

## Table of cover (PA 360)

For your local and overseas journeys		Maximum benefit (S\$) per insured person	
		Basic	Superior
Section 1	Accidental death	58,000	128,000
Section 2	Permanent disability (per policy year)	58,000	128,000
Section 3	Medical expenses for injury due to an accident (per accident)	500	2,000
Section 4	Treatment by a Chinese medicine practitioner or a chiropractor (per accident)	500	500
Section 5	Mobility aids (per accident)	500	2,000
Section 6	Daily hospital income (per day; up to 365 days per policy year)	50	100
Section 7	Weekly cash (per week; up to 104 weeks in a row)	50	100
Section 8	Trauma counseling expenses (per policy year)	5,000	5,000
Section 9	Child support fund	5,000	5,000
Section 10	Modifying your home (per lifetime)	5,000	10,000
Section 11	Ambulance fee (per accident)	200	500
Section 12	Physiotherapy (per policy year)	500	1,000
Section 13	Diagnostic procedures and tests due to broken bones or fractures (per accident)	500	1,000

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# Policy Conditions

## i50 (PA 360)

### Your policy

This is **your** NTUC Income 50<sup>th</sup> anniversary (i50) insurance **policy** and it contains details of benefits, conditions and exclusions relating to each **insured person**. The **policy** will form the basis on which **we** will settle all claims. It is only valid if **you** have paid the appropriate premium in full and **we** have issued **you** with a **schedule**.

Any statement, information or declaration the **policyholder** or **you** have given on behalf of the **insured persons**, including any declaration made over the phone, or by fax, email or the internet at the time of application, will form the basis of the contract.

The **schedule**, **table of cover** and any further **endorsements** are all part of the **policy**.

Please keep this document in case **you** need to refer to it.

### Who is eligible?

This **policy** is only available to **you** if:

- **you** hold a valid Singapore identification document such as a Singapore National Registration Identification Card (NRIC), Employment Pass, Work Permit, Long Term Visit Pass or Student Pass;
- **you** are living or working in Singapore, or away from Singapore for no more than 180 days at any one time;
- **you** are between 15 days old and 65 years old (**we** may continue cover for **you** up to 80 years old at a reduced sum insured and **we** may apply new terms; depending on **our** decision and if **you** pay an extra premium); and
- **your** premium has been fully paid.

### Things to note

- **You** and the **policyholder** must reveal all facts that **you** or the **policyholder** know or ought to know which may affect the insurance cover the **policyholder** is applying for. If not, **your policy** may not be valid.
- **We** do not cover claims arising from **pre-existing medical conditions** or **known events**.
- For a **policy** with a monthly **recurring payment arrangement**, before **we** can pay the claim, **we** will first take from the claim amount any premium owed to **us** for the rest of the **policy year**.

## Definitions

**Act of terrorism** means an act (which may include using force or violence) by any person or group, committed for political, religious, ideological or similar purposes, with the aim of influencing any government or to put the public, or any section of the public, in fear.

Robberies or other criminal acts mainly committed for personal gain and acts arising mainly as a result of personal relationships will not be considered as an **act of terrorism**.

**Act of terrorism** also includes any act which is confirmed by the relevant government as an **act of terrorism**. Using nuclear, chemical or biological substances or weapons as a means of force or violence will also be considered an **act of terrorism**.

**Accident** or **accidental** means a sudden, unexpected event which happens during the **period of insurance** and which must be the only cause of **injury** or damage to or loss of property, whichever applies.

**Age** means the person's current age at the start date of the **policy**.

**Chinese medicine practitioner** means a legally licensed herbalist, acupuncturist or bone-setter who is registered and can practise within the scope of their licence under the laws of the country. This cannot be **you, your family member, travelling companion, partner, business partner, employer, employee or agent**.

**Chiropractor** means a legally licensed practitioner in chiropractic medicine who is registered and can practise within the scope of their licence under the laws of the country. This cannot be **you, your family member, travelling companion, partner, business partner, employer, employee or agent**.

**Community hospital** means any hospital that focuses on sub-acute care or rehabilitation, or is deemed as a community hospital by Singapore's Ministry of Health, or other relevant national laws and regulations.

**Dental treatment** means treatment necessary to restore sound and natural teeth which is necessary due to an **accident**.

**Dependent child(ren)** means **your** child(ren) who are:

- under 18 years of **age**; or
- under 25 years of **age**; unmarried and not on full-time employment; and are primarily dependent upon **you** for maintenance and support. For example, full-time students or national servicemen.

**Endorsement** means an authorised amendment to this **policy**.

**Family member** means the **policyholder's** or **your** husband or wife, children, parents, brothers and sisters, parents-in-law, brothers-in-law, sisters-in-law, grandparents, grandparents-in-law, daughters-in-law, sons-in-law or grandchildren.

**Home** means the Singapore residential address shown on **your** Singapore National Registration Identification Card (NRIC) or on any official document.

**Hospital** means an establishment which is registered under the relevant national laws and regulations to care for and treat sick and injured people as bed-paying patients and which:

- has organised facilities for diagnosis, treatment and major surgery;
- provides nursing services by registered nurses 24 hours a day;
- is under the supervision of one or more **medical practitioners**; and
- is not mainly a clinic, a **community hospital**, a secure place to care for alcoholics or drug addicts, a nursing or rest or convalescent home or a home for the elderly or similar establishment.

