SETEM HASIL
Old NRIC/BC/Passport No. <i>No. KP Lama/Sijil Kelahiran/Pasport</i>	<input type="text"/>			
Name of Person Covered <i>Nama Orang yang Dilindungi</i>	<input type="text"/>			

Certificate Issue Date <i>Tarikh Sijil Dikeluarkan</i>	Basic Sum Covered <i>Jumlah Perlindungan Asas</i>
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ASSIGNOR'S DETAILS <i>BUTIR PENYERAH HAK</i>	ASSIGNEE'S DETAILS <i>BUTIR PEMEGANG SERAH HAK</i>
NAME <i>NAMA</i>	NAME <i>NAMA</i>
NRIC <i>NO KP</i>	NRIC <i>NO KP</i>
DATE OF BIRTH <i>TARIKH LAHIR</i>	DATE OF BIRTH <i>TARIKH LAHIR</i>
CONTACT NO <i>NO TELEFON</i>	CONTACT NO <i>NO TELEFON</i>
ADDRESS <i>ALAMAT</i>	ADDRESS <i>ALAMAT</i>

**PERSONAL DATA PROTECTION NOTICE *NOTIS PERLINDUNGAN DATA PERIBADI***

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 [greateastertakaful.com](http://greateastertakaful.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 [greateastertakaful.com](http://greateastertakaful.com).*

If you have any inquiry or complaint (such as limiting the processing of certain information, including the withdrawal of consent to receive marketing information), you may contact our **Customer Service Careline** at 1300-13-8338, or write to the Takaful Operator at [i-greatcare@greateastertakaful.com](mailto:i-greatcare@greateastertakaful.com).

*Jika anda mempunyai sebarang pertanyaan atau aduan (seperti mengehadkan pemprosesan maklumat tertentu, termasuk membatalkan persetujuan untuk menerima maklumat pemasaran), anda boleh menghubungi talian **Careline** kami di 1300-13-8338, atau tulis kepada Pengendali Takaful di [i-greatcare@greateastertakaful.com](mailto:i-greatcare@greateastertakaful.com).*

I/We the ASSIGNEE named above in consideration of the \_\_\_\_\_ % of the Basic Sum Covered, hereby re-assign unto the ASSIGNOR the benefits and monies payable under the above numbered Certificate, and declare that I/we have no more interest whatsoever in the said Certificate. *Saya/Kami, PEMEGANG SERAH HAK yang bernama seperti di atas berkenaan dengan \_\_\_\_\_ % dari Jumlah Perlindungan Asas, di sini menyerah hak semula kepada PENYERAH HAK semua manfaat dan wang yang dibayar di bawah Sijil yang dinyatakan di atas, dan mengisytiharkan bahawa saya/kami tiada apa-apa kepentingan lagi di dalam Sijil tersebut.*

Dated at \_\_\_\_\_ this \_\_\_\_\_ day of month \_\_\_\_\_ in the year \_\_\_\_\_  
*Ditandatangani di \_\_\_\_\_ pada \_\_\_\_\_ hari bulan ini \_\_\_\_\_ dalam tahun \_\_\_\_\_*

WITNESSED BY  
*DISAKSIKAN OLEH*

Signature of ASSIGNEE  
*Tandatangan PEMEGANG SERAH HAK*

Signature of Witness  
*Tandatangan Saksi*

Name of Witness  
*Nama Saksi*

NRIC No  
*No KP*

Address  
*Alamat*

**NOTE: *Nota:***

This document has to be stamped in accordance with the Stamp Duty Act.

GREAT EASTERN TAKAFUL BERHAD assumes no responsibility for the validity or legality of this Reassignment.

This form must be witnessed by an IMPARTIAL party.

*Dokumen ini mesti disetemkan menurut Akta Setem.*

GREAT EASTERN TAKAFUL BERHAD tidak bertanggungjawab atas kesahihan Penyerahan hak semula ini.

*Borang ini mesti disaksikan oleh pihak yang berkecuali.*

**Great Eastern Takaful Berhad (916257-H)**

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