



Maid Insurance Contract

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Thank you for choosing FWD

This maid insurance contract is issued by **FWD Singapore Pte. Ltd. (the “Company”)** who will pay the benefits of this **Policy**, subject to the terms and conditions set out in this **Policy**.

Abhishek Bhatia
Chief Executive Officer

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About your policy document

Here are useful information to help you understand your policy.

This **Policy** is proof of an insurance contract between **You** and **Us**.

This **Policy** is offered on the basis that **You** and **Your Maid** insured by this **Policy** will comply with all of the terms and conditions set out in this Policy. If not, **We** have the right to either decline claims from **You** and **Your Maid** or cancel this **Policy** and treat it as never having existed. Any person who is not a party to this **Policy** has no rights under the Contracts (Rights of Third Parties) Act (Cap. 53B) to enforce any of its terms.

Please read this **Policy** (including the attached Summary) carefully and visit **Us** at www.fwd.com.sg or contact **Us** at **+65-6820-8888** or contact.sg@fwd.com if **You** have any questions.

Table of benefits

The following amounts are the maximum limit of benefit payable for each benefit per Policy.

Basic Benefits	Essential	Enhanced	Exclusive
Security Bond Plus	S\$5,000	S\$5,000	S\$5,000
Personal Accident	S\$60,000	S\$60,000	S\$60,000
Outpatient Expenses due to Accident (up to S\$100 for Chinese Physician Treatment per Accident)	S\$1,000	S\$2,000	S\$3,000
Hospitalisation & Surgical Expenses per year	S\$15,000	S\$20,000	S\$25,000
Ambulance Fees	S\$300	S\$300	S\$300
Repatriation Expenses	S\$10,000	S\$10,000	S\$10,000
Funeral Grant	S\$2,000	S\$2,000	S\$2,000
Wages and Levy Compensation (up to S\$30 per day for a maximum of 30 days)	✓	✓	✓
Re-hiring Expenses	S\$300	S\$400	S\$500
Alternative Maid Services Compensation (up to S\$20 per day for a maximum of 30 days)	✓	✓	✓
Liability to Third Parties	S\$3,000	S\$4,000	S\$5,000
Damage or Theft of Maid's Personal Belongings	S\$300	S\$400	S\$500
Care against Physical Abuse by Maid	S\$5,000	S\$5,000	S\$5,000
Cancellation Refund (100% refund of premium if Policy is cancelled within the first 3 months)	✓	✓	✓
Terrorism, Hijack, Murder and Assault	✓	✓	✓
Dengue and Zika	✓	✓	✓

Optional Benefits	Essential	Enhanced	Exclusive
Outpatient Medical Expenses (with an excess of S\$10 per visit and a maximum limit of S\$30 per visit, available only across our network of clinics managed by our Third Party Administrator, MHC)	S\$300	S\$500	S\$1,000
Six-monthly Medical Examination (Pregnancy and Syphilis test only)	Up to 2 times for a 14 months policy Up to 4 times for a 26 months policy		
Letter of Guarantee to the Philippine Overseas Labour Office	S\$7,000	S\$7,000	S\$7,000
Top up Hospitalisation & Surgical Expenses per year	As shown in your Summary		
Daily Hospital Allowance (S\$10 per day for a maximum of 30 days)	✓	✓	✓
Home Contents Cover (up to S\$300 for loss of cash)	S\$3,000	S\$4,000	S\$5,000



Your policy benefits

This section describes what your policy covers.

Basic benefits

Security bond plus

This **Policy** includes a security bond from **Us** on **Your** behalf that replaces the sum of S\$5,000 which **You** are required to deposit with the Ministry of Manpower (Singapore) in respect of **Your Maid**. Also, in the event of a demand made by the Ministry of Manpower (Singapore) **We** shall waive **Our** right of indemnification up to S\$5,000 against **You** for the security bond.

Personal accident

If **Your Maid** suffers from an **Accident** and it solely and directly causes **Her** death or disability within 12 months of the **Accident**, **We** will pay **Her** or **Her** legal representatives the Personal Accident Benefit up to the limit of benefit stated in the Table of Benefits, subject to the percentages stated in the Personal Accident Severity Table below.

