

FWD Flex insurance

Product summary

Note:

Please read this product summary before you decide to take up this product.

Name of the insurer

FWD Singapore Pte. Ltd.

Product name

FWD Flex

Product summary

This product summary is meant for general information only. The full terms and conditions of the policy are provided in the contract. A sample copy of the policy contract is available on the FWD website.

You will not receive any professional financial advice for this product. Therefore, it is important you read all of the information that we provide on our website and during your application process (including your cover page, policy illustration and product summary).

Please do not hesitate to call us at +65 6820 8888 or email us at contact.sg@fwd.com if you have any questions.

Product description

This is a non-participating insurance policy that provides coverage for death, cancer, heart attack of specified severity and stroke with permanent neurological deficit.

Product benefits

3CI Benefit

If the person insured is diagnosed with cancer, heart attack of specified severity or stroke with permanent neurological deficit within the policy term while the policy is active, we will pay a lump sum equal to 100% of the sum insured after deducting any monies owed to us on the policy. The policy will be terminated once this benefit is paid out.

Covered critical illness	Definition
Cancer	Means a malignant tumour characterised by the uncontrolled growth of malignant cells and the invasion of tissue. 'Cancer' also includes carcinoma-in-situ, a focal autonomous new growth of carcinomatous cells which have not yet infiltrated normal tissue beyond the epithelial basement membrane. The malignant tumour must be investigated and diagnosed with support by a histopathological biopsy report and confirmed by a medical practitioner or medical specialist.
	For carcinoma-in-situ of cervix uteri, it must be at a grading of CIN III.
	We do not cover all neoplasms or tumours which are classified as pre-malignant, having borderline malignancy, having any degree of malignant potential, having suspicious malignancy or of uncertain or unknown behaviour.

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Covered critical illness	Definition
Heart attack of specified severity*	Death of heart muscle due to ischaemia, that is evident by at least three of the following criteria proving the occurrence of a new heart attack: • history of typical chest pain; • new characteristic electrocardiographic changes; with the development of any of the following: ST elevation or depression, T wave inversion, pathological Q waves or left bundle branch block; • elevation of the cardiac biomarkers, inclusive of CKMB above the generally accepted normal laboratory levels or Cardiac Troponin T or I at 0.5ng/ml and above; • imaging evidence of new loss of viable myocardium or new regional wall motion abnormality. The imaging must be done by a cardiologist specified by us. For the above definition, the following are excluded: • angina; • heart attack of indeterminate age; and • a rise in cardiac biomarkers or Troponin T or I following an intra-arterial cardiac procedure including, but not limited to, coronary angiography and coronary angioplasty. Explanatory note: 0.5ng/ml = 0.5ug/L = 500pg/ml
Stroke with permanent neurological deficit*	A cerebrovascular incident including infarction of brain tissue, cerebral and subarachnoid haemorrhage, intracerebral embolism and cerebral thrombosis resulting in permanent neurological deficit. This diagnosis must be supported by all of the following conditions: • evidence of permanent clinical neurological deficit confirmed by a neurologist at least 6 weeks after the event; and • findings on Magnetic Resonance Imaging, Computerised Tomography, or other reliable imaging techniques consistent with the diagnosis of a new stroke. The following are excluded: • transient ischaemic attacks; • brain damage due to an accident or injury, infection, vasculitis, and inflammatory disease; • vascular disease affecting the eye or optic nerve; • ischaemic disorders of the vestibular system; and • secondary haemorrhage within a pre-existing cerebral lesion.

*The Life Insurance Association Singapore (LIA) has standard Definitions for 37 severe-stage Critical Illnesses (Version 2024). These Critical Illnesses fall under Version 2024. You may refer to www.lia.org.sg for the standard Definitions (Version 2024). For Critical Illnesses that do not fall under Version 2024, the definitions are determined by the insurance company.

Death Benefit

If the person insured dies within the policy term while the policy is active, we will pay a lump sum equal to 100% of the sum insured after deducting any monies owed to us on the policy. The policy will be terminated once this benefit is paid out.