**Infectious disease** means any of the following diseases which is diagnosed by a **medical practitioner** during the **period of insurance** and is supported by acceptable clinical, radiological, histological and laboratory evidence:

- Hand, foot and mouth disease (HFMD)
- Dengue fever (DHF)
- Avian influenza or 'bird flu' due to influenza A viral strains H5N1, H9N2, H7N7, H7N9, or H1N1
- Mumps
- Rubella
- Tuberculosis
- Measles
- Malaria
- Anthrax infection
- Yellow fever
- Plague
- Melioidosis or 'soil disease'
- Rabies
- Legionnaires' disease
- Chikungunya
- Nipah viral encephalitis
- Japanese viral encephalitis
- Variant Creutzfeldt-Jakob disease (vCJD) or 'mad cow disease'
- Severe acute respiratory syndrome (SARS)
- Middle east respiratory syndrome coronavirus (MERS-CoV)
- Zika virus

**We** will not cover any **infectious diseases** not listed above.

**Injury** means damage or harm caused to the body by an external force suffered during the **period of insurance** and which is caused only by an **accident**.

**Insured person** means the individual (or individuals) named in the **schedule** as the person (or people) who is insured under this **policy**.

**Known event** means any situation or incident which threatens or affects **your** health or any situation that **you** were aware of or could reasonably have been expected to know before **you** applied for cover under this **policy**.

**Losing** means permanent and total loss of use, or loss by having part of the body (as listed in the scale of compensation table) cut or torn off, as confirmed by **our medical practitioner**.

**Losing hearing** means permanent and total loss of hearing, as confirmed by **our medical practitioner**.

**Losing a limb** means permanent and total loss of, or loss of use of, a hand at or above the wrist or a foot at or above the ankle. This must be confirmed by **our medical practitioner**.

**Losing sight** means total and permanent loss of use of an eye which means **you** are absolutely blind in that eye and which is beyond cure either by surgical or other treatment. This must be confirmed by **our medical practitioner**.

**Losing speech** means permanent and total loss of the ability to speak and which is beyond cure either by surgical or other treatment, as confirmed by **our medical practitioner**.

**Medical practitioner** means any person registered and legally qualified as a doctor by a medical degree in western medicine and authorised by the medical licensing authority of that country to provide medical or surgical service within the scope of their licence and training. The **medical practitioner** cannot be **you**, **your family member**, **travelling companion**, partner, business partner, employer, employee or agent.

**Overseas** means anywhere outside Singapore.

**Payment frequency** means how often payment is made for the premium due. This can be monthly or yearly, depending on what the **policyholder** chooses.

**Period of insurance** means the period of cover as shown in the **schedule**.

**Permanently disabled** or **permanent disability** means suffering from one of the items of disablement listed in the scale of compensation table in this **policy**, and which was caused by an **accident** or by an **infectious disease**, as long as:

- the disability lasts for 12 months in a row from the date of **accident** or date of diagnosis of the **infectious disease**; and
- **our medical practitioner** confirms that it is not going to improve after 12 months.

**Permanent total disability** means total disability caused by an **accident** or the contraction of an **infectious disease** that:

- stops **you** from working in any job for a salary or wage or stops **you** from carrying out any business whatsoever; and
- lasts for 12 months in a row from the date of the **accident** or date of diagnosis of the **infectious disease**; and
- **our medical practitioner** confirms that it is not going to improve after 12 months.

**Policy** means this document, including any information provided or declaration made by the **policyholder** for and on behalf of the **insured person** (or people), the **schedule**, the **table of cover** and any **endorsements** we have issued under this **policy**.

**Policyholder** means the person named and who has made a declaration on behalf of the **insured person** and paid the premium as shown in the **schedule**.

**Policy year** means a period of 12 months from the start date as shown in the **schedule** and each further consecutive period of 12 months for which the **policy** applies from or for any period of cover as agreed between the **policyholder** and **us**.

**Pre-existing medical condition** means any injury or **sickness**, including any complications which may arise:

- a** which **you** knew or should reasonably know about; including symptoms which existed before the start of **your policy**;
- b** which **you** received diagnosis, consultation, medical treatment or prescribed drugs for within 12 months before the start of **your policy**; or
- c** for which **you** have been asked to get medical treatment or medical advice by a **medical practitioner** within 12 months before the start of **your policy**.

**Infectious diseases** which **you** have contracted and fully recovered from before the start of **your policy** will not be considered as **pre-existing medical conditions**.

**Prohibited person** means a person or entity who is subject to laws, regulations or sanctions administered by any governmental or regulatory authorities or law enforcement in any country, which will prohibit **us** from providing insurance cover or paying any benefit.

**Recurring payment arrangement** means:

- a** the premium is charged to a credit card, chosen by the **policyholder**, either on a monthly or yearly basis to pay the premiums due for the current **policy** or when it is renewed, depending on the **payment frequency** chosen by the **policyholder**; or
- b** the premium is taken from a bank account chosen by the **policyholder** to pay the premiums due for the current **policy** or when it is renewed, by General Interbank Recurring Order (GIRO) on a yearly basis.

**Relevant Person** includes insured, trustee, assignee, beneficiary, beneficial owner or nominee and mortgagee or financier.

**Sickness** means worsening physical health not caused by an **accident**, for which the care or treatment of a **medical practitioner** is needed.

**Schedule** means the document which proves that **you** have the insurance cover, listing among other things, details of the **insured person** (or people), the **policyholder**, the plan type, and the **period of insurance** covered under this **policy**.

**Table of cover** means the separate table showing the list of benefits **we** will pay **you** according to **your** plan while this **policy** is in force. It will depend on the terms, conditions, limits, exclusions and qualifications of this **policy**.

**Temporary disability** or **temporarily disabled** means disability caused by an **injury** which directly disables and prevents **you** from taking part in any occupation temporarily.