You should note that:



- The combined maximum benefit payable under this section will not be more than 100% of the Personal Accident Benefit stated in the Table of Benefits for the same or different **Accident** in the same **Policy** year.
- This benefit is extended to cover an **Accident** occurring overseas only if **Your Maid** is travelling along with **You** or **Your Family**.

Personal Accident Severity

Payment as a percentage of the benefit amount

Accidental death	
Total and permanent disability	100%
<ul style="list-style-type: none"> • Total and permanent sight loss in both eyes • Total speech and hearing loss 	

- Total and permanent severance or loss of use of two or more limbs above the wrist or ankle

Personal Accident Severity

Payment as a percentage of the benefit amount

Third-degree burns (8% or more of the head or more than 20% of the body)

80%

Total and permanent severance or loss of one limb above the wrist or ankle

Third-degree burns (between 5% to 8% of the head or 15% to 20% of the body)

Total loss of all fingers on one hand or toes on one foot

Total and permanent sight loss in one eye

60%

Total and permanent hearing loss in one ear

Total and permanent speech loss

Third-degree burns (between 2% to 5% or more of the head or 10% to 15% of the body)

Total loss of phalanges of the hand or foot (per phalanx)

4%

Outpatient expenses due to accident

If **Your Maid** suffers an **Accident** resulting in outpatient expenses within 12 months from the date of **Accident**, **We** will cover or reimburse **You** the **Medically Necessary** outpatient expenses (including any **Chinese Physician** treatment) up to the limit of benefit stated in the Table of Benefits.

You should note that:



- The **Accident** has to happen within the **Period of Insurance**;
- Outpatient expenses due to **Accident** will include medical consultation, related medication, and diagnostic tests;
- In the event of Dengue or Zika, **We** will pay for the medical consultation, related medication, and diagnostic expenses leading to the diagnosis; and

- This benefit is extended to cover an **Accident** occurring overseas only if **Your Maid** is travelling along with **You** or **Your Family**.
- If **Your Maid** visits any clinic on the panel of **Our** Third Party Administrator, Make Health Connect (MHC), **We** will provide cashless cover up to the limit of benefit stated in the Table of Benefits. If **Your Maid** visits any other clinic, any applicable benefit will be paid on a reimbursement basis.

Hospitalisation and surgical expenses

We will reimburse **You** for the **Medically Necessary** hospitalisation and surgical expenses incurred during the **Period of Insurance**, if **Your Maid** is **Confined** in a **Hospital** in Singapore as a result of an **Illness** or **Injury**, up to the limit of benefit stated in the Table of Benefits.

You should note that:

- This benefit is extended for hospitalisation and surgical expenses incurred overseas only if **Your Maid** is travelling along with **You** or **Your Family**. If **Your Maid** is admitted to a **Hospital** overseas, **We** will apply the pro-ration factor shown in the table below to the expenses being claimed.



- If your Maid is hospitalised in Singapore, **We** will pay the expenses as per the schedule of rates stated in the Scheme of Charges for Government Medical Services published by the Ministry of Health and applicable to Class B2 or C ward in a Singapore government **Hospital** or a re-structured **Hospital**. If **Your Maid** is admitted to a ward higher than Class B2 ward in a Singapore government **Hospital** or a re-structured **Hospital**, **We** will apply the pro-ration factor shown in the table below to the expenses being claimed.

Type of Hospital	Type of Ward	Percentage
Singapore government Hospital or re-structured Hospital	A1	50%
	A2	60%
	B1	70%
Any Hospital outside Singapore	All	30%

- Hospitalisation and surgical expenses will include the following:
 1. **Inpatient hospital charges:**
 - a. Room and boarding charges
Charges for room accommodation, including meals and general nursing services for each day of **Confinement** in the **Hospital**.
 - b. Miscellaneous hospital services
Charges for medical-related services expenses including medicine or drugs prescribed by a **Medical Practitioner**, diagnostic procedures, ancillary services and consumable items provided to **Your Maid** during **Her Hospital Confinement**.
 - c. Inpatient consultation
Consultation fees charged by the **Medical Practitioner** for daily bedside visits, limited to one visit per day.
 2. **Surgical charges:**
Cost of inpatient or day surgery and accompanying procedures and treatment including surgeon's fees, anaesthetist's fees, operating theatre fees, certified as **Medically Necessary**, at a **Hospital** or an outpatient medical clinic.
 3. **Pre-hospital diagnostic services:**
Expenses for diagnostic and laboratory tests recommended by a **Medical Practitioner** incurred within 90 days before the **Maid's Hospital Confinement** or day surgery for treatment of the same **Illness** or **Injury**.
 4. **Post-hospital follow-up treatment:**
Expenses for follow-up treatment including prescriptions, diagnostic and laboratory examinations recommended by a **Medical Practitioner** incurred within 90 days from the **Maid's** discharge from **Hospital** or day surgery for treatment of the same **Illness** or **Injury**.

