# SKIM SARAAN BERCAGAR BERTEMPOH FACILITY APPLICATION FORM

Source of Referral/ How do you know about SSBT (*please tick one*)

☐ Website
☐ Google
☐ Social Media (Facebook / Instagram / Tik Tok / Twitter)
☐ Expo / Marketing Event / Webinar
☐ Family / Friends
☐ TV / Radio / Newspaper

JOINT APPLICANT ☐ Yes ☐ No

**PARTICULAR OF APPLICANT/ MAIN APPLICANT (FOR JOINT APPLICATION)**

Salutation : ☐ Tan Sri ☐ Dato' ☐ Mr. ☐ Ms. ☐ Mdm. ☐ Others *(please specify)* _____

Name as per NRIC :_____

NRIC No. / MyTentera / MyPolis : _____

Residential Address : _____

_____ Postcode: _____

Email :_____

Telephone No. (Residence) :_____ Telephone No (H/P): _____

Date of Birth :____/____/____(DD/MM/YYYY)

Race : ☐ Malay ☐ Chinese ☐ Indian ☐ Others *(please specify)* _____

Malaysian : ☐ Yes ☐ No Sex: ☐ Male ☐ Female

Marital Status : ☐ Single ☐ Married ☐ Others *(please specify)* _____

No. of Dependents and Age (s) : ☐ Age(s) ☐ ☐ ☐ ☐ ☐

Occupation Type* : _____
**Including latest past occupation if retiree*

Name of Employer :_____
**Including latest past employer if retiree*

Nature of Business (if self-employed) : _____

Address of Employer : _____

_____ Postcode:_____

Other Income / property : _____

*(Example: directorship / shareholding (if any), other property owned by the applicant (inclusive of jointly owned) /any assets or investments.)*

Purpose of application : _____
*(Example: medical, children education, additional income, investment etc.)*

Payment of Initial Costs & Expenses : ☐ Self-pay ☐ To be advanced by Cagamas and to be added to the facility amount
*(Choose one)*

Payout Option *(Choose one)* : ☐ Monthly Payout only ☐ Monthly Payout and Initial Lump Sum

Facility Tenure (*Choose one)* : ☐ Five (5) years ☐ Ten (10) years

Indicative Source of Repayment at Maturity Date : _____

*(Example: proceeds from sale of property, Settlement by son/daughter, etc)*

**PARTICULAR OF SECOND APPLICANT (FOR JOINT APPLICATION)**

Salutation : ☐ Tan Sri ☐ Dato' ☐ Mr. ☐ Ms. ☐ Mdm. ☐ Others *(please specify)* _____

Name as per NRIC : _____

NRIC No./ MyTentera / MyPolis : _____

Residential Address : _____

_____ Postcode: _____

Marital Status : ☐ Single ☐ Married ☐ Others *(please specify)* _____

Email : _____

Telephone No. (Residence) : _____ Telephone No (H/P): _____

Date of Birth : ____/____/____(DD/MM/YYYY)

Race : ☐ Malay ☐ Chinese ☐ Indian ☐Others *(please specify)* _____

Malaysian : ☐ Yes ☐ No Sex: ☐ Male ☐ Female

Relationship with Main Applicant : ☐ Spouse ☐ Children ☐ Parent ☐ Siblings

Occupation Type* : _____
**Including latest past occupation for retiree*

Name of Employer* : _____
**Including latest past employer if retiree*

Nature of Business (if self-employed) : _____

Address of Employer : _____

_____ Postcode: _____

**APPLICANT'S BANK ACCOUNT NUMBER**

Name of Bank : _____

Account Type* : ☐Savings Account ☐Current Account ☐Joint Savings Account ☐Joint Current Account
(*Joint Savings/Current Account is compulsory for joint application)

Account Category : ☐ Conventional ☐ Islamic

Account Number : _____

**PROPERTY INFORMATION** *(Property to be pledged under SSBT)*

Status :☐Rented ☐Vacant ☐Occupied by family member(s) ☐Others _____

Property Type :☐Terrace ☐High-Rise ☐Semi-Detach ☐Detach (Bungalow) ☐Others _____

Property address : _____

_____ Postcode: _____

Indicative Market Value : RM _____ Valuation Date: ____/____/____

Applicant Expected Market Value : RM _____

Sale & Purchase Price : RM _____ S & P Date: ____/____/____

Tenure of Property Title : ☐ Freehold ☐ Leasehold (Specify Expiry Date of Lease): ____/____/____

Build up area (in sq) : _____ Land area (in sq) : _____

Property unencumbered : ☐ Yes ☐ No

Fire & Home Insurance/Takaful policy (or its equivalent policy) : ☐ In force Insurance Company/Takaful Operator: _____

Period Validity: _____

☐ Not Available Insurance/Takaful Policy to be purchased by *(Choose one)*
☐ Self-purchase ☐ Cagamas and to be included in the facility amount