**We, our, us, and Income** means NTUC Income Insurance Co-operative Limited.

**You, your and yours** means the **insured person** (or people) referred to in the **schedule**.

**Your plan** means the plan (with specific limits) that **you** chose at the time **you** applied for this **policy**.

## What your policy covers

This **policy** will protect **you** financially when a death, **injury**, or other specified event happens during the **period of insurance**.

The amount **we** will pay depends on the conditions and maximum benefit limits and sub-limits of **your** plan as set out in the **table of cover**.

## Section 1 – Accidental death

When we will pay	What we pay	What we do not pay
<p><b>A</b> If <b>you</b> are involved in an <b>accident</b> in Singapore or <b>overseas</b>, and due only to this <b>accident you</b> die within 12 months from the date of the <b>accident</b>.</p>	<p><b>1</b> We will pay <b>your</b> estate or <b>your</b> legal personal representative up to the limit as shown in the <b>table of cover</b>.</p>	<p>Besides the general exclusions listed in part 2 of the general conditions, <b>we</b> will also not pay for the following, or for loss or liability directly or indirectly caused by the following.</p> <p><b>1</b> The death or the disability resulting in the death is caused directly or indirectly by <b>sickness</b> (for example, a heart attack or stroke) and not by an <b>injury</b>.</p> <p><b>2</b> The death is caused directly or indirectly by any physical disability which existed before the start of the <b>policy</b>.</p>

## Section 2 – Permanent disability

When we will pay	What we pay	What we do not pay
<p><b>A</b> If <b>you</b> are involved in an <b>accident</b> in Singapore or <b>overseas</b> which causes <b>you</b> an <b>injury</b>, and due only to this <b>accident you</b> become <b>permanently disabled</b> within 12 months from the date of the <b>accident</b>.</p>	<p><b>1</b> We will pay <b>you</b> up to the limit as shown in <b>table of cover</b> using the scale of compensation table as shown below.</p> <p><b>2</b> We will reduce any compensation due for <b>accidental</b> death by any payment which <b>we</b> have already made to <b>you</b> under the scale of compensation within the same <b>policy year</b>.</p>	<p>Besides the general exclusions listed in part 2 of the general conditions, <b>we</b> will also not pay for the following, or for loss or liability directly or indirectly caused by the following.</p> <p><b>1</b> The disability is caused directly or indirectly by <b>sickness</b> (for example, a heart attack or stroke) and not by an <b>injury</b>.</p> <p><b>2</b> The disability is caused directly or indirectly by any physical disability which existed before the start of the <b>policy</b>.</p> <p><b>3</b> Extra compensation for any specific item which is part of a greater item due under this <b>policy</b>. For example, <b>we</b> will pay <b>you</b> for <b>losing your</b> upper limb, but <b>we</b> will not pay <b>you</b> again for <b>losing your</b> finger or thumb.</p>

### Scale of compensation

Item	Description of disability	Percentage of sum insured as shown under section 2 in the table of cover of your plan
a	<b>Permanent total disability</b>	100%
b	<b>Losing sight</b> of both eyes	100%
c	<b>Losing two limbs</b>	100%
d	<b>Losing sight</b> of one eye, except perception of light	50%



e	<b>Losing one limb</b>	50%
f	<b>Losing speech</b>	50%
g	<b>Losing hearing</b> in both ears	50%
h	<b>Losing</b> four fingers and thumb of one hand	50%
i	<b>Losing</b> four fingers of one hand	40%
j	<b>Losing hearing</b> in one ear	20%
k	<b>Losing</b> a thumb - 2 phalanges - 1 phalanx	25% 10%
l	<b>Losing</b> one index finger - 3 phalanges - 2 phalanges - 1 phalanx	15% 10% 5%
m	<b>Losing</b> any one other finger - 3 phalanges - 2 phalanges - 1 phalanx	10% 7% 3%
n	<b>Losing</b> metacarpals - first or second - third, fourth or fifth	3% 2%
o	<b>Losing</b> all toes of one foot	15%
p	<b>Losing</b> a great toe - 2 phalanges - 1 phalanx	5% 3%
q	<b>Losing</b> any one other toe	3%
<b>Third-degree burns</b>		
r	Head - Damage as a percentage of total body surface area - equal to or greater than 8% - equal to or greater than 5% but less than 8% - equal to or greater than 2% but less than 5%	100% 75% 50%
s	Body - Damage as a percentage of total body surface area - equal to or greater than 20% - equal to or greater than 15% but less than 20% - equal to or greater than 10% but less than 15%	100% 75% 50%
<b>We will not pay you any compensation if the disability is not listed in the scale of compensation.</b>		
The total of all percentages of the sum insured due under this section will not be more than 100% during any one policy year.		

### Section 3 – Medical expenses for injury due to an accident

When we will pay	What we pay	What we do not pay
<b>A</b> If <b>you</b> suffer an <b>injury</b> in Singapore or <b>overseas</b> and need to get medical treatment.	<ol style="list-style-type: none"> <li><b>1</b> We will pay for the costs of medical, surgical, <b>hospital, dental treatment</b> and nursing fees, recommended or asked for by a <b>medical practitioner</b> for <b>you</b> to be treated, up to the limit shown in the <b>table of cover</b> or up to a period of 12 months from the date of the <b>accident</b>, whichever comes first.</li> <li><b>2</b> If <b>we</b> pay <b>your</b> claim above, <b>we</b> will also pay for the reasonable costs of medical reports that <b>we</b></li> </ol>	<p>Besides the general exclusions listed in part 2 of the general conditions, <b>we</b> will also not pay for the following, or for loss or liability directly or indirectly caused by the following.</p> <ol style="list-style-type: none"> <li><b>1</b> The medical treatment is caused directly or indirectly by <b>sickness</b> (for example, a heart attack or a stroke) and not by an <b>injury</b>.</li> <li><b>2</b> The medical treatment is caused directly or indirectly by any physical disability which existed</li> </ol>

	asked <b>you</b> to provide <b>us</b> when <b>you</b> made the claim.	before the start date of the <b>policy</b> .
	<b>3</b> The most <b>we</b> will pay for any one <b>accident</b> is up to the limit as shown in the <b>table of cover</b> .	<b>3</b> Claims for nursing care that is not provided by the <b>hospital</b> .

