

# FWD Life PA

## Personal accident insurance policy contract



**This is your contract for your insurance policy.**

Read it to understand all the benefits as well as the important terms and conditions that apply to your insurance cover. Don't worry, we've made it as easy to read as possible.

**If you need help, call our hotline: +65 6820 8888**



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# About your policy

Thank you for choosing FWD Singapore Pte. Ltd. We're pleased to provide you with protection opportunities so that you can focus on living life to the fullest.

## Easy to read

We're here to change the way you feel about insurance – starting with this document. We've made it easy to read, so you can understand your benefits and what you're covered for.



We highlight important information like this. Read these carefully.

## Your FWD Life PA insurance policy

FWD Life PA is a non-participating, yearly renewable personal accident insurance policy that covers to age 100. You are provided with coverage for accidental death and disability during the policy term. We will also reimburse your medical expenses for inpatient and outpatient treatments. You can supplement your base plan coverage by attaching the optional Income Support Rider and/or Catch-All Rider.



“You/your” refers to the policy owner.  
A person insured may not necessarily be the policy owner.  
Under FWD Life PA insurance, you may cover more than one (1) person insured under the same policy subject to our approval.

Your FWD Life PA insurance policy is an insurance contract between you and us. Your policy pack is made up of the documents listed below:

- this policy contract;
- the policy schedule;
- your application form and any documents you provided with it; and
- any endorsement to your policy, if applicable.

By reading your contract carefully, you'll know exactly what you're covered for, and how to make a claim.



A policy endorsement is the document we provide to tell you about any official change to your policy conditions.

## If you have questions

If you still have any questions after you have read this policy, please call our hotline at [+65 6820 8888](tel:+6568208888) – we're here for you. You may visit our website at [www.fwd.com.sg](http://www.fwd.com.sg) for our detailed hotline operating hours.

## Policy information statement

### Paying your premium

In return for paying your premium, we provide the cover you have chosen.

For details about how to pay your premium, see [page 18](#) (your premiums).

### Choosing who receives the benefits

#### Accidental Death and Disability Benefit, Double Indemnity on Accidental Death and Disability Benefit, and Triple Indemnity on Accidental Death and Disability Benefit

We will pay the relevant benefit in one lump sum to you or your nominee, whichever is applicable.

#### Compassionate Grant Benefit

We will pay this in one lump sum to you or your nominee, whichever is applicable.

#### Medical Expenses for Inpatient and Outpatient Treatment Benefit

We will reimburse these expenses to you.

#### Income Support Rider

#### Daily Hospital Income Benefit

We will pay this in one lump sum to you.

#### Weekly Income Benefit

We will pay this in one lump sum to you.

#### Catch-All Rider

#### Catch-All Benefit

We will pay this in one lump sum to you.

## Important words and phrases

Some words in this policy contract have special meaning. We show those meanings on [page 21](#) (important words and phrases). Please refer to that section when you need to.

## About your policy

### How to resolve a concern or complaint

We want to resolve any concerns or complaints you may have as quickly as possible. You should follow the steps below to resolve your concerns.

<p><b>Step 1</b> Talk to us</p>	<p>The first thing you should do is talk to one of our consultants about your concerns or complaints. Call our hotline at <b>+65 6820 8888</b>. The consultant may be able to resolve your concerns or complaints. If not, they may refer you to a manager. You may visit our website at <a href="http://www.fwd.com.sg">www.fwd.com.sg</a> for the most up-to-date information regarding our operating hours.</p> <p>The consultant will try to resolve your complaints or concerns as soon as possible.</p>
<p><b>Step 2</b> Call or write to our Customer Engagement Department</p>	<p>If you feel that your complaint has not been resolved, you can write to</p> <p><b>FWD Singapore Pte. Ltd.</b> <b>6 Temasek Boulevard,</b> <b>#18-01 Suntec Tower Four,</b> <b>Singapore 038986</b> <b>Tel: +65 6820 8888</b> <b>Email: <a href="mailto:contact.sg@fwd.com">contact.sg@fwd.com</a></b> <b>Website: <a href="http://www.fwd.com.sg">www.fwd.com.sg</a></b></p> <p>We will respond to your complaint within 3 working days of us receiving it.</p>
<p><b>Step 3</b> Seek an external review from the Financial Industry Disputes Resolution Centre (FIDReC)</p>	<p>If we cannot arrive at a mutual agreement, you may approach the FIDReC, a free, independent and fair dispute resolution centre for resolution of disputes between financial institutions and consumers. You can lodge your concerns or complaints by post, online, or in-person.</p> <p>The FIDReC's details are:</p> <p><b>Financial Industry Disputes Resolution Centre</b> <b>36 Robinson Road</b> <b>#15-01 City House</b> <b>Singapore 068877</b> <b>Tel: +65 6327 8878</b> <b>Website: <a href="http://www.fidrec.com.sg">www.fidrec.com.sg</a></b></p> <p>Please quote your policy number in any communication with us or with FIDReC.</p>
<p><b>Step 4</b> Mediation and arbitration</p>	<p>Any unresolved dispute must first be referred to FIDReC as above. If the sum involved in the dispute is outside the jurisdiction of FIDReC, you agree to resolve the dispute through mediation via the Singapore Mediation Centre in accordance with their mediation rules.</p> <p>If you agree to take part in the mediation, you and we agree to participate in good faith and agree to adhere to the terms of any settlement reached.</p> <p>If you choose not to take part in mediation or if mediation fails, the dispute will be referred to arbitration in Singapore according to the Arbitration Rules of the Singapore International Arbitration Centre that apply at that point in time. The outcome of the arbitration will be final.</p>



# Quick summary of your benefits

This section describes the main benefits of your policy. It is a guide to your policy coverage. To understand the full details of what we pay and how we pay, you should go to [page 5](#) (what you're covered for).

## Your benefits at a glance

Table of benefits

No.	Benefit	Sum insured		
1	Accidental Death and Disability Benefit (ADDB)	S\$100,000	S\$200,000	S\$500,000
1a	Accidental Death Benefit (ADB)	100% of ADDB sum insured		
1b	Accidental Permanent Disability Benefit (APDB)	Up to 150% of ADDB sum insured Refer to <a href="#">page 5</a> for the Permanent Disability Schedule.		
2	Double Indemnity on Accidental Death and Disability Benefit	200% of ADB / APDB sum insured		
3	Triple Indemnity on Accidental Death and Disability Benefit	300% of ADB / APDB sum insured		
4	Compassionate Grant Benefit	10% of ADDB sum insured		
5	Medical Expenses for Inpatient & Outpatient Treatment Benefit (per accident) *	S\$2,000	S\$3,000	S\$4,000
5a	Chinese physician, acupuncturist, bonesetter, and chiropractor expenses (per accident)	S\$500 S\$50/visit	S\$1,000 S\$100/visit	S\$1,500 S\$100/visit
5b	Physiotherapy expenses (per accident)	S\$500	S\$1,000	S\$1,500
6	No claim discount (NCD)	10% (on total premiums including riders, if applicable)		

\*The Medical Expenses for Inpatient and Outpatient Treatment Benefit will expire when the person insured turns age 80.