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Premiums

Premiums are payable throughout the period of insurance. You can pay your premiums on a monthly or yearly premium frequency. We guarantee that your premiums will stay the same during the one-year period of insurance. However, at the policy renewal date, we reserve the right to adjust subsequent premium(s) which may differ from the illustration in the policy illustration. We will let you know 30 calendar days in advance if your subsequent premiums are revised.

Coverage renewal

The period of insurance is one year. If this policy is valid at the end of the period of insurance, we will automatically renew this policy by one more year if:

- the policy is still active; and
- the person insured has not turned 55 years old yet.

You can choose not to renew this policy by writing to us 30 calendar days before the end of the period of insurance.

The premium we charge you for the subsequent year(s) will be the same as the premiums we charge people who have the same age, gender, sum insured and smoking status as yourself for the same policy on the day the policy is renewed.

Policy end date

The policy ends on the earliest of the following dates:

- when the total benefit amount we pay from the policy equals to 100% of the sum insured;
- when this policy has reached the coverage end date and is not or cannot be renewed;
- 60 calendar days after a premium due date, if we do not receive your premium due before then;
- when you decide to terminate your policy; or
- any other event which results in the policy termination.

If you choose to terminate the policy early and you have paid your premiums, the policy will continue to provide coverage up to the day before the next due date for the premium payment.

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Exclusions

General exclusions

This policy has certain general exclusions, meaning situations where we won't pay a benefit under the policy. We list below the exclusions that apply to the policy. We may also apply specific exclusions to the policy when we offer to issue the policy. If any specific exclusion applies to certain benefits, we will record the details in a policy endorsement.

Exclusion	
Suicide or self-inflicted act	 We will not pay any benefit under this policy if the claim arises: from suicide, attempted suicide or an intentional self-inflicted act; and is within one year of the start of your policy cover. This applies regardless of the mental state of the person insured. If this happens, we will cancel the policy and refund the premiums paid without interest, less any amount you owe us.
Unlawful acts	We will not pay any benefit under this policy if the claim arises because you or the person insured deliberately participated in an unlawful act, or failed to act in accordance with the law.
Pre-existing condition	We will not pay any benefit for claims that are directly or indirectly caused by or result from a pre-existing condition. A pre-existing condition refers to a medical condition that occurs on or before the coverage start date and has one or more of the following characteristics: • presented signs or symptoms which the person insured was aware of or should reasonably have been aware of; • treatment was recommended or received from a medical practitioner or medical specialist for the medical condition; and/or • the person insured has undergone or was recommended to undergo medical tests or investigations. The above applies even if the signs or symptoms were not apparent to the person insured, if they would have been apparent to a reasonable person in the same position.
Waiting period	If the person insured experiences first symptoms or diagnosis of cancer, heart attack of specified severity or stroke with permanent neurological deficit in the period before or within the first 90 calendar days from the coverage start date, we will not pay any benefit. The above applies even if the signs or symptoms were not apparent to the person insured, if they would have been apparent to a reasonable person in the same position.

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Free-look period

A life insurance policy can be a long-term commitment. You have 14 calendar days to review the policy and decide if it is suitable for your needs. If unsuitable, you may cancel the policy within 14 calendar days after you receive it and we will refund any premiums you have paid for the policy. We consider the policy delivered from the time we email it to you.

Policy Owners' Protection Scheme

Your 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 us or visit the Life Insurance Association Singapore or SDIC websites (www.lia.org.sg) or (www.sdic.org.sg).

Important information

This product summary does not form a part of the contract of insurance. It is only meant to be a simplified description of the product features which apply to this policy and does not explain the whole contract. The contents of this product summary may be different from the terms of cover we eventually issue. Please read the policy contract for the precise terms, conditions and exclusions.

This policy is not a Medisave-approved policy and you may not use Medisave to pay the premiums for this policy.

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