What We will not pay:



- Hospitalisation and surgical expenses incurred in a Singapore private hospital.

Ambulance fees

If **You** have to pay for ambulance charges for transporting **Your Maid** to a **Hospital** because of an **Accident**, **We** will pay the actual ambulance charges, up to the relevant limit of benefit stated in the Table of Benefits.

Repatriation expenses

We will pay **You** up to the limit of benefit as stated in the Table of Benefits for transport expenses incurred by **You** to send:

- **Your Maid** back to **Her** “Home Country” if **She** suffers serious **Illness** or **Injury** which prevents **Her** from carrying out **Her** employment duties in the opinion of a **Medical Practitioner**; or
- **Her** mortal remains to **Her** “Home Country” if **Your Maid** dies.

For the purposes of this section, “Home Country” refers to the country of which **Your Maid** is a citizen.

This benefit is extended for transport expenses incurred overseas only if **Your Maid** is travelling along with **You** or **Your Family**.

Funeral grant

If **Your Maid** dies, **We** will pay funeral grant expenses to **Her** legal representative, up to the limit of benefit stated in the Table of Benefits.

Wages and levy compensation

We will pay **You** **Your Maid’s** wages (including government levy) for the period when **She** is **Confined** in **Hospital** (including hospitalisation leave granted by a **Medical Practitioner**), up to the limit of benefit stated in the Table of Benefits. **We** will pay for this benefit only if **Your** claim is payable in relation to the Hospitalisation and Surgical Expenses benefit.

Re-hiring expenses

If **Your Maid** suffers serious **Illness** or **Injury** which prevents **Her** from carrying out **Her** employment duties in the opinion of a **Medical Practitioner**, **We** will pay **You** the employment agency fees incurred by **You** to hire a replacement **Maid**, up to the limit of benefit stated in the Table of Benefits.

You should note that:



- **Prior** approval is required from **Us** for such expenses;
- **Maid** replacement is to be done within 90 days from the date of termination of the existing employment contract with **Your Maid**; and
- **We** will also pay for this benefit when **Your** claim is payable in relation to the Care Against Physical Abuse benefit.

Alternative maid services compensation

We will reimburse **You** the expenses incurred for hiring temporary maid services, for the period when **Your Maid** is **Confined** in a **Hospital** in Singapore due to an **Illness** or **Injury**, up to the limit of benefit stated in the Table of Benefits. **We** will also pay for this benefit when **Your** claim is payable in relation to the Care Against Physical Abuse benefit.

Liability to third parties

If **Your Maid** is held legally responsible for the **Accidental** death of or bodily **Injury** to a third party and/or loss or damage to a third party's property during the **Period of Insurance**, **We** will pay **You** for the amounts stated below, up to the limit of benefit stated in the Table of Benefits. The third party cannot be an **Interested Party**.

What **We** will pay:




- The legal costs and expenses which **We** have agreed upfront for representing **Your Maid**; and
- The amount awarded against **Your Maid** by the court in Singapore only.


Damage or theft of maid's personal belongings

We will pay **Your Maid** for damage or loss to **Her** personal belongings caused by fire, flood, water (following bursting or overflowing of water tank, pipe or appliances) or burglary in **Your Home** up to the limit of benefit stated in the Table of Benefits, after **We** assess them for fair market value at the time of loss and taking into consideration normal wear and tear, and depreciation.

You should note that:

- **We** will decide whether to replace, repair or pay a cash equivalent for the lost or damaged items.
-  If **We** assess an item as being beyond economical repair, it will be treated as lost and ownership of these items will be transferred to **Us** from **Your Maid**.
- **We** will not pay more than the original purchase price of any lost or damaged item.