	Income Support Rider	Plan A	Plan B	Plan C
7	Daily Hospital Income Benefit (up to 365 days per accident)	S\$100 For specific individuals**, S\$50	S\$150 For specific individuals**, S\$75	S\$300 For specific individuals**, S\$150
8	Weekly Income Benefit *** (up to 104 weeks per accident)	S\$100 For specific individuals***, S\$50	S\$200 For specific individuals***, S\$100	S\$350 For specific individuals***, S\$175
<b>Catch-All Rider</b>				
9	Catch-All Benefit	10% of ADDB sum insured		

\*\*The limit for Daily Hospital Income Benefit will be halved as shown in the table above, for the following groups of persons insured: (i) Children (a child that is age 21 and under, as included in a family policy), (ii) unemployed persons, and (iii) persons aged 80 and over.

\*\*\* The Weekly Income Benefit will expire when the person insured turns age 75. The limit for the Weekly Income Benefit will also be halved as shown in the table above, for the following groups of persons insured: (i) Children (a child that is age 21 and under, as included in a family policy), and (ii) unemployed persons. Please refer to your policy schedule for the exact benefit amount you are entitled to at each policy renewal.

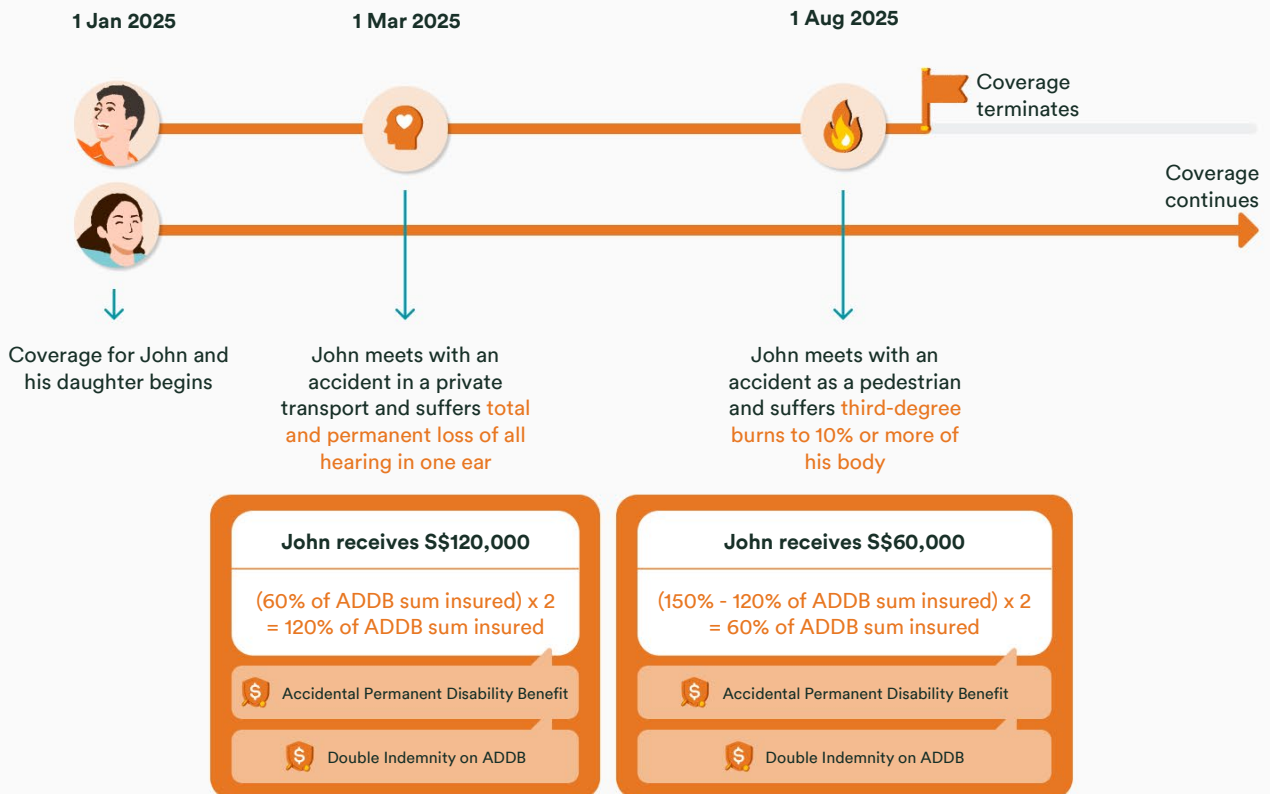
Note:  
You may select separate plan types for your base plan and Income Support Rider. For example, you may attach plan C of the Income Support Rider to any sum insured selected for the base plan.

## Quick summary of your benefits

### Illustration of the main benefits of your policy



John buys a FWD Life PA policy with a sum insured of S\$100,000 for himself, and adds his daughter under the same policy with an additional S\$100,000 sum insured. In the following months, he meets with two accidents and receives the maximum payout under his policy, resulting in the termination of his coverage, while his daughter's coverage continues.



Please read the contract wordings thoroughly for a full understanding of how the benefits are calculated.

#### When we won't pay

We may not pay the full benefits if any of the following applies:

- Your policy has ended. See [page 13](#) (when your policy ends).
- An exclusion applies. See [page 16](#) (when we will not pay any benefit).



# What you're covered for

In this section, we explain what benefits you are covered for, and any specific exclusions or conditions that apply to those benefits. General exclusions may also apply – see [page 16](#) (When we will not pay any benefit).

## Accidental Death and Disability Benefit (ADDB)

### Accidental Death Benefit (ADB)

If a person insured suffers an accident and it solely and directly causes his/her death within 12 months of the accident, we will pay the ADB.

The cover for that person insured will terminate automatically once a claim is paid under this benefit. If multiple individuals are insured under the same policy, the surviving person(s) insured will continue to be covered until the policy ends.

### Accidental Permanent Disability Benefit (APDB)

If a person insured suffers an accident, and it solely and directly causes permanent disability within 12 months of the accident, we will pay the APDB as stated in the Permanent Disability Schedule below. The amount payable is assessed as a percentage of the ADDB sum insured, as shown.

Any amount paid on a permanent disability will be deducted from the ADB limit if they arise from the same accident.