Renewal of Fire & Home Insurance : ☐ Self-renewal ☐ To be renewed by Cagamas via deduction from monthly payout

**PARTICULAR OF NOMINEE (1)**
**The nominee must be the applicant's Next of Kin[1], aged 18 years or older, and younger than the main applicant. If the nominee is not the Next of Kin, please provide a rationale for the nomination***

Salutation : ☐ Tan Sri ☐ Dato' ☐ Mr. ☐ Ms. ☐ Mdm. ☐ Others *(please specify)* _____

Name as per NRIC :_____

NRIC No./ MyTentera/ MyPolis : _____

Residential Address : _____

_____ Postcode: _____

Email :_____

Telephone No. (Residence) :_____ Telephone No (H/P): _____

Date of Birth :____/____/____(DD/MM/YYYY) Sex: ☐ Male ☐ Female

Race : ☐ Malay ☐ Chinese ☐Indian ☐ Others _____

Malaysian :☐ Yes ☐ No Marital Status: ☐ Single ☐ Married ☐ Others *(please specify)*_____

Relationship : _____

**Please provide rationale if the nominee is not Next of Kin

_____

**PARTICULAR OF NOMINIEE (2)**
**The nominee must be the applicant's Next of Kin, aged 18 years or older, and younger than the main applicant. If the nominee is not the Next of Kin, please provide a rationale for the nomination***

Salutation / Title : ☐ Tan Sri ☐ Dato' ☐ Mr. ☐ Ms. ☐ Mdm. ☐ Others *(please specify)* _____

Name as per NRIC :_____

NRIC No. /MyTentera/MyPolis : _____

Residential Address : _____

_____ Postcode: _____

Email :_____

Telephone No. (Residence) :_____ Telephone No (H/P): _____

Date of Birth :____/____/____(DD/MM/YYYY) Sex: ☐Male ☐Female

Race : ☐ Malay ☐ Chinese ☐ Indian ☐ Others (*please specify*) _____

Malaysian : ☐ Yes ☐ No Marital Status:☐ Single ☐ Married ☐Others *(please specify)* _____

Relationship : _____

*Please provide rationale if the nominee is not Next of Kin

_____

[1] *The Next of Kin means someone who has a blood relation or legal relationship such as parents, husband or wife, children, siblings or cousins – LHDN Malaysia: The Deceased, Part I – Introduction, Public Ruling No. 9/2023*

**DECLARATION / DISCLOSURE BY APPLICANT(S)**

1. I/We declare that all information provided in this application form is true, accurate and complete. I/We confirm that no material information has been withheld which may prejudice my/our application or affect the decision of Cagamas Berhad ("Cagamas") and/or the Cagamas' business partner ("Partner Bank").

2. I/We understand that this application form shall remain the property of Cagamas, regardless of whether the application is approved. Cagamas reserves the absolute right to reject this application at its discretion without providing any reason.

3. I/We confirm that I/we have not committed any act of bankruptcy and have not been adjudged a bankrupt.

4. By submitting this application form, I/we hereby give my/our consent for Cagamas and/or the Partner Bank to collect, use, disclose, store, transfer, and otherwise process my/our personal data for purposes related to:
   4.1. Processing and evaluating this application;
   4.2. Administering and managing any facility granted pursuant to this application;
   4.3. Managing the ongoing account relationship; and/or
   4.4. Compliance with applicable laws, regulations, and regulatory requirements.

   This includes the disclosure of my/our personal data to third-party service providers, affiliates, and relevant authorities where necessary. For further information, I/we acknowledge that I/we have read and understood the **Cagamas Privacy Statement** available at: https://www.cagamas.com.my/privacy-statement .

5. I/We consent to receive marketing materials and promotional communications from Cagamas and its business partners:
   ☐ YES ☐ NO

6. I/We confirm that the house/property pledged under this SSBT is not my/our primary residence, as required under the product terms and conditions. The property is free from any encumbrances, gift or hibah.

7. I/We agree to notify Cagamas and obtain prior written consent before occupying the pledged property as a primary residence during the facility tenure. I/We acknowledge that failure to settle the outstanding amount upon SSBT maturity may result in foreclosure by Cagamas, and loss of the right to reside in the property.

8. I/We hereby confirm that, to the best of my/our knowledge, the property pledged under this SSBT is not located in a flood-prone or landslide-affected area, and no such events have occurred to date.

9. I/We acknowledge that all information provided herein is accurate and valid, and I/we undertake to inform Cagamas immediately of any changes to my/our personal data or other relevant details. I/We confirm that I/we have read and understood all the provisions above, including Cagamas's Privacy Statement.

10. I/We further authorize any credit reporting agency registered under the Credit Reporting Agencies Act 2010 (CRA) to process and disclose my/our credit information (as defined under the CRA) to Cagamas and/or the Partner Bank for the purposes stated above, including fraud detection and prevention. This authorization remains valid throughout the application process.