What **We** will not pay:

- If **You, Your Family** or **Your Maid** did not take all reasonable precautions to safeguard **Her** belongings;
-  Loss or damage to **Your Maid's** jewellery, precious stones and watches;
- Loss of cash;
- For any unexplained and mysterious loss or damage.

Care against physical abuse by maid

If **Your Maid** physically abuses **Your** child (up to the age of 15), an elderly (above the age of 65 years) or handicapped person in **Your Family**, **We** will pay **You** for **Medically Necessary** expenses that **You** incur on their behalf up to the limit of benefit stated in the Table of Benefits. **We** will also pay **You** the re-hiring expenses incurred and the expenses incurred for hiring alternative maid services up to the limit of those benefits stated in the Table of Benefits.

You need to take the following steps to be eligible to claim any of the benefits in this section:

- **You** will need to register a complaint against **Your Maid** with the Ministry of Manpower (Singapore) and the Police; and
- **You** will need to terminate the employment contract with **Your Maid**.

Cancellation refund

If **You** cancel the **Policy** within three months of the coverage start date and the Ministry of Manpower (Singapore) discharges **Us** of the security bond, **We** will refund **You** 100% of the premium paid for this **Policy** as long as there are no paid or outstanding claims (unless otherwise provided in this **Policy**).

Terrorism, hijack, murder and assault

If **Your Maid** suffers an **Injury** or dies due to an act of terrorism, hijacking, murder or an assault that triggers a benefit under this **Policy**, **We** will pay the relevant benefit stated in the Table of Benefits.

Dengue and zika

If **Your Maid** contracts Dengue or Zika, it will be considered as an **Accident**. If that triggers a benefit under this **Policy**, **We** will pay the relevant benefit stated in the Table of Benefits.

Optional benefits


Optional benefits are those benefits that **You** have opted in for during the application process of this **Policy** for which **You** have paid additional premiums and are reflected in the Summary. Depending on **Your** selection of optional benefits, these benefits shall be paid up to the limits as set out in the Table of Benefits.

Outpatient medical expenses

If **You** have opted in for this benefit, **We** will pay **You** for the **Medically Necessary** outpatient medical expenses up to the limit of benefit stated

in the Table of Benefits if **Your Maid** suffers from an **Illness** in Singapore.

You should note that:

- To be eligible for this benefit, **You** need to download the MHC Clinic Network Locator App and retrieve the eCard from the app and show it to the clinic receptionist or nurse before seeing a doctor, and **Your Maid** must visit any clinic on the panel of **Our** third party administrator, Make Health Connect (MHC).
-  • For every visit to a clinic for consultation, **You** will have to pay S\$10 and anything beyond that, **We** will pay up to a maximum limit of S\$30 per visit.
- Medical expenses will include medical consultation, related medication and diagnostic tests.
 - Any visit to a Medical Specialist will need to be recommended by the **Medical Practitioner**.

For the purposes of this section, “Medical Specialist” refers to a **Medical Practitioner** with necessary qualifications and expertise to practise as a recognised specialist of diagnostic techniques, treatment and prevention in a specific medical field of study, such as oncology or paediatric. For the avoidance of doubt, a Medical Specialist cannot be an **Interested Party**.

Six-monthly medical examination

(Pregnancy and Syphilis test only)

If **You** have opted in for this benefit, the medical examinations covered under this benefit are tests for pregnancy and syphilis which are mandated under the six-monthly medical screening prescribed by the Ministry of Manpower (Singapore). **You** can use this service only at MHC Medical Centre Amara, up to the limit of benefit stated in the Table of Benefits.

You should note that:

- To be eligible for this benefit, **You** need to download the MHC Clinic Network Locator App and retrieve the eCard from the app and show it to the clinic receptionist or nurse before seeing a doctor.

- Claiming under this benefit will not affect **Your** cancellation refund.

What **We** will not pay:



- Any additional test, consultation or medical expenses arising from the six-monthly medical examination; and/or
- Tests for HIV and Tuberculosis even though they are part of the six-monthly medical examination requirements.