#### Section 4 – Treatment by a Chinese medicine practitioner or a chiropractor

When we will pay	What we pay	What we do not pay
<b>A</b> If <b>you</b> suffer an <b>injury</b> in Singapore or <b>overseas</b> , and need to get treatment by a <b>Chinese medicine practitioner</b> or <b>chiropractor</b> .	<b>1</b> <b>We</b> will pay for the reasonable and necessary expenses for treatment by a <b>Chinese medicine practitioner</b> or <b>chiropractor</b> , up to the limit shown in the <b>table of cover</b> or up to a period of 12 months from the date of the <b>accident</b> , whichever comes first.  <b>2</b> The most <b>we</b> will pay for any one <b>accident</b> is up to the limit as shown in the <b>table of cover</b> .	Besides the general exclusions listed in part 2 of the general conditions, <b>we</b> will also not pay for the following, or for loss or liability directly or indirectly caused by the following.  <b>1</b> The medical treatment is caused directly or indirectly by <b>sickness</b> (for example, a heart attack or a stroke) and not by an <b>injury</b> .  <b>2</b> The medical treatment is caused directly or indirectly by any physical disability which existed before the start date of the <b>policy</b> .

#### Section 5 – Mobility aids

When we will pay	What we pay	What we do not pay
<b>A</b> If <b>you</b> suffer an <b>injury</b> in Singapore or <b>overseas</b> and within 12 months from the date of <b>accident</b> , <b>you</b> need to use mobility aids such as wheelchairs, walking aids or similar which are necessary for <b>your</b> mobility and are prescribed by a <b>medical practitioner</b> .	<b>1</b> <b>We</b> will pay the actual cost incurred for buying or renting the mobility aids, up to the limit as shown in the <b>table of cover</b> for any one <b>accident</b> .	The general exclusions listed in part 2 of the general conditions.

#### Section 6 – Daily hospital income

When we will pay	What we pay	What we do not pay
<b>A</b> If <b>you</b> are staying in a <b>hospital</b> as an inpatient due to an <b>injury</b> in Singapore or <b>overseas</b> .	<b>1</b> <b>We</b> will pay the benefit as shown in the <b>table of cover</b> for each complete 24-hour period that <b>you</b> stay as an inpatient in the <b>hospital</b> , for up to 365 days in each <b>policy year</b> . This benefit will end once <b>you</b> are discharged from the <b>hospital</b> .	The general exclusions listed in part 2 of the general conditions.

## Section 7 – Weekly cash

When we will pay	What we pay	What we do not pay
<p><b>A</b> If <b>you</b> suffer an <b>injury</b> in Singapore or <b>overseas</b>, and become <b>temporarily disabled</b>.</p>	<p><b>1</b> We will pay <b>you</b> the lower of either <b>your</b> basic weekly salary or the cash benefit as shown in the <b>table of cover</b> for each full week of <b>temporary disability</b> as confirmed by a <b>medical practitioner</b>, up to 104 weeks in a row.</p>	<p>Besides the general exclusions listed in part 2 of the general conditions, <b>we</b> will also not pay for the following, or for loss or liability directly or indirectly caused by the following.</p> <ol style="list-style-type: none"> <li><b>1</b> <b>Temporary disability</b> that lasts for less than seven days in a row.</li> <li><b>2</b> Claims where the date of <b>your</b> first medical consultation or treatment is more than seven days from the date of the <b>accident</b>.</li> <li><b>3</b> Any subsequent blocks of <b>temporary disability</b> for the same <b>accident</b> which are not continuous.</li> <li><b>4</b> Claims where <b>you</b> are unemployed at the time of the <b>accident</b>. This does not apply to <b>infectious diseases</b> under the <b>infectious disease</b> cover benefit extension.</li> </ol>

## Section 8 – Trauma counselling expenses

When we will pay	What we pay	What we do not pay
<p><b>A</b> If <b>you</b> suffer a <b>permanent disability</b> due to an <b>injury</b> in Singapore or <b>overseas</b>, and need counseling within 90 days from the date of the <b>permanent disability</b> as confirmed by a <b>medical practitioner</b>.</p> <p><b>You</b> must suffer a <b>permanent disability</b> which entitles you to 50% or more percentage of the sum insured as shown in the scale of compensation table under section 2 before <b>we</b> will pay this benefit.</p>	<p><b>1</b> We will pay for the cost of the counseling up to the limit as shown in the <b>table of cover</b> for each <b>policy year</b>.</p>	<p>The general exclusions listed in part 2 of the general conditions.</p>

## Section 9 – Child support fund

When we will pay	What we pay	What we do not pay
<p><b>A</b> If <b>you</b> suffer an <b>injury</b> in Singapore or <b>overseas</b>, and due only to this <b>injury</b> <b>you</b> die within 12 months from the date of the <b>accident</b>.</p>	<p><b>1</b> We will pay <b>your</b> legal personal representative a lump sum as shown in the <b>table of cover</b> for the benefit of <b>your dependent child(ren)</b>.</p>	<p>Besides the general exclusions listed in part 2 of the general conditions, <b>we</b> will also not pay for the following, or for loss or liability directly or indirectly caused by the following.</p>