Permanent Disability Schedule	
Severity of the permanent disability	APDB (Payment as a percentage of the ADDB sum insured)
Total and permanent disability*	150%
Total and permanent loss of all sight in both eyes	100%
Total loss of speech and hearing	
Total and permanent severance or loss of use of two or more limbs above the wrist or ankle	100%
Third-degree burns (to 8% or more of the head, or 20% or more of the body)	
Total and permanent severance or loss of use of one limb above the wrist or ankle	80%
Third-degree burns (to 5% or more but less than 8% of the head, or 15% or more but less than 20% of the body)	
Total loss of use of all fingers on one hand or toes on one foot	60%
Total and permanent loss of all sight in one eye	
Total and permanent loss of all hearing in one ear	
Total and permanent loss of speech	
Third-degree burns (to 2% or more but less than 5% of the head, or 10% or more but less than 15% of the body)	4%
Total loss of use of phalanges of the hand or foot (per phalanx)	

\*Total and permanent disability is defined as a state of incapacity that is:

- caused by accidental injury sustained by the person insured;
- continuous for a period of at least six (6) months;
- medically certified by our appointed registered medical practitioner as total, permanent, and having no hope of improvement beyond six (6) months; and
- totally preventing the person insured from engaging in or giving attention to any and every kind of work to earn or obtain wages, compensation or profit for the remainder of his/her life; or if the person insured has no occupation at the time of the accident, he/she must be unable to perform 3 out of the 6 Activities of Daily Living (ADL) as a result of the accident. The person insured's inability to perform 3 out of the 6 ADL must be confirmed by a medical practitioner that we approve of.



## What you're covered for

### Notes:

- If the person insured suffers from more than one permanent disability caused by the same accident, we will only pay for the permanent disability that gives the highest benefit amount.
- We will take off any amount paid previously (including any claim for the Double or Triple Indemnity on ADDB) before paying the next claim event, and the maximum amount paid under this benefit cannot be more than 150% of the ADDB sum insured.
- There will be no change in the premium payable regardless of the number of claims made in a policy year.
- There is no waiting period in between claims.
- The APDB limit will reset upon the renewal of the policy each year.
- Upon 150% of the ADDB sum insured being paid out, coverage for that person insured under this policy will terminate.

## Double Indemnity on Accidental Death and Disability Benefit (ADDB)

We will pay double the benefit amount under the ADDB if the accidental death or permanent disability was sustained while the person insured was:

- a) a passenger on public transport;
- b) a passenger or driver in a private transport;
- c) a pedestrian where such loss is caused by public transport, private transport or a personal mobility device;
- d) using a personal mobility device; or
- e) a pedestrian (including as a passenger in a public lift, other than lifts in mines and construction sites); or
- f) caught in a fire which started at home, in a theatre, hotel, public auditorium, school, hospital or shopping mall. Factories are not covered.

For person(s) insured below the age of 18, we will also pay double the benefit amount under the ADDB if the accidental death or permanent disability was sustained while the person insured was:

- a) within school premises on a school day or participating in school activities organised and supervised by the school authorities;
- b) participating in school activities organised and supervised by the school authorities outside of school premises; or
- c) travelling as a passenger on a school bus, private bus or excursion bus to and from the school or a venue where the school activity(ies) is/are taking/took place.



We will pay the higher of the ADDB or Double Indemnity on ADDB but not both.

The maximum we will pay for this benefit is S\$2 million per life.

## Triple Indemnity on Accidental Death and Disability Benefit (ADDB)

We will pay triple the benefit amount under the ADDB if the accidental death or permanent disability was sustained while the person insured was travelling as a fare-paying passenger on a commercial plane or on a cruise ship (with at least a night's stay on board the cruise ship) operated by a licensed operator.



We will pay the higher of the ADDB or Triple Indemnity on ADDB but not both.

The maximum we will pay for this benefit is S\$3 million per life.



For an accident where more than one condition is met under the Double and Triple Indemnity on ADDB, we will only pay the higher of the two claims, but not both.

## Compassionate Grant Benefit

If we pay a claim for death under the Accidental Death Benefit, we will also pay you or your nominee the Compassionate Grant Benefit as an additional support. The Compassionate Grant Benefit will be paid in one lump sum as an additional 10% of the ADDB sum insured.

This benefit will only be paid once per life.

## Medical Expenses for Inpatient and Outpatient Treatment Benefit

We will reimburse reasonable and necessary medical expenses incurred for the person insured's inpatient and outpatient treatment as a result of an accident occurring in or outside of Singapore, up to the benefit limit payable for each accident.

All medical expenses must be incurred within 12 months from the date of the accident.

This benefit will expire when the person insured turns age 80.

- a) Chinese physician, acupuncturist, bonesetter and chiropractor expenses


If the person insured suffers from an accident, we will reimburse medical expenses incurred by the person insured for treatment by a Chinese medical practitioner and/or chiropractor received in or outside of Singapore, up to the benefit limit payable per visit for each accident.

All medical expenses must be incurred within 12 months from the date of the accident.

b) Physiotherapy expenses

If the person insured suffers from an accident, we will reimburse medical expenses incurred by the person insured for any medically necessary physiotherapy treatment received in or outside of Singapore, up to the benefit limit payable for each accident.

All medical expenses must be incurred within 12 months from the date of the accident.

 Claims paid for (a) and (b) will reduce the overall Medical Expenses for Inpatient and Outpatient Treatment Benefit. The total amount we will pay under this benefit in each period of insurance will not be more than the benefit limit shown in the table of benefits for any one accident.

**What is not covered**


- Medical treatment incurred for any injury, condition or ailment that is not as a result of an accident;
- Medical treatment incurred as a result of the person insured not taking necessary preventive measures, such as having the required mandated vaccinations or taking malaria medication as recommended; and
- Any of the scenarios stated in the section titled, "When we will not pay any benefit" at [page 16](#).

**No Claim Discount (NCD)**

If no claim has been admitted under the policy (including the riders, where applicable) for a person insured for 3 consecutive policy years, we will apply a one-time 10% perpetual discount on the total premiums payable under the policy (including all riders, if applicable) for that person insured.

The NCD will be automatically applied starting from the next policy anniversary, for as long as the policy is renewed yearly.

If there is a change in the plan type for the base plan and/or any riders for the eligible person insured on renewal of the policy, the NCD will apply to the new plan type.

 The NCD is applied on the premiums payable for each person insured, and not on the entire policy. If you and your children are insured under the same policy, each person must qualify separately for the NCD. Different persons insured under the policy may or may not qualify for the NCD.

**Optional Riders**

The optional riders you choose are shown in your policy schedule.


**Income Support Rider**

Your optional Income Support Rider, if applicable, provides the following benefits.

**Daily Hospital Income Benefit**

If a person insured is hospitalised due to an accident, we will pay the Daily Hospital Income Benefit for each day of hospitalisation.