Letter of guarantee to the Philippine overseas labour office

If **You** have opted in for this benefit, **We** will provide a letter of guarantee on **Your** behalf in lieu of the sum stated in the Table of Benefits which **You** are required to deposit with the Philippine Overseas Labour Office in Singapore in respect of the **Maid** employed. Also, in the event of a demand made by the Philippine Overseas Labour Office, **We** shall waive **Our** right of indemnification up to the amount stated in the Table of Benefits and in the letter of guarantee issued to the Philippine Overseas Labour Office.

Top up hospitalisation and surgical expenses

If **You** have opted in for this benefit, the maximum benefit limit payable under the Hospitalisation and Surgical Expenses benefit shall be increased by the benefit limit as stated in the Summary under this benefit.

Daily hospital allowance

If **You** have opted in for this benefit, **We** will pay **Your Maid** the daily hospital allowance as stated in the Table of Benefits if **Your Maid** is **Confined** to a **Hospital** in Singapore for at least three days because of an **Illness** or **Injury**.

What **We** will not pay:



- If **Your Maid** is **Confined** to a **Hospital** outside Singapore.

Home contents cover

If **You** have opted in for this benefit, **You** can claim this benefit if there is loss or damage to **Your** Home Contents or loss of cash within **Your Home** due solely and directly to the act of theft by **Your Maid**, a fire or burglary.

What **We** will pay:



- For loss or damage to **Your** Home Contents, **We** will pay **You** for the lost or damaged items after assessing them for fair market value at the time of loss, taking into consideration normal wear and tear, and depreciation. **We** will pay **You** only up to the limit of benefit stated in the Table of Benefits.
- For loss of cash, **We** will pay **You** up to the limit of S\$300 per **Period of Insurance**.

You should note that:



- **We** will decide whether to replace, repair or pay a cash equivalent for **Your** lost or damaged items. If **We** assess an item as being beyond economical repair, it will be treated as lost for the purpose of this benefit and ownership of these items will be transferred to **Us** from **You**.
- **We** will not pay more than the original purchase price of any lost or damaged item.
- For an act of theft by **Your Maid**, **You** will need to do the following before **You** can be eligible to claim:
 - **You** will need to register a complaint against **Your Maid** with the Ministry of Manpower (Singapore) and the Police; and
 - **You** will need to terminate the employment contract with **Your Maid**.

For the purposes of this section, “Home Contents” means all household furniture and furnishing, domestic electronic appliances and personal belongings, owned by **You** or **Your Family**, in **Your Home**, excluding cash.

What **We** will not pay:



- If **You** or **Your Family** did not take all reasonable precautions to safeguard **Your** Home Contents;
- For any unexplained and mysterious loss or damage; and/or
- For loss or damage of business goods or equipment of any kind, motor vehicles and any accessories, and information stored on electronic storage devices.



When benefits are not payable

General Exclusions

This section outlines scenarios this **Policy** does not cover. If **We** refuse a claim because of one or more of the exclusions below, and **You** or **Your Maid** disagree with **Our** decision, **You** or **Your Maid** are responsible for proving that **We** are legally responsible for that claim. **Our** payment of a claim will not affect **Our** ability to refuse a subsequent claim under any of the other exclusions.

These General Exclusions apply to the whole **Policy** unless specified otherwise in any of the benefits.

We are not legally responsible for claims that are directly or indirectly caused by or result from the following:

- Breach of work permit or work permit conditions as provided for by the Ministry of Manpower (Singapore);
- Wilful participation by **You**, **Your Family** or **Your Maid** in any acts that are reckless or considered illegal in Singapore or overseas;
- **You**, **Your Family** or **Your Maid** not taking all reasonable precautions to safeguard **Her** or herself against any **Illness** or **Injury**, or others against any **Injury**;
- Any expense related to mental, psychological or psychiatric disorders;
- Pregnancy, infertility, contraception, sterilisation, sexual dysfunction, miscarriage, menopause, childbirth, abortion or any complications arising from these conditions;
- Intoxication by alcohol or drugs not prescribed by a **Medical Practitioner**;
- Consequences of war, riot, revolution, or any similar event; and
- Sexually transmitted infections, human immunodeficiency virus (HIV) or any HIV-related illness including acquired immunity, and deficiency syndrome (AIDS) or any mutant derivatives or variations of this no matter how they are caused.



Making a claim

Need to make a claim? Read this section to find out.

