

Date: _____

From (name and address of policyholder),

To,
RHB Insurance Berhad
Level 12, West Wing, The Icon
No 1, Jalan 1/68F
Jalan Tun Razak
55000 Kuala Lumpur

To whom it may concern,

VEHICLE NO: _____
SUBJECT: CONFIRMATION OF PREFERRED SUM INSURED AMOUNT

I/We, _____ (I/C no: _____)

hereby confirm that I/we, wish to insured the said vehicle at RM _____ at my own accord
and I/We understand the average clause may apply in the event of a claim in the future.

Thank you.

Yours faithfully,