The Daily Hospital Income Benefit is payable beginning from the date of hospitalisation, up to a maximum of 365 days for any one accident. We will stop paying the Daily Hospital Income Benefit when the person insured is discharged from the hospital.

 The limit for this benefit will be halved for the following group of persons insured:

- (i) Children (a child that is age 21 and under, as included in a family policy),
- (ii) unemployed persons, and
- (iii) persons over the age of 80.

Please refer to your policy schedule for the exact benefit amount you are entitled to.

**Weekly Income Benefit**

If within 90 days from the date an accident occurs, a person insured is hospitalised and is diagnosed by a medical practitioner with having a temporary total disability as a result of the accident, we will pay you the Weekly Income Benefit for each week that the person insured is hospitalised.

The Weekly Income Benefit is payable beginning from the date of hospitalisation, up to a maximum of 104 weeks for any one accident.

We will pay the Weekly Income Benefit for every 7 full days of hospitalisation or prorate the Weekly Income Benefit by the number of days if the hospitalisation does not extend to the full 7 days. We will stop paying the Weekly Income Benefit when the person insured is discharged from the hospital.

**Temporary total disability** refers to a physical condition caused solely and directly by an accident that temporarily prevents the person insured from totally engaging in any work for income in any occupation, business, or activity. The person insured will be regarded as having a temporary total disability where:



## What you're covered for

- a) if the person insured was engaged in any occupation or business that generates income when the accident happened, he/she is no longer engaged in any occupation or business that generates income because of the accident; or
- b) if the person insured was not engaged in any occupation or business that generates income when the accident happened, he/she becomes unable to perform 3 out of the 6 Activities of Daily Living (ADL) due to the accident. The person insured's inability to perform 3 out of the 6 ADL must be confirmed by a medical practitioner that we approve of.

This benefit will expire when the person insured turns age 75.



The limit for this benefit will be halved for the following group of persons insured:

(i) Children (a child that is age 21 and under, as included in a family policy), and

(ii) unemployed persons.

Please refer to your policy schedule for the exact benefit amount you are entitled to.

The following shall not be covered under this benefit:

- an accident arising out of, involving, or resulting in surgery for organ donation, regardless of whether an ICU Stay was required;
- admission into the ICU or surgery for cosmetic purposes;
- surgery for weight reduction or gender transformation purposes;
- an accident happening because of congenital conditions, and/or an accident which would not have happened if not for the congenital condition;
- surgery to correct vision or a refractory disorder that is not medically necessary as a direct result of an injury sustained from an accident; or
- hospitalisation due to palliative care.

## Catch-All Rider

Your optional Catch-All Rider, if applicable, provides the following benefit.

### Catch-All Benefit

We will pay an additional 10% of the ADDB sum insured if the person insured had an accident that requires an Intensive Care Unit (ICU) Stay, directly and solely as a result of that accident.

This benefit will be paid once per life.

**Intensive Care Unit Stay** refers to the person insured having stayed in the ICU for 120 or more consecutive hours with the use of invasive life support, with proof of such stay, while this policy is in force.

**Invasive life support** refers to the ventilatory support through the following means:

- Extracorporeal Membrane Oxygenation (ECMO);
- Left ventricular assist device (LVAD) or intra-aortic balloon pump; or
- Ventilatory support by invasive artificial airway (endotracheal tube or tracheostomy tube), but specifically excludes ventilation by any non-invasive ventilator, such as a CPAP BiPAP or use of a face mask.

## Policy Extensions

Coverage under this policy and any attaching riders shall be extended to cover situations where the person insured is a victim of any of the following events, subject to the terms and conditions of the respective benefits.

No.	Policy Extension	Description
1	Worldwide coverage	Unless a benefit expressly mentions that coverage is confined to Singapore, this policy and its benefits provide for a worldwide coverage for a maximum duration of 180 consecutive days outside of Singapore.
2	Riot, strike, civil commotion, terrorism, hijack, murder, and assault	If the person insured suffers an injury or dies because of an accident arising out of an act of riot, strike, civil commotion, terrorism, hijack, murder, or assault that triggers a benefit under this policy, we will pay the relevant benefit stated. This extension is only valid if the person insured did not take part in such acts or make an agreement with other people to carry out such acts.
3	Disappearance	If the person insured disappears following the sinking or destruction of a ship, plane or any other conveyance he/she was onboard during the period of insurance, and the body is not found within one year after the date of the disappearance, we will pay the Accidental Death Benefit stated.  The Accidental Death Benefit will be paid to you or your nominees after you/they have signed an undertaking to us to guarantee that if the person insured is subsequently found to be alive, you/they will, when asked, return to us the benefit amount that we have paid under this extension.
4	Natural elements or disasters	If the person insured suffers an injury or dies because he/she was exposed to natural elements or disasters and that trigger a benefit under this policy, we will pay the relevant benefit up to the limit stated.
5	Drowning and suffocation	If the person insured suffers an injury or dies from accidental inhaling of smoke, poisonous fumes, gas or by drowning, and any benefit is triggered under this policy, we will pay the relevant benefit up to the limit stated.
6	Accidental miscarriage	If the person insured suffers an injury because of an accident, resulting in a miscarriage that triggers a benefit under this policy, and such miscarriage is not attributed to any natural cause and/or illness, we will pay the benefit up to the relevant limit stated.
7	Full time National Service and Reservist training	If the person insured suffers an injury or dies because of an accident during full time National Service or Reservist duties carried out in Singapore or overseas (if this applies) under the Enlistment Act 1970, and triggers a benefit under this policy, we will pay the relevant benefit up to the limit stated.
8	Motorcycling	If the person insured suffers an injury or dies because of an accident while as a rider or pillion on a motorcycle and triggers a benefit under this policy, we will pay the relevant benefit up to the limit stated.
9	Sports and activities as a form of recreation	If the person insured suffers an injury or dies because of an accident while engaging in sports and activities as a form of recreation (except of racing of any kind) and this triggers a benefit under this policy, we will pay the relevant benefit up to the limit stated. For the avoidance of doubt, coverage does not extend to any sport or activity done in a professional capacity, or where an income or remuneration could be earned.
10	Private flight	If the person insured suffers an injury or dies because of an accident while on a private flight (as a non-fare paying passenger in a licensed private aircraft and/or helicopter while on a business trip when traveling outside of Singapore) and triggers a benefit under this policy, we will pay the relevant benefit up to the limit stated.