How to claim

To make a claim, please call **Our** Customer Care Team at **+65-6820-8888** or visit **www.fwd.com.sg** to access **Our** claims portal. For the purpose of sections 28 and 29 "**You**" refers to either **You** or **Your Maid**.

You or **Your/Her** legal representative must inform **Us** as soon as possible and no later than 30 days from the occurrence of an **Accident, Injury, Illness** or death **You** want to claim for under this **Policy**. **You** must lodge **Your** claim using **Our** standard forms and provide **Us** with any information and assistance **We** need to process **Your** claim, including attending court proceedings in Singapore to give evidence.

You must provide and pay (if needed) for any documentation **We** request to assess **Your** claim. This includes but is not limited to:

- Medical reports and evidence;
- Copies of original invoices and receipts;
- Police report; and
- Accurate English translations (confirmed by oath if necessary) of any documents **We** require.

We have the right to reject claims if **You** cannot provide the requested necessary documents.

We will pay if **We** need **Our** approved **Medical Practitioner** to medically examine **Her** during any **Illness** or **Injury** claim. This includes post-mortem examinations.

Things to know

We reserve the right to lodge a report with the Singapore police or any foreign authorities if **You** submit a dishonest or fraudulent claim. **You** must return any amount that **You** are not covered for under this **Policy** if **We** have made payment or **We** have paid on **Your/Her** behalf.

We pay all property claims based on the value of the items at the time of loss or damage, which means **You** will not get back the full purchase price. If **We** assess an item as being beyond economical repair and pay for its replacement, the damaged item becomes **Our** property. **You** must keep any property that is damaged and send it to **Us** if **We** ask for it. **You** will need to pay for any postage or transportation cost.

If **You** are entitled to a refund, reimbursement or compensation from any other person or source (including other insurance policies or government schemes), the amount that **We** are legally responsible to pay for any applicable benefit is limited (unless specifically stated for that particular benefit) to the portion that those third-parties are not required to pay, up to the limit for that benefit stated in the Table of Benefits.

Once **You** know of any legal action taken against **You** in connection with this **Policy**, **You** must inform **Us** immediately. **You** should also promptly forward **Us** every communication **You** receive related to this legal action. **You** must inform **Us** before communicating with any other third party (including the police). **You** or any person acting for **You** must not negotiate, admit, or reject any claim without **Our** written approval.

We can take over any rights to defend or settle any claim and to take proceedings in **Your/Her** name to enforce **Your/Her** or **Our** rights against any other person. **We** may also take proceedings in **Your/Her** name to recover any payment that **We** have made under this **Policy**. If **We** do so, **We** will pay for the proceedings.



Termination of your policy

This section explains how your policy can be cancelled.

Your cancellation rights

If **You** want to cancel the **Policy**, **You** can write to **Us** at contact.sg@fwd.com. **We** will wait for clearance from the Ministry of Manpower (Singapore) before **We** proceed with **Your** cancellation.

We will refund the portion of premium **You** paid in accordance with the following schedule if no benefits are payable on **Your Policy**. **We** will not refund anything less than S\$25.

For 14 months contract

Complete calendar months from Coverage Start Date	0-3	4-6	More than 6
Refund of premium payable	100%	40%	0%

For 26 months contract

Complete calendar months from Coverage Start Date	0-3	4-6	7-12	More than 12
Refund of premium payable	100%	70%	20%	0%

Our cancellation rights

We have the right to cancel this **Policy** at any time by giving **You** seven days' written notice. If **We** cancel this **Policy**, **We** will send that notice to **Your** last-known postal address and refund 100% of the pro-rata premium for the unexpired period through **Your** original premium payment mode. The cancellation will not prejudice any claim originating before cancellation.



Customer care

No inquiry is too big or small, this section will provide you with information on how you can reach us.

If you have a question or problem with your policy

Please contact the Customer Care Team at **+65-6820-8888** or **www.fwd.com.sg** if **You** have a concern, are unhappy over any matter relating to this **Policy** or with how **Your** claim was handled. The following are **Your** options and how **We** will respond to **Your** concerns:

In the first instance, **We** will acknowledge receipt of **Your** feedback within three working days while **We** look into the matter.