		1 Claims where <b>you</b> do not leave behind any surviving <b>dependent child(ren)</b> on the date of <b>accidental</b> death.
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## Section 10 – Modifying your home

When we will pay	What we pay	What we do not pay
<p><b>A</b> If <b>you</b> suffer a <b>permanent disability</b> due to an <b>injury</b> in Singapore or <b>overseas</b>, and need to make necessary modifications to <b>your home</b> to help <b>you</b> move around.</p> <p><b>You</b> must suffer a <b>permanent disability</b> which entitles you to 50% or more percentage of the sum insured as shown in the scale of compensation table under section 2 before <b>we</b> will pay this benefit.</p>	<p>1 <b>We</b> will pay for the reasonable cost of modifying <b>your home</b>, where necessary, to help <b>you</b> move around, up to the limit as shown in the <b>table of cover</b>. The modification must be completed and the proof of spending must be sent to <b>us</b> within six months from the date of the <b>permanent disability</b> as confirmed by a <b>medical practitioner</b>.</p>	<p>Besides the general exclusions listed in part 2 of the general conditions, <b>we</b> will also not pay for the following, or for loss or liability directly or indirectly caused by the following.</p> <p>1 Modifications to <b>your home</b> which do not help <b>you</b> to move around.</p> <p>2 Modifications to a <b>home</b> which <b>you</b> do not live in.</p> <p>3 Damages arising from the modification work.</p>

## Section 11 – Ambulance fee

When we will pay	What we pay	What we do not pay
<p><b>A</b> If <b>you</b> have to pay for ambulance charges for transport to a <b>hospital</b>, or for follow-up medical treatment, after an <b>injury</b> in Singapore or <b>overseas</b>.</p>	<p>1 <b>We</b> will pay the actual ambulance fees, up to the limit as shown in the <b>table of cover</b> for any one <b>accident</b>.</p>	<p>The general exclusions listed in part 2 of the general conditions.</p>

## Section 12 – Physiotherapy

When we will pay	What we pay	What we do not pay
<p><b>A</b> If <b>you</b> suffer a <b>permanent disability</b> due to an <b>injury</b> in Singapore or <b>overseas</b>, and need physiotherapy within 90 days from the date of the <b>permanent disability</b> as confirmed by a <b>medical practitioner</b>.</p> <p><b>You</b> must suffer a <b>permanent disability</b> which entitles you to 50% or more percentage of the sum insured as shown in the scale of compensation table under section 2 before <b>we</b> will pay this benefit.</p>	<p>1 <b>We</b> will pay for the cost of the physiotherapy up to the limit as shown in the <b>table of cover</b> for each <b>policy year</b>.</p>	<p>The general exclusions listed in part 2 of the general conditions.</p>

## Section 13 – Diagnostic procedures and tests due to broken bones or fractures

When we will pay	What we pay	What we do not pay
<p><b>A</b> If <b>you</b> suffer from broken bones or fractures due to an <b>injury</b> in Singapore or <b>overseas</b>.</p>	<p>1 <b>We</b> will pay for the costs of diagnostic procedures and tests recommended or asked for by a <b>medical practitioner</b> for <b>you</b> to be treated, up to the limit shown in</p>	<p>The general exclusions listed in part 2 of the general conditions.</p>

	<p>the <b>table of cover</b> or up to a period of 12 months from the date of the <b>accident</b>, whichever comes first.</p> <p><b>2</b> The most <b>we</b> will pay for any one <b>accident</b> is up to the limit as shown in the <b>table of cover</b>.</p>	
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## General conditions which apply to the whole policy

### 1 Benefit extensions

#### a Infectious diseases cover

If **you** suffer or die from an **infectious disease** during the **period of insurance**, **we** will pay up to the limit described in the relevant sections as shown in the **table of cover**. This extension is not valid for **infectious diseases**:

- i. that **you** have been diagnosed with within 14 days from the start date of this **policy**; or
- ii. which have been announced as:
  - an epidemic by the health authority in Singapore or the Government of the Republic of Singapore; or
  - a pandemic by the World Health Organisation (WHO);in the affected countries, from the date of announcement until the epidemic or pandemic ends.

#### b Riot, strike, civil commotion, hijack, murder and assault

If **you** suffer an **injury** or die because of an **accident** during a riot, strike, civil commotion, hijack, murder or assault, **we** will pay up to the limit shown in the relevant section as shown in the **table of cover**. This extension is only valid if **you** did not take part in any criminal act or make an agreement with other people to carry out these acts.

#### c Disappearance

If **your** body is not found within 12 months after the sinking, wrecking or destruction of the public transport in which **you** are travelling during the **period of insurance**, **we** will consider **you** to be dead and pay the appropriate death benefit shown in the **table of cover** as described in Section 1 – Accidental death.

The payment of the death benefit is made to **your** legal personal representatives after they have signed an undertaking to **us** to guarantee that if **you** are subsequently found to be alive they will, when asked, return to **us** the sums that **we** have paid under this extension.

#### d Exposure

If **you** suffer an **injury** or die because **you** were exposed to natural elements due to an **accident**, **we** will pay up to the limit shown in the relevant section in the **table of cover**.

#### e Food poisoning

If **you** suffer or die from **accidental** food poisoning during the **period of insurance**, **we** will pay up to the limit described in the relevant section as shown in the **table of cover**. This extension is only valid if the event does not arise because of **your** deliberate act.

#### f Suffocation by smoke, poisonous fumes, gas or drowning

If **you** suffer an **injury** or die from **accidentally** breathing in smoke, poisonous fumes, gas or by drowning, **we** will pay up to the limit described in the relevant section as shown in the **table of cover**. This extension is only valid if the event does not arise because of **your** deliberate act.