## What you're covered for

No.	Policy Extension	Description
11	Insect bites, infectious diseases, or food poisoning	<p>We will consider the contracting of an infectious disease and food poisoning an accident under this policy. If the person insured contracts or dies from food poisoning or infectious diseases, or suffers an injury or dies from insect bites, and this triggers a benefit payable under the ADDB and/or the Medical Expenses for Inpatient and Outpatient Treatment Benefit, we will pay the relevant benefit(s) up to the limit(s) stated. Coverage for food poisoning and infectious disease under this extension has a 14-day waiting period from the issue date.</p> <p>However, notwithstanding the foregoing, this extension does not extend to Chinese physician, acupuncturist, bonesetter and chiropractor expenses incurred under the Medical Expenses for Inpatient and Outpatient Treatment Benefit.</p> <p>The following infectious diseases are covered:</p> <ol style="list-style-type: none"> <li>1. Avian influenza or 'bird flu' due to influenza A viral strains H5N1, H9N2 or H7N7</li> <li>2. Hand, foot and mouth disease (HFMD)</li> <li>3. Measles</li> <li>4. Middle east respiratory syndrome coronavirus (MERS-CoV)</li> <li>5. Mumps</li> <li>6. Nipah viral encephalitis</li> <li>7. Rabies</li> <li>8. Rubella</li> <li>9. Severe acute respiratory syndrome (SARS)</li> <li>10. Anthrax infection</li> <li>11. Legionnaires' disease</li> <li>12. Melioidosis</li> <li>13. Plague</li> <li>14. Pulmonary tuberculosis</li> <li>15. Chikungunya fever</li> <li>16. Dengue fever and Dengue haemorrhagic fever</li> <li>17. Japanese viral encephalitis</li> <li>18. Malaria</li> <li>19. Yellow fever</li> <li>20. Zika virus</li> <li>21. Variant Creutzfeldt-Jakob disease (vCJD) or 'mad cow disease'</li> <li>22. Poliomyelitis</li> <li>23. Diphtheria</li> <li>24. Botulism</li> </ol>



# Starting, changing or ending your policy

This section explains when your policy starts and ends, and how to make changes to your policy.

## When your policy starts

Your cover starts on the issue date.



You are not covered before the issue date. Hence, if an accident occurs before the issue date, you will not be covered.

## Changes to your policy

You must notify us about the following changes to your policy, and if we accept the changes, we will make the changes by providing an official written change confirmation or an endorsement, where applicable.

We are not bound by any change until we have issued written confirmation.



You can download the relevant forms from our website [www.fwd.com.sg](http://www.fwd.com.sg) or call our hotline at +65 6820 8888 for assistance.

### Change in occupation

You must notify us as soon as possible if any of the persons insured changes their occupation. We may terminate your policy cover or continue the cover on existing or revised premiums and benefits.

#### What you need to do

- send us a completed change request form; or
- complete your request using our customer portal and provide us with the necessary information for our processing.

#### What we will do

- review your request and decide if we accept it;
- we may request for further pro-rated premiums and/or information from you before making our decision;
- make the change if we agree to it; and
- write to you to confirm the change, along with the date the change will take effect from.

### Change in citizenship

You must notify us as soon as possible if any of the persons insured changes their citizenship. We may terminate your policy cover or continue the cover on existing or revised premiums and benefits.

#### What you need to do

- send us a completed change request form; or
- complete your request using our customer portal and provide us with the necessary information for our processing.

#### What we will do

- review your request and decide if we accept it;
- we may request for further information from you before making our decision;
- make the change if we agree to it; and
- write to you to confirm the change, and tell you in writing, along with the date the change will take effect from.

### Change in country of residence

You must notify us as soon as possible if you or any of the persons insured change(s) your/their country of residence or plan to reside outside of Singapore for more than 180 days. We reserve the right to continue the cover on current terms and conditions or reject continuing your policy if you and/or the person(s) insured change(s) your/their country of residence.

#### What you need to do

- send us a completed change request form; or
- complete your request using our customer portal and provide us with the necessary information for our processing.

#### What we will do

- review your request and decide if we accept it;
- we may request for further information from you before making our decision;
- make the change if we agree to it; and
- write to you to confirm the change, and tell you in writing, along with the date the change will take effect from.



This policy will not provide coverage where laws and regulations prohibit performance of the policy.

Should any person is found to have provided inaccurate details, we reserve the right to cancel your policy.

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 **Starting, changing, or ending your policy**

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### Other changes you may make

You can also ask us to make the following changes to your policy, and we will make the changes by providing an official written change confirmation or an endorsement, where applicable.

We are not bound by any change until we have issued such written confirmation.

#### Changing your address or contact details

You can change your address or contact details.

##### What you need to do

- send us a completed change request form; or
- complete your request using our customer portal and provide us with the necessary information for our processing.

##### What we will do

- review your request; and
- make the change, and tell you in writing, along with the date the change will take effect from.

#### Changing your premium payment frequency or method

You can change:

- how often you pay your premiums (your premium payment frequency); or
- the method of paying your premiums.

##### What you need to do

- send us a completed change request form; or
- complete your request using our customer portal and provide us with the necessary information for our processing.

##### What we will do

- review your request; and
- make the change, and tell you in writing, along with the date the change will take effect from.

#### Changing your base plan or rider plan type

You can change your base plan and/or riders upon policy renewal, at the following policy anniversary.

You may select separate plan types for your base plan and Income Support Rider.

##### What you need to do

- send us a completed change request form; or
- complete your request using our customer portal and provide us with the necessary information for our processing.

##### What we will do

- review your request;
- we may request for further pro-rated premiums and/or information from you before making our decision;
- make the change, and tell you in writing, along with the date the change will take effect from.

#### Changing the persons insured under your policy

You can add a person insured at any time, subject to a maximum of 6 persons insured under your policy.

You can remove a person insured under your policy at the next policy anniversary.

##### What you need to do

- send us a completed change request form; or
- complete your request using our customer portal and provide us with the necessary information for our processing.

##### What we will do

- review your request;
- we may request for further pro-rated premiums and/or information from you before making our decision; and
- make the change, and tell you in writing, along with the date the change will take effect from.

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### Terms of renewal

We will automatically renew this policy by one more year at the end of each policy year, until each person insured reaches 100 years of age.

We may change the premiums and features at any time by giving you 30 days' notice.

If we do not receive a request to cancel the policy, we will collect the premiums based on the last recurring payment instruction chosen by you.

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### Cancelling your policy

You can cancel (terminate) your policy at any time.

#### Monthly Payment Frequency

If you have chosen a monthly premium payment frequency, the policy will continue to provide coverage up to the day before the next due date for the premium payment.

### Annual Payment Frequency

If you have chosen an annual premium payment frequency, we may refund a part of your premium, as shown in the table below, based on the number of complete months remaining on your policy.

However, we will not refund anything if there was/were any claim(s) paid under your policy or if there is a claim admitted and pending payment, or if the refund amount is less than \$25 (excluding GST).

Complete months remaining on your policy	Percentage of refund on premium paid (excluding GST)
11 months	75%
10 months	65%
9 months	55%
8 months	45%
7 months	35%
6 months	25%
0-5 months	0

#### What you need to do

- send us a completed change request form; or
- complete your request using our customer portal and provide us with the necessary information for our processing.