We may contact **You** for further information if required within seven working days. **We** will provide **You** with a full reply within 14 working days. If **You** are not satisfied with how **Your** feedback has been handled, **You** can write to:

The Chief Executive Officer (CEO)
FWD Singapore Pte. Ltd.
6 Temasek Boulevard,
#18-01 Suntec Tower Four,
Singapore 038986

We will respond to **Your** letter within three working days of receipt. If **We** cannot reach a mutually acceptable agreement, **We** will refer **You** to the Financial Industry Disputes Resolution Centre (FIDReC), an independent dispute resolution centre for the financial industry. FIDReC's address is:

Financial Industry Disputes Resolution Centre Ltd
36 Robinson Road,
#15-01 City House,
Singapore 068877
Tel: +65 6327 8878
Fax: +65 6327 8488, +65 6327 1089
Email: info@fidrec.com.sg | web: www.fidrec.com.sg

Please remember to quote **Your** policy number in any communication with **Us** or FIDReC.

Mediation and arbitration

Any dispute must first be referred to the Financial Industry Disputes Resolution Centre Ltd (FIDReC) as above. If necessary, **We** will offer to settle the dispute through mediation via the Singapore Mediation Centre in accordance with their mediation rules.

If **You** agree to take part in the mediation, both **You** and **Us** will participate in good faith and agree to keep the terms of any settlement reached.

If **You** choose to not participate in mediation or mediation fails, the dispute will be referred to and finally resolved by arbitration in Singapore in line with the Arbitration Rules of the Singapore International Arbitration Centre that apply at the point in time.



Your policy protection scheme

This section explains how your policy is protected by Singapore's laws.

This **Policy** is protected under the Policy Owners' Protection Scheme, which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for this Policy is automatic and no further action is needed 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 **Us** or visit the General Insurance Association (www.gia.org.sg) or SDIC websites (www.sdic.org.sg).



Information about your policy

These are additional information that is useful for you to know.

Important things to know

Each benefit provided by this **Policy** has a maximum amount **We** will pay under that benefit. Please check the Table of Benefits to make sure this **Policy** is adequate for **Your** needs.

Please take time to read the 'General Exclusions' section that outlines scenarios where **We** will not be legally responsible for paying a claim.

Please immediately inform **Us** if any details in the Summary are not accurate. Section 25(5) of the Insurance Act (Cap. 142) requires that **We** inform **You** of **Your** duty to fully and faithfully tell **Us** everything **You** know or could reasonably be expected to know that is relevant to **Our** decision to insure **You** and **Your Maid**. Otherwise, **We** have the right to either decline claims from **You** or cancel this **Policy** and treat it as never having existed. Alternatively, **We** may decide to charge an additional premium and maintain cover subject to the payment of the additional premium. **We** may also cancel or rescind this **Policy** if any submitted claim is fraudulent or if **We** are required to do so under the laws or regulations of Singapore.

Governing law and currency

This Policy is governed by the Republic of Singapore's laws.

All amounts **You** or **We** are required to pay for or under this **Policy** will be in Singapore dollars. **We** will convert any expenses **You** incur (that **You** can claim from **Us**) into Singapore dollars at a reasonable foreign currency exchange rate **We** choose. **We** are not legally responsible for payment of any exchange rate-related losses **You** may have.

We will not pay any benefit under this **Policy** if paying that benefit is considered illegal in Singapore under its economic and trade sanctions.

Who is eligible

You can buy this **Policy** if:

- **You** are a resident of Singapore and have a valid NRIC or FIN;
- **You** are the **Maid's** employer;
- **You** are not an undischarged bankrupt;
- **You** never had to forfeit **Your** security bond related to any maid in the past, whether covered or not by any maid insurance; and
- **You** have never been refused to buy/renew any maid insurance, nor has **Your** maid insurance ever been cancelled/voided by **Your** insurer.

When insurance cover begins and ends

Insurance cover under this **Policy** starts from **Your** coverage start date as shown in the Summary. Insurance cover automatically ends once one of the following takes place:

- **Your Maid** dies;
- Cancellation of **Her** work permit and Ministry of Manpower (Singapore) discharging **Us** of the security bond;
- Subsequent **Policy** renewal date after **Your Maid** reaches the age of 65 years;
- The **Policy** ends; or
- Termination triggered under other **Policy** terms and conditions.