#### g Miscarriage due to an accident or infectious disease

If **you** suffer a miscarriage or if **you** die from the miscarriage caused by an **accident** or **infectious disease**, **we** will pay up to the limit described in the relevant section as shown in the **table of cover**. This extension is only valid if the event does not arise because of **your** deliberate act.

#### h Act of terrorism cover

If any of the losses covered under sections 1 to 13 arises from or in relation to an **act of terrorism**, **we** will still cover the loss, up to the limit shown in the relevant section as shown in the **table of cover**. This extension is only

valid if **you** did not take part in the **act of terrorism** or make an agreement with other people to carry out the act.

## 2 General exclusions

**We** do not pay for any claim directly or indirectly caused by or arising from:

- a** Travelling **overseas** against medical advice, or while medically unfit to travel, or for the purpose of getting medical treatment, or against travel advisory issued by the Singapore Government;
- b** **You** deliberately injuring yourself, committing suicide or attempting suicide while sane or insane, **your** criminal act, provoked assault, deliberate acts or putting yourself in danger (unless **you** are trying to save human life);
- c** **Your** deliberate act, failure to act, negligence or carelessness;
- d** The effect or influence of alcohol or drugs;
- e** Pregnancy, childbirth, abortion, miscarriage (except as provided in general condition - 1g above) or all complications or death arising from these conditions;
- f** Mental problems or insanity;
- g** Illness, disease (except for **infectious disease** if applicable), bacterial or viral infections even if contracted **accidentally**.
- h** Sexually transmitted infections, human immunodeficiency virus (HIV) or any HIV-related illness including acquired immunity deficiency syndrome (AIDS) or any mutant derivatives or variations of this however they are caused;
- i** Treatment of an optional nature or not considered medically necessary by the **medical practitioner**, for example, cosmetic (aesthetic) or plastic surgery or treatment, or any treatment which relates to or is needed because of previous cosmetic treatment but, this exclusion does not apply to reconstructive surgery if:
  - it is carried out to restore function or appearance after an **accident**;
  - it is done at a medically appropriate stage after the **accident**; and the cost of the treatment is approved by **us** in writing before it is done;
- j** Routine medical treatment, physical examinations, health check-ups or tests which do not form part of the treatment or diagnosis of the actual **injury** or **sickness**;
- k** **Pre-existing medical conditions**, or **infectious diseases** which **you** have not fully recovered from, or physical problems, or physical disabilities, which existed before the start of **your policy**;
- l** Any **known event**;
- m** Taking part in the following activities:
  - i. flying or other aerial activities except as a fare-paying passenger in a licensed passenger-carrying aircraft;
  - ii. any professional sports or in any sports which **you** could receive any form of prize money, donation, sponsorship, award or certificate of any kind;
  - iii. driving or riding on a motor race track, or any kind of speed contest or racing (other than on foot);
  - iv. any dangerous activities or sports including hunting, caving, potholing, rock climbing (except on man-made walls) or mountaineering, sky diving, abseiling, aerobatics, cave diving, cliff diving, BASE (building, antenna, span, earth) jumping, paragliding, hang-gliding, parachuting, free flying, ice climbing, wingsuit flying;
  - v. any underwater activities involving underwater breathing apparatus; except scuba diving for leisure purpose where:
    - **you** hold a PADI certification (or similar recognised qualification) and are diving with a buddy who holds a PADI certification (or similar recognised qualification); or
    - **you** are diving with a qualified instructor;The maximum depth **we** will cover is as shown under **your** PADI certification (or similar recognised qualification) but no deeper than 30 metres;
  - vi. any recreational activity where the following conditions are not met:
    - **you** must comply with all safety procedures, such as wearing safety equipment and following rules and regulations; whether specifically advised or generally expected of a reasonable person, and
    - where guidance and supervision of licensed guides or instructors are available, the recreational activity must be carried out under the guidance and supervision of licensed guides or instructors of the tour operator or activity provider;
  - vii. Trekking for non-leisure purposes, or above 4,000 meters, or in a place which is not generally open to the public without restriction;
  - viii. Expeditions (unless on a recreational or leisure tour organized by a recognized commercial tour operator):
    - to generally inaccessible and remote areas of a country or areas previously unexplored;

- carried out for scientific, research or political purposes to those places; or to Antarctica or similar remote places;
- n** The consequences of war, riot, revolution or any similar event;
- o** Radioactivity or damage from any nuclear fuel, material or waste;
- p** Breaking government regulations or **you** failing to take reasonable efforts to avoid **injury** or avoid contracting the **infectious disease**, or to minimize claims under this **policy**; including after receiving a warning through the media of any event which threatens **your** trip or health;
- q** Travelling in, to or through Afghanistan, Iraq, Liberia, Sudan or Syria.

If **we** refuse to pay a claim as a result of any of the exclusions listed above and **you** disagree with **our** decision, **you** are responsible for proving that **we** are legally responsible for the claim. If any part of any exclusion is found to be invalid or **we** cannot enforce it, it will not affect the rest of the exclusions.

### 3 Cover

The benefits under this policy cover **you** while in Singapore and while **you** are travelling outside Singapore for no more than 180 days in a row.

### 4 Changing your plan

**You** may write and ask to change the plan at **your** next **policy** renewal if **we** approve and if **we** have not paid out any claim under this **policy**. If **we** do approve **your** request, **we** will tell **you** when the change in plan will take place.