#### What we will do

- Review your request and cancel your policy.
- We will write to you to confirm the cancellation.

### No reinstatement

You will not be able to reinstate (restart) your policy if the policy has been terminated. If you wish to continue to receive coverage, you may purchase a new policy, subject to the availability of this product.

### 14-day free-look period

If you aren't completely satisfied with your policy, and you haven't made a claim under it, you have 14 calendar days from the date you receive your policy to cancel it and receive your premiums back after deducting any fees we have paid and/or expenses incurred (if any). We consider this policy delivered from the time we email it to you.

#### What you need to do

You must write to us to cancel this policy. We must receive your notice within the 14-day free-look period.

#### What we will do

After receiving your notice, we will refund any premiums paid after deducting any fees we have paid and/or expenses incurred (if any). Thereafter, we will cancel your policy, and you will not be able to claim any benefits under it.

You cannot cancel your policy if you have made a claim under your policy during the 14-day free-look period.

### When your policy ends

Your policy will end on the earliest of the following dates:

- coverage for all the person(s) insured end(s);
- the policy lapses due to non-payment of premium; or
- when we receive your notice in writing to terminate your policy.

The coverage for a person insured ends on the earliest of the following dates:

- that person insured dies (coverage will continue for the other persons insured);
- that person insured reaches 100 years of age (for adult policy) or 22 years of age (for child policy);
- when 150% of the ADDB sum insured is paid out;
- termination of the coverage is triggered by any other policy terms and conditions; or
- when we receive your notice in writing to terminate the coverage.



# The main people under your policy

This section explains who may be covered under your policy, what rights they have, and how they are treated.

## Policy owner (you)

You (the policy owner) own the policy, and your details are shown in the policy schedule or endorsement.

You are the only person who may make changes to, or enforce any rights under the policy if you have not assigned the policy to anyone else.

You may choose a person to receive the benefits payable upon the person insured's death under this policy. See [page 14](#) (nomination of beneficiaries).

## Person insured

This is a person insured under your policy and the details are shown in the policy schedule or endorsement.

The following people can be covered under the policy:

- yourself (the policy owner); or
- your child or ward (who is 21 years of age or under as of the issue date).

A person insured (other than the policy owner) cannot make changes to the policy.

## Age requirements for person(s) insured

Age requirements for person(s) insured

Person insured	Minimum age	Maximum age
Child	0	21
Adult	18	70

### You must have an insurable interest in the person(s) insured

You must have an insurable interest in the person(s) insured when the policy coverage starts.

You have a permissible insurable interest in a person insured if:

- the person insured is yourself;
- the person insured is your child or legal ward and is under the age of 18 years; or
- the person insured is wholly or partly dependent on you.

### If you do not have a permissible insurable interest

If we become aware that you do not have a permissible insurable interest in a person insured, we may void this policy under section 146 of the Insurance Act 1966. If we do so, we will cancel this policy and treat it as never having existed. This means you will not be entitled to any benefits and we will refund your total premiums paid, less any amount you owe to us.

## Nomination of beneficiaries

If you (the policy owner) are also the person insured under this policy, you can choose to nominate another person (or people) to receive the benefits payable upon the death of a person insured, and how much each nominee will receive.

### Trust or revocable nomination

You have a choice of either a trust nomination or a revocable nomination under the Insurance Act. Depending on your choice, the nominees may have certain rights under the policy.

For a trust nomination, you will lose all rights to the ownership of the policy. You can only revoke a trust nomination if all nominees consent to the change.

For a revocable nomination, you are free to change, add or remove nominees at any time without their consent.

To make a trust or revocable nomination under this policy, you will have to complete the required form and pass it to us.

You should regularly check if your nominees are still appropriate.

### Changing your nominees

Only you (the policy owner) can change the nominees.

However, depending on the type of nomination you have selected, the nominees may need to consent to the change.

## Assignment of benefits (Policy assignment)

You can transfer the benefits and all rights under your policy to someone else, through an assignment. For us to record this assignment of benefits, you need to provide us the completed required form. We will not be responsible for checking the validity of the assignment.

When you (the assignor) assign the policy to another person (the assignee), you are transferring all ownership and rights over the policy to the assignee. Upon the policy being assigned, the assignee will have full control of the policy as if they are the policy owner. Any unpaid premiums will also be the responsibility of the new policy owner.

You can assign this policy any time after the policy issue date.

**What you need to do**

- send us a completed absolute assignment form; or
- complete your request using our customer portal and provide us with the necessary information for our processing.

**What we will do**

- review your request and decide if we accept it;
- we may request further information from you before making our decision;
- any revocable nomination of beneficiary made will be automatically revoked;
- make the change, if we agree to the change; and
- write to you to confirm the new policy owner along with the date the change will take effect from.



# Making a claim

**Need to make a claim? Read this section to find out what you need to do.**

## How to claim

Call our hotline at **+65 6820 8888** to make a claim.

You may visit our website at [www.fwd.com.sg](http://www.fwd.com.sg) for our detailed hotline operating hours.

### Tell us as soon as possible

We should be informed as soon as possible if a claim is to be made under this policy.

To make sure we are able to assess claims quickly, we ask that you, the policy owner or the nominee, call us and let us know that a claim will be made under the policy and by whom.

Claims won't be affected if there were good reasons why you, the policy owner or the nominee could not notify us of the claim immediately.

### We're here for you

We understand that dealing with an accident or the death of a love one is difficult – you can always call us at our hotline at **+65 6820 8888** for help with the claim process. You may visit our website at [www.fwd.com.sg](http://www.fwd.com.sg) for our detailed hotline operating hours.