11. I/We further expressively consent and authorize Cagamas and/or Partner Bank to seek any information about me/us with or from any credit reference/reporting agencies, including but not limited to Central Credit Reference Information System ("CCRIS"), EXPERIAN, CTOS or any other relevant authority/agencies accepted by Cagamas from time to time.

12. This consent shall remain valid for the duration of the application process and, where applicable, for the management and administration of the SSBT facility.

13. If I/we do not proceed with this application, I/we agree to reimburse Cagamas for any reasonable costs, expenses, or charges incurred on my/our behalf in connection with this application.

| Signed by Applicant | Signed by Joint Applicant |
|---|---|
| Applicant's Name:<br><br>Date: | Joint Applicant's Name:<br><br>Date: |

List of documents to be enclosed together with SSBT Application Form (where applicable)

1. Photocopy(ies) of NRIC of the Applicant(s)
2. For joint application, a copy of marriage certification or birth certification, whichever is relevant
3. Acknowledgement Form to be signed by Nominee(s)
4. A copy of the land title/strata title/ Sale & Purchase Agreement/ Deed of Assignment (where applicable)
5. A copy of Product Disclosure Sheet (PDS) signed by the borrower(s) and Partner Bank representative.
6. A copy of the latest receipts for quit rent, assessment, and maintenance fee (if applicable)
7. A copy of land premium receipt (for renewal of land lease up to minimum 60 years from the maturity of the facility term)
8. A copy of recent valuation report (if applicable)
9. A copy of Fire and Home Insurance Policy/Takaful Certificate or its equivalent policy (if applicable)
10. A copy of Consent Letter for credit checking
11. A copy of Certificate of Completion & Compliance (CCC) – applicable for self-build/construct bungalow.

**ACKNOWLEDGEMENT FORM**

To: Cagamas Berhad ("**Cagamas**")
Level 32, The Gardens North Tower, Mid Valley City,
Lingkaran Syed Putra,
59200 Kuala Lumpur

I, (Name of Nominee) _____(NRIC No.)

_____ of (Address) _____

_____,

hereby acknowledge that I have been duly appointed as the Nominee by (Name of Applicant)

_____ (NRIC No.) _____;

and (Name of Applicant) _____ (NRIC No.)

_____of (Address) _____

_____(collectively

referred to as the "**Applicant(s)"**), in relation to the application for the Fixed Term Reverse Mortgage Facility (the "Facility") submitted by the Applicant(s) to Cagamas on (Date of Application) _____. In the event the Facility is approved and entered into between the Applicant(s) and Cagamas, I hereby undertake and agree to perform all responsibilities and obligations required of me as a Nominee, including the following:

(i) Undertake to promptly notify Cagamas in writing of the death of the Applicant(s); and

(ii) Agree to receive and/or acknowledge receipt of all documents and notices served upon me by Cagamas (including any documents relating to any proceedings or actions commenced by Cagamas in connection with the Facility, including any notices relating to legal proceedings or enforcement actions.).

I acknowledge and consent to the collection, use, disclosure, and processing of my personal data by Cagamas for purposes related to the evaluation, administration, and management of the Facility, in accordance with the Cagamas Privacy Statement available at https://www.cagamas.com.my/privacy-statement .

Date: _____/ _____/ _____

Signed by,

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Name of Nominee :
NRIC No. :

*Whichever is applicable.

**ACKNOWLEDGEMENT FORM**

To: Cagamas Berhad ("**Cagamas**")
Level 32, The Gardens North Tower, Mid Valley City,
Lingkaran Syed Putra,
59200 Kuala Lumpur

I, (Name of Nominee) _____(NRIC No.)

_____ of (Address) _____

_____,

hereby acknowledge that I have been duly appointed as the Nominee by (Name of Applicant)

_____ (NRIC No.) _____;

and (Name of Applicant) _____(NRIC No.)

_____of (Address) _____

_____(collectively

referred to as the "**Applicant(s)"**), in relation to the application for the Fixed Term Reverse Mortgage Facility (the "Facility") submitted by the Applicant(s) to Cagamas on (Date of Application) _____. In the event the Facility is approved and entered into between the Applicant(s) and Cagamas, I hereby undertake and agree to perform all responsibilities and obligations required of me as a Nominee, including the following:

(i) Undertake to promptly notify Cagamas in writing of the death of the Applicant(s); and

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I acknowledge and consent to the collection, use, disclosure, and processing of my personal data by Cagamas for purposes related to the evaluation, administration, and management of the Facility, in accordance with the Cagamas Privacy Statement available at https://www.cagamas.com.my/privacy-statement .

Date: _____/ _____/ _____

Signed by,

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Name of Nominee :
NRIC No. :

*Whichever is applicable.