### 5 Premium

- a** The premium that the **policyholder** pays for this **policy** can change. If **we** change the premium for this **policy**, **we** will write to the **policyholder** at their last-known address or email address, at least 30 days before the change is to take place, to tell the **policyholder** what the new premium is.
- b** Premium due dates
  - i.** The premium is due on or before the start of this **policy** and if this **policy** is renewed, the start date of the next **policy year**. If the **policyholder** has chosen a monthly **recurring payment arrangement**, the premium is due on the dates shown in the debit note or tax invoice issued to the **policyholder**.
- c** Recurring premium payment
  - i.** The **policyholder** can pay the premium due for this **policy** using the **recurring payment arrangement** they have chosen.
  - ii.** Before the premium due date, **we** will charge the premium to a credit card or take the premium by GIRO from a bank account chosen by the **policyholder**.
  - iii.** The **policyholder** can change the chosen **payment frequency** and **recurring payment arrangement** by calling **us** or writing to **us** at least 21 days before the end of the **policy year**. The change will take effect from the start date of next **policy year**.

### 6 Payment before cover warranty

**We** (or **our** intermediary) must receive the premium due on or before:

- a** the start of this **policy**;
- b** the start date of next **policy year**, if this **policy** is renewed; and
- c** the subsequent premium due dates as shown in the debit note or tax invoice (which applies only if the



**policyholder** chooses the monthly recurring payment arrangement).

If **we** or the intermediary do not receive the premium due on the dates as described above, this **policy** will not be valid and renewed and **we** will not pay any benefits.

## 7 Renewal

If this **policy** is renewed, **we** will provide the new terms and conditions (if applicable) for the next **policy year** before the start date of the next **policy year**.

If **we** did not receive any request to cancel the **policy** as set out in general condition 8(c), **we** will collect the premium using the last **recurring payment arrangement** chosen by the **policyholder**.

This **policy** will apply for as long as **we** can successfully take the premium before the premium due date.

## 8 Cancellation and refund

**a** For **policy** cancellation, **we** will not refund any premium if a claim has been made under this **policy**.

**b** If **we** cancel the **policy**

- i. **We** can cancel this **policy** by giving the **policyholder** seven days' written notice. **We** will consider that the **policyholder** has received this cancellation notice on the same day if **we** deliver the notice by hand or mail at the last-known address of the **policyholder**, or by fax or email at the last known fax numbers or email address of the **policyholder**.
- ii. **We** will cancel this **policy** on the date the premium is due if **we** do not receive the premium due or **we** are not successful in taking the premium from the credit card or GIRO account the **policyholder** has chosen.

If **we** cancel this **policy** because the premium has not been paid, **you** may apply for a new **policy**. However, **your** application will depend on **us** accepting it based on **your** latest physical or medical conditions where applicable.

**c** If there is no claim under this **policy** and the **policyholder** wishes to cancel the **policy**

i. Monthly recurring payment arrangement

- The **policyholder** may cancel this **policy** by calling **us** or writing to **us** and cancellation will be effective from the date **we** receive the notice of cancellation.
- For cancellation after the 14-day free-look period (under general condition 18), **we** must receive the notice of cancellation no later than 21 days before the next monthly premium due date. The **policy** will then be cancelled on the day the monthly premium is due.
- But, if **we** receive the notice of cancellation less than 21 days before the next monthly premium due date, the **policy** will be cancelled on the following month when the premium is due.

### Cancellation of policy with monthly premium payment - For example

Period of insurance	22 Sep 2020 to 21 Sep 2021
Monthly premium due date	22 (Sep, Oct, Nov, Dec, Jan, Feb and so on)
<b>If we receive the notice of cancellation:</b>	
on 1 Oct 2020	cancellation will take effect on 22 Oct 2020
on 20 Oct 2020	cancellation will take effect on 22 Nov 2020

ii. Yearly payment arrangement

- The **policyholder** may cancel this **policy** by calling **us** or writing to **us** and cancellation will apply from the date **we** receive the notice of cancellation.
- For cancellation after the 14-day free look period (under general condition 18), **we** will work out and refund the premium as follows if no claim has been made under this **policy**.

$\frac{\text{Period of insurance (in days) still left to run}}{\text{Original period of insurance of the policy}} \times 85\% \text{ of the premium paid}$
--

- We will not refund any premium below \$53.50 (after GST).

If we refund premiums, we will do so by cheque to the policyholder.

## 9 Paying Benefits

We will pay the benefits listed in this policy only if you have:

- a met general condition 6; and
- b given us satisfactory proof of the claim.

For a policy with a monthly recurring payment arrangement, before we can pay the claim, we will first take from the claim amount any premium owed to us for the rest of the policy year.

We will pay all benefits shown in the table of cover to you unless you die as described in Section 1 – Accidental death, in which case we will pay the benefits to your estate or your legal personal representative.

When we pay the benefits as described above, we will have no further legal responsibility to you under this policy for the claim.

Despite anything we have said to the contrary, we will not pay any claim if the laws of Singapore or of your home country prevent us from doing so.

## 10 Misrepresentation

We will end this policy if the policyholder or you misrepresent or misdescribe any circumstance which affects your health condition, country of residence or pursuits or any information which may affect our decision to accept your application.

## 11 Changes in circumstance

If there is any change in circumstances affecting your risk, you must give us immediate written notice and pay any extra premium that we may ask for. In particular, you must tell us about any change in your health condition, occupation or the country where you are living in.

We can choose not to pay the claim if you have failed to inform us of any change in circumstances affecting your risk.

## 12 Fraud

You and the policyholder must not act in a fraudulent way. We will take the action shown below if you, the policyholder or anyone acting for you:

- a make a claim under the policy knowing the claim to be false or fraudulently exaggerated in any way;
- b make a statement to support a claim knowing the statement to be false in any way;
- c send us a document to support a claim knowing the document to be forged or false in any way; or
- d make a claim for any loss or damage caused by your deliberate act or with your knowledge.