## When we will not pay any benefit

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

- a) Any self-inflicted injury or attempt at suicide, whether sane or insane.
- b) While under the influence of any narcotic, alcohol, gas or fumes, voluntarily taken, administered, absorbed or inhaled or drugs not prescribed by a medical examiner.
- c) War or any act related to it, or service in the armed forces or in a Civil Defence Force supporting any country at war.
- d) Taking part in air travel activities, except as a fare-paying passenger in a licensed aircraft on an established air route, or as a non fare-paying passenger in a licensed private aircraft and/or helicopter while on a business trip travelling outside Singapore.
- e) Mental disorder or illness or disease of any kind or any infection, other than infections which happen at the same time and as a result of any accidental wound, or covered infectious diseases and/or food poisoning which fall under the policy extensions.
- f) Any injury the person insured suffers while committing or attempting to commit an offence or in resisting arrest by a law enforcement officer.
- g) Any form of dental care or treatment (unless needed as a result of an injury caused by an accident and as long as the dental care or treatment is carried out on sound natural teeth and not to dentures) and all related expenses.
- h) Any pre-existing condition which existed before the policy start date, or the date of reinstatement, whichever is later, and has one or more of the following characteristics:
  - presented signs or symptoms which you (or the person insured) were aware of or should reasonably have been aware of;
  - treatment was recommended or received from a medical practitioner or specialist for the medical condition; or
  - you (or the person insured) has/have undergone or were recommended to undergo medical tests or investigations, unless the illness or condition had been declared and accepted by us.
- i) Taking part in air, military, or naval training, exercises, manoeuvres, warlike operations or handling explosives and demolition materials and while under orders for restoring public order, (except where National Service or Reservist duties are carried out in Singapore or overseas (if this applies) under the Enlistment Act 1970).
- j) Engaging in any sport in a professional capacity, or where an income or remuneration could be earned, or engaging in racing of all kinds.
- k) Deliberate acts that endanger the person insured's life, such as provoked assault.
- l) Activities involving firearms and explosive (except where National Service or Reservist duties are carried out in Singapore or overseas (if this applies) under the Enlistment Act 1970).
- m) Wilful participation by you or any of the persons insured in any acts that are illegal and/or unlawful in Singapore and/or the country you are in.

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## Things to know

If you and/or the person(s) insured engage in an occupation different from what is disclosed in the proposal for this policy without first notifying and obtaining our written agreement (which may be subject to the payment of such reasonable additional premium as we may require as the consideration for such agreement), we will not pay or be liable for any claim in respect, or arising out of, or in the course of such occupation.

If you or the person(s) insured change your/their country of residence or citizenship, you must tell us according to your policy's terms and conditions. A change in country of residence refers to you and/or the person(s) insured living in or intending to live in another country, other than your and/or the person insured(s) country of residence for 180 continuous days or more after your policy issue date. We reserve the right to continue the cover on current terms and conditions or reject continuing your policy if you and/or the person(s) insured change(s) your/their country of residence.

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## Filling in your claim form

We will provide the forms that need to be filled in to make a claim. Claims must be made on forms provided by us together with the supporting documents and any other information and documents that we ask for. We will not be able to process a claim until we receive all documents, information, and the completed claim form.

Every effort should be made for claims to be sent to us within 30 days of the accident date, as it is difficult to assess claims after this period.

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## Dishonest, exaggerated, fraudulent claims

We may report you to the Singapore police or foreign authorities if we determine that you have submitted a dishonest, intentionally exaggerated, or fraudulent claim. If this happens, we may terminate your policy and you must pay us any amount that we have paid to you (or to another party) under this policy, and that would not have been paid but for the dishonest, intentionally exaggerated, or fraudulent claim.

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## Cost of preparing claims

We are not responsible for any of the costs of filling a claim in any form or getting any documents, such as death certificate or other certification. We will not pay for any of these costs.



# Your premiums

This section explains your premiums.

## Paying your premiums

It is important to pay your premiums on time, so your policy stays active, and the person(s) insured continue to be covered. Below we outline how you can pay your premiums and what happens if you don't pay on time.

### Amount and due date

Your policy schedule shows the amount you need to pay for this policy. To enjoy the benefits provided by this policy, please pay each premium before it is due.

Any amount due to us under this policy will be deducted from any benefit that becomes payable within the grace period.

### Payment frequency options

You have the following payment frequency options:

- annually in one lump sum;
- half-yearly in two instalments;

You can change your chosen premium payment frequency any time and we will inform you of the date the change will take effect from. See [page 12](#) (changing your premium payment frequency or method) for how.

### Payment method options

You can pay using any of the following options:

- credit card;
- eGIRO; or
- other modes of payments as updated on our website from time to time.

### Premium rates upon renewal of the policy are not guaranteed

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 that in the policy schedule. We will let you know 30 calendar days in advance if your subsequent premiums are revised.

### What happens if you don't pay on time

Your premiums are payable by the due date. We give you a 60-day grace period after the due date to pay your premium. Your policy will continue if you pay your overdue premium within this 60-day grace period. If we do not receive your premium within this period, your policy will lapse.

First premium	Your first premium is due on the issue date
Annual or monthly premiums	These premiums are due at the frequency you choose. You need to keep paying your premiums until the coverage end date as shown in the policy schedule.
If you miss your premium payment	We give you a 60-day grace period after the due date to pay your premium. Your policy ends from the date the premium was due, if we do not receive your premium within this 60-day grace period.



# Keeping it legal

In this section, we explain the important legal rights and obligations under your policy.

## Governing law

Your policy is an insurance contract between you and us and is governed by the laws of the Republic of Singapore. If there is any dispute or disagreement relating to this policy, we and you agree to submit to the exclusive jurisdiction of the Singapore courts.

### Changes to your policy to comply with the law

We have the power to make any changes to your policy required to comply with any law (not just Singapore laws). If we need to make a change, we will write to you 30 calendar days in advance.

## We rely on your information

### Read all parts of your policy to make sure they are correct

This insurance contract is based on the information you gave us during the application process. It is important that the information is correct, and you and the person(s) insured were truthful and accurate with all of the information you provided.

This information helped us to decide if you and the person(s) insured were eligible for the policy, and how much you need to pay.

You should let us know immediately if the information you or the person(s) insured gave us during the application, was inaccurate, misleading, or exaggerated. You should also let us know immediately if the information you or the person(s) insured had given us changed after your policy is active.

### You need to provide correct and complete information

You and the person(s) insured are responsible for:

- letting us have correct and complete information; and
- being careful when answering our questions, or when you or the person insured confirm or amend any information you have given to us.

If you don't, we may not pay your claim, and your benefits under your policy may be affected. In some cases, we may cancel the policy. See [page 19](#) (disputing payments).



If you need to change your information, or if you have any questions, please call our hotline at +65 6820 8888.

## Disputing payments

We can declare your policy void if you or a person(s) insured:

- made an inaccurate or untrue statement on a material matter; or
- suppressed or omitted a material fact,

within your application.

### How we define material matters and facts

A material matter or material fact is one that would have caused us to:

- refuse to issue the policy to you; or
- offer you a policy on different terms,

if you or the person(s) insured had told us about it.

Unless there was fraud, material non-disclosure and/or misrepresentation of a material fact, non-payment of premium (if applicable) or any applicable policy exclusion, we will not declare your policy void after 2 years after the issue date.

### However, we may not pay any benefits

We may not pay any benefits if you or the person(s) insured:

- did not provide accurate and truthful information;
- gave us misleading or exaggerated information; or
- made any false statements,

at the time of purchase.

### What we will do

- If we dispute your policy, we will review your policy and decide if we have any reason to declare it void. If we do, we will cancel it and treat it as never having existed.
- We will refund the total premiums paid, less all policy debt and interest owed to us. The policy will then end.