Important words & phrases

The list below includes the important words and phrases shown in bold in your policy and what we mean by them.

Any word or phrase appearing in **Capitalised Bold** within this Contract will have the meanings as stated below:

“**You**” or “**Your**” refers to the Employer/Policyholder as shown in the Maid Insurance Summary.

“**FWD**”, “**We**”, “**Our**” or “**Us**” refers to “**FWD Singapore Pte. Ltd.**”, the issuer of this insurance **Policy**.

“**She**” or “**Her**” refers to **Your Maid** as shown in the Maid Insurance Summary.

“**Accident**” or “**Accidental**” refers to a sudden, unexpected, and unintentional event occurring during the **Period of Insurance** that is the only cause of damage or injury.

“**Chinese Physician**” refers to a legally licensed or registered herbalist, acupuncturist or bone-setter who can practise Chinese Medicine under the Laws of Singapore. For the avoidance of doubt and for the purposes of this **Policy**, **Chinese Physician** cannot be an **Interested Party**.

“**Confined**” or “**Confinement**” refers to a **Medically Necessary** admission in a **Hospital** as a resident in-patient for 24 continuous hours upon the recommendation and care of a **Medical Practitioner**.

“**Family**” means **Your** spouse or legally recognised partner, 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**” refers to **Your** permanent place of residence in Singapore as shown in **Your** Singapore National Registration Identification Card (NRIC) or other official government document.

“**Hospital**” refers to a facility that:

- is licensed as a hospital under the laws of the country it operates in;
- has registered nurses and at least one **Medical Practitioner** stationed at all times;
- mainly operates to diagnose and treat **Illness** or **Injury** on an in-patient basis;
- has organised facilities for X-ray and major surgery; and
- is not primarily a nursing facility, clinic, nursing home, convalescence home, psychiatric facility, drug and alcohol rehabilitation facility, preventative medicine facility, or hospice care (except for the terminally ill).

“**Illness**” refers to deteriorating physical health because of a medical condition:

- where physical signs and symptoms are displayed during the **Period of Insurance**; and
- that requires a **Medical Practitioner’s** care and/or treatment.

“**Injury**” refers to damage or harm caused to a person’s body by an **Accident** during the **Period of Insurance**.

“**Interested Party**” refers to:

- **You** or **Your Family**; or
- a business partner, employer, employee, or agent of any of the above.

“**Maid**” refers to the person named in the Maid Insurance Summary whom **You** employ as a foreign domestic worker and who holds a valid work permit/in principle approval issued by the Ministry of Manpower (Singapore).

“**Medical Practitioner**” refers to a person with a western medical degree, who is licensed or registered in their country of practice, and has permission from a medical board or equivalent authority to practice medicine. For the avoidance of doubt and for the purposes of this **Policy**, **Medical Practitioner** cannot be an **Interested Party**.

“**Medically Necessary**” refers to medical services, procedures or supplies that:

- a **Medical Practitioner** needs to treat an **Illness** or **Injury**. These services, procedures or supplies are necessary because the patient’s medical condition will be adversely affected without them;
- are widely accepted within the medical community in Singapore or the country of treatment as being effective, appropriate, and essential for treating a patient’s **Illness** or **Injury** based on the relevant medical specialty’s recognised standards;
- are not considered experimental and/or developmental in nature, or, if experimental and/or developmental in nature, is recognised by the Singaporean medical profession as having potential to become part of conventional medicine;
- are not elective, preventive or screening in nature. These services, procedures or supplies are also not given to the patient for personal comfort or convenience, or for him or her to make a profit, or for the treating **Medical Practitioner** and/or medical service provider to make a profit; and
- are charged at fair market rates in **Our** opinion.

“**Period of Insurance**” refers to the period of time between the coverage start date and coverage end date (both inclusive) as shown in the Maid Insurance Summary.

“**Policy**” refers to the information provided as part of the application process, this Contract including the Table of Benefits, the Maid Insurance Summary (the “**Summary**”) and any Endorsements attached by **Us**, which collectively forms the **Policy**. An “**Endorsement**” is any additional document attached to this **Policy** outlining adjustments to the standard terms and conditions that **We** have made as a condition to providing this **Policy**.

Maid Insurance Contract
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