**We** may do the following.

- a **We** will not pay the claim.
- b **We** will not pay any other claim which has been or will be made under the **policy**.
- c **We** may declare the **policy** invalid.
- d **We** can recover from **you** the amount of any claim **we** have already paid under the **policy**.
- e **We** will not refund **your** premium.
- f **We** may not allow **you** to buy other policies from **us**.
- g **We** may report **you** to the police.

### 13 Reasonable care

**You** must take all reasonable precautions to avoid **injury**, or **infectious disease** and take all practical steps to minimize claims.

### 14 Other insurance

If at the time of any incident which results in a claim under this **policy** **you** have another insurance covering the same loss, **we** will not pay more than **our** share.

(This does not apply to Section 1 – Accidental death, Section 2 – Permanent disability, Section 6 – Daily hospital income, Section 7 – Weekly cash, or Section 9 – Child support fund.)

### 15 Taking over your rights

**We** can take over any rights to defend or settle any claim and to take proceedings in **your** name to enforce **your** or **our** rights against any other person.

### 16 Claims conditions

- a **You** must tell **us** as soon as possible, and in any case within 30 days, about any event which may give rise to a claim under this **policy**.
- b If **you** can recover all or part of the expenses from other sources, **we** will only pay **you** the amount that **you** cannot recover.
- c **We** pay all claims in Singapore dollars. If **you** suffer a loss which is in a foreign currency, **we** will convert the amount into Singapore dollars at the exchange rate which **we** will decide on at the date of the loss.

### 17 What you need to provide when you send us your claim

**You** or **your** legal personal representative must supply all information, reports, original invoices and receipts, evidence, medical certificates, documents (such as translation of a foreign-language document into the English language), confirmed by oath if necessary, **we** may need before **we** assess **your** claim. **We** may refuse to refund any expense which **you** cannot provide original receipts or invoices for.

### 18 Free-Look period

**We** will give the **policyholder** 14 days from the time they receive this **policy** to decide whether to continue with it. If the **policyholder** does not want to continue and there is no claim made under this **policy**, he/she may call or write to **us** to cancel this **policy**. The **policyholder** will get a full refund of the premium paid. **We** consider that this **policy**

has been delivered (and received) on the same day **we** email it, or seven days after **we** post it, whichever is earlier. This condition does not apply to **policy** renewals.

## 19 Ending the policy

The **policy** will end immediately when:

- a** **we** cancel this **policy** under general conditions 6, 8(b), 12, or 23;
- b** the **policyholder** cancel this **policy** under general condition 8(c);
- c** **we** have paid 100% of the sum insured under Section 1 – Accidental death, or Section 2 – Permanent disability;
- d** **you** no longer satisfy any of the eligibility requirements set unless **we** have agreed in writing to provide cover;
- e** before entering into the **policy**, **you** or the **policyholder** fail to reveal all facts **you** or they know or ought to know which may affect this **policy**; or
- f** **we** do not renew this **policy**.

## 20 Excluding third-party rights

A person or company who is not covered by this **policy** has no right under the Contracts (Rights of Third Parties) Act (Chapter 53B) to enforce this **policy**.

## 21 Currency and interest

All dollar amounts shown in the **policy** and **schedule** are in Singapore dollars (S\$). **We** will not add interest to any amount **we** pay under this **policy**.

## 22 Dealing with disputes

If the **policyholder** is not satisfied with **our** final decision on **your** claim, the **policyholder** shall refer the case to the Financial Industry Disputes Resolution Centre Ltd (FIDREC), an independent and impartial institution specializing in solving disputes between financial institutions and consumers. Their website address is: [www.fidrec.com.sg](http://www.fidrec.com.sg)

If the dispute cannot be referred to or dealt with by FIDREC, the dispute must be referred to and decided using arbitration in Singapore in line with the Arbitration Rules of the Singapore International Arbitration Centre which apply at that point of time. **We** will not be legally responsible under **your policy** unless **you** have first received an award under arbitration.

## 23 Prohibited persons

Despite anything **we** have said to the contrary, if **you** are, or any **relevant person** is found to be, a **prohibited person**, **we** may:

- a** Not allow any assignment of the **policy**;
- b** Declare the **policy** or the cover of any **insured person** as invalid;
- c** Cancel the **policy** and any or all cover under the policy;
- d** Not refund any premium; and
- e** Refuse to pay any benefit to any **prohibited person**.

**We** must be informed immediately of any changes to the identities, status/constitution/establishment, particulars and identification documents of the **relevant person(s)**.

## 24 Governing law

Singapore law will apply to this **policy**.

## 25 Feedback procedure

The information below is not legally binding and is just for **your** information.

### **Making yourself heard**

**We** are committed to providing **you** with an exceptional level of service and customer care.

**We** realise that things can go wrong and there may be times when **you** feel that **we** have not provided the service **you** expected. When this happens, **we** want to hear about it so that **we** can try to put things right.

Please send **your** feedback to: [sq@income.com.sg](mailto:sq@income.com.sg)

## Our promise to you

### **We will:**

- acknowledge **your** complaint promptly;
- investigate quickly and thoroughly;
- keep **you** informed of **our** progress; and
- do everything possible to deal with **your** complaint.

### **Policy Owners' Protection Scheme**

This policy is protected under the Policy Owners' Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy is automatic and no further action is required from you. For more information on the types of benefits that are covered under the scheme as well as the limits of coverage, where applicable, please contact Income or visit the GIA / LIA or SDIC web-sites ([www.gia.org.sg](http://www.gia.org.sg) or [www.lia.org.sg](http://www.lia.org.sg) or [www.sdic.org.sg](http://www.sdic.org.sg)).

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