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## Anti-money laundering, anti-terrorism financing and proceeds of unlawful activities

We may take steps to comply with laws, regulations and requests of relevant authorities in the areas of sanctions, anti-money laundering and counter-terrorism financing. These steps could include ending your policy and related cover, as well as treating premiums paid and amounts payable under your policy, in any manner we deem appropriate.

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## 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 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 of Singapore or Life Insurance Association, Singapore websites ([www.gia.org.sg](http://www.gia.org.sg)) / ([www.lia.org.sg](http://www.lia.org.sg)) or SDIC website ([www.sdic.org.sg](http://www.sdic.org.sg)).

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## Third party's rights

Unless it is clearly stated in this policy contract, no one other than you (as the policy owner) can enforce or rely on any terms in this policy or have any rights under the Contracts (Rights of Third Parties) Act 2001.



# Important words and phrases

The list below explains the meanings of important words and phrases shown in your policy.

## 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 and has a visible impact on a person's external appearance.

## Activities of Daily Living (ADL)

- a) Washing - the ability to wash in the bath or shower (including getting into and out of the bath or shower) or wash satisfactorily by other means.
- b) Dressing - the ability to put on, take off, secure and unfasten all garments and, as appropriate, any braces, artificial limbs or other surgical appliances.
- c) Transferring - the ability to move from a bed to an upright chair or wheelchair and vice versa.
- d) Mobility - the ability to move indoors from room to room on level surfaces.
- e) Toileting - the ability to use the lavatory or otherwise manage bowel and bladder functions so as to maintain a satisfactory level of personal hygiene.
- f) Feeding - the ability to feed oneself once food has been prepared and made available.

The condition must be certified by a medical practitioner that we approve of.

## Child(ren)

Refers to anyone who is 21 years of age or under as of the issue date.

## Chinese medical practitioner

Refers to a legally licensed Chinese physician, acupuncturist, or bonesetter registered to practice within the scope of his or her licence under the laws of the country where he or she operates. For the purposes of this policy, a Chinese medical practitioner cannot be an interested party.

## Chiropractor

Refers to a legally licensed practitioner in chiropractic medicine registered to practice within the scope of his or her licence under the laws of the country where he or she operates. For the purposes of this policy, a chiropractor cannot be an interested party.

## Endorsement

Refers to an additional document attached to your policy or which we may issue later those outlines any changes to your policy.

## Hospital

Hospital includes restructured hospitals, private hospitals, or any other medical institution that we accept, and refers to a facility that:

- a) is licensed as a hospital under the laws of the country it operates in;
- b) has registered nurses and at least one medical practitioner stationed at all times;
- c) mainly operates to diagnose and treat injuries or illnesses on an in-patient basis;
- d) has organised facilities for X-ray and major surgery; and
- e) 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).

A restructured hospital is a hospital and/or medical centre that is:

- a) operated as a private company but wholly owned by the government;
- b) governed by broad policy guidelines by a government health authority or regulator; and
- c) receives financial support from the government to provide subsidised medical services to its patients.

<b>Hospitalised / Hospitalisation</b>	Refers to the confinement of the person insured in a hospital: <ul style="list-style-type: none"><li>a) for 12 consecutive hours or longer; or</li><li>b) for which a room and board charge is made in connection with such confinement; or</li><li>c) is required because of a surgical procedure.</li></ul>
<b>Intensive Care Unit or ICU</b>	Refers to the intensive care unit of a hospital. High dependency units and other accommodation wards are not considered intensive care unit.
<b>Intensive Care Unit Stay</b>	While this policy is in force, if the person insured has stayed in the ICU for 120 or more consecutive hours with the use of invasive life support, and there is proof of such stay.
<b>Interested party</b>	Refers to: <ul style="list-style-type: none"><li>▪ you or a family member and your 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; or</li><li>▪ business partner, employer, employee, or agent of anyone described above.</li></ul> For the purposes of this policy, a medical practitioner, Chinese medical practitioner, chiropractor or physiotherapist cannot be an interested party.
<b>Invasive life support</b>	Invasive life support refers to the ventilatory support through the following means: <ul style="list-style-type: none"><li>▪ Extracorporeal Membrane Oxygenation (ECMO);</li><li>▪ Left ventricular assist device (LVAD) or intra-aortic balloon pump; or</li><li>▪ Ventilatory support by invasive artificial airway (endotracheal tube or tracheostomy tube), but specifically excludes ventilation by any non-invasive ventilator, such as a CPAP BiPAP or use of a face mask.</li></ul>
<b>Issue date</b>	The date your policy cover starts. This date is shown in your policy schedule.
<b>Medical practitioner</b>	Refers to a person who has a medical degree and is legally licensed or registered to practise Western medicine in the country in which he or she operates, and is accredited by a medical board or equivalent organisation to render medical services, in the region he or she practices. For the purposes of this policy, a medical practitioner cannot be an interested party.
<b>Medically necessary</b>	Refers to the medical service, procedure or supply that is necessary according to a medical practitioner to treat an accidental injury (or illness if applicable). Also, that medical service, procedure, or supply is: <ul style="list-style-type: none"><li>▪ necessary because your/the person insured's medical condition will be negatively affected without it;</li><li>▪ widely accepted within the medical profession in Singapore, or the country of treatment, as being effective, appropriate, and essential to treat the injury or illness based on recognised medical standards of the specialty involved;</li><li>▪ not for cosmetic or aesthetic purposes;</li><li>▪ not elective, preventative or screening in nature;</li><li>▪ not for your/the person insured's personal comfort or convenience, or for you/the person insured to make a profit; and</li><li>▪ not experimental, unless it is widely recognised by the medical profession in Singapore as having the potential to become part of conventional Western medicine.</li></ul>

<b>Person insured</b>	A person insured by this policy and shown on the policy schedule.
<b>Personal mobility device (PMD)</b>	<p>Refers to a vehicle that is:</p> <ul style="list-style-type: none"> <li>▪ Designed to be used by one person;</li> <li>▪ Has one or more wheels that operate on a single axis;</li> <li>▪ Propelled by an electric motor attached to the vehicle or human power or both; and</li> <li>▪ Does not resemble a motor car or motorcycle.</li> </ul> <p>A personal mobility device includes (but is not limited to) a wheelchair, hoverboard, power scooter, power assisted unicycle, rollerblade, roller-skate, skateboard, skate-scooter, unicycle, pedal bicycle (including bike sharing), pedal tricycle or power-assisted bicycle. A personal mobility device does not include a trolley, any wheeled baby transport (for example, perambulator and stroller), motor car or motorcycle.</p>
<b>Physiotherapist</b>	Refers to a legally licensed practitioner in physiotherapy registered to practice within the scope of his or her licence under the laws of the country where he or she operates. For the purposes of this policy, a physiotherapist cannot be an interested party.
<b>Policy</b>	<p>All of the documents listed below:</