Conditions for TermLife Solitaire

Your policy

This is an insurance protection plan that provides cover for a limited period.

We will pay benefits if the insured becomes terminally ill or dies during the term of the policy.

You cannot cash in this policy.

after the insured's 100th birthday falls within the next policy term.

We will continue to renew the policy in this way until the insured is 75 years or older at the time the policy is due for renewal. **We** will stop renewing the policy then.

We will work out the renewal premium based on the policy's renewal term, sum assured and the age of the insured at the time the policy is renewed.

1 What your policy covers

If the insured becomes **terminally ill** or dies during the term of the policy, **we** will pay the sum assured. The policy will end when **we** make this payment.

2 Our responsibilities to you

The policy term will give details of how long this policy applies for. If your policy has not ended as a result of a claim during its term, when it ends, we will renew it for the same policy term at its prevailing sum assured.

However, in any one of the situations shown below, **we** will renew it for a shorter term that is a multiple of five years, as long as the minimum term is 10 years. This means the renewal term will neither go beyond the original policy term, nor the **anniversary** immediately after the insured's 100th birthday.

- If the original policy term is not a multiple of five years.
- If the original policy term is a multiple of five years, but the anniversary immediately

3 Your responsibilities

You will pay your first premium at the time you apply for this policy. You will then pay future premiums when they are due. You will have 30 days as a period of grace to make these payments for this policy to continue. If we are due to pay any benefits during this period, we will take off any unpaid premiums from the benefits.

If **you** still have not paid the premium after the period of grace, this policy and its riders (if any) will end.

If this policy and its riders (if any) end because you have not paid the premium, you can reinstate it within 36 months by paying the premiums you owe along with interest. This applies as long as you give us satisfactory proof of the insured's good health and there is no change in the risks covered by this policy. However, if we do not ask for the insured's health declaration or medical checks when you apply, you do not need to give us satisfactory proof of the insured's good health.

If **you** cancel this policy and its riders (if any) before the next premium is due, **we** will end this policy and its riders (if any) from the next

premium due date and **we** will not refund any unused premium.

4 What you need to be aware of

a Suicide

This policy is not valid if the insured commits suicide within one year from the **cover start** date.

We will refund the total premiums paid, without interest, less any amounts we have paid you, and any amount you owe us, from the cover start date.

b Terminal illness benefit

We will not pay this benefit if your claim arises from:

- deliberate acts such as self-inflicted injuries, illnesses or attempted suicide;
- unlawful acts, provoked assault, or deliberate exposure to danger; or
- the effects of alcohol, drugs or any dependence.

c Effects of an accelerated payment

When **we** make an **accelerated payment** on a rider that is attached to this policy, **we** will reduce the sum assured of this policy and other accelerated riders attached to this policy by the same amount that **we** pay under that rider.

If there is an **accelerated payment** on this policy during the policy term, when it ends, **we** will renew this policy for the same policy term (depending on what **we** say in clause 2 above) at the reduced sum assured.

We will work out any future premiums or claims based on the reduced sum assured, as long as the sum assured does not reach zero. This policy will end when the sum assured reaches zero.

d Making a claim

To make a claim for death benefit, **we** must be told within six months after the insured's death.

If this policy provides for accidental death or accidental total and permanent disability (TPD) benefit, **we** must be told within thirty days after the insured's death or TPD. If **you** tell **us** after the thirty days, **we** will not pay the claim for accidental death or accidental TPD benefit.

To make a claim for other benefits, **we** must be told within six months after the diagnosis or the event giving rise to the claim. If **you** tell **us** after the six months, **we** will not pay the claim for the other benefits.

When **we** pay a claim, **we** will not refund any premiums that have been paid.

e Refusing to pay a claim

After **you** have been continuously covered for one year from the **cover start date**, **we** will pay your claim unless:

- it is a case of fraud;
- you fail to pay a premium;
- the insured has a material pre-existing condition which you did not tell us about when you applied for this policy or rider if health declaration is required;
- you or the insured fail to tell us any significant information or information which is true, correct and complete which would have reasonably affected our decision to accept your application; or
- the claim is excluded or not covered under the terms of this policy or rider.

f Transferring the legal right of the policy

You cannot assign (transfer) this policy unless you tell us in writing and we agree to the assignment.

g Excluding third-party rights

Anyone not directly involved in this policy cannot enforce it under the Contracts (Rights of Third Parties) Act 2001.

5 Definitions

Accelerated payment means any payment we make under any rider, if that payment reduces the sum assured and any bonuses of the policy which the rider is attached to.

Anniversary means the last day of every 12 months from the entry date of the policy.

Cover start date means the date:

- **we** issue the policy;
- we issue an endorsement to include or increase a benefit; or
- **we** reinstate the policy; whichever is latest.

Material pre-existing condition means any condition that existed before the cover start date which would have reasonably affected our decision to accept your application and for which:

- the insured had symptoms that would have caused any sensible person to get medical treatment, advice or care;
- treatment was recommended by or received from a medical practitioner; or

the insured had medical tests or investigations.

Registered medical practitioner means a doctor who is qualified in western medicine and is legally licensed in Singapore or has the qualifications recognised by the Singapore Medical Council.

Specialist means a registered medical practitioner who has the extra qualifications and expertise needed to practise as a recognised specialist of diagnostic techniques, treatment and prevention, in the particular field of medicine that such specialist is being consulted for and providing any advice or determination on (including diagnosis, certification and recommendation).

Terminal illness, and terminally ill, means "any condition caused by illness or injury, where at the time of claim, despite all reasonable medical treatment, the insured is expected to live for no more than 12 months." The specialist medical practitioner treating the condition must provide supporting evidence of the condition, possible medical treatment, the prognosis after undergoing the possible medical treatment, and certify that the insured is expected to live for no more than 12 months despite all possible medical intervention. We reserve the right to appoint an independent medical specialist who is an expert in the condition to confirm the diagnosis and prognosis. Terminal Illness in the presence of HIV infection is excluded.

We, us, our means Income Insurance Limited.

You means the policyholder shown in the policy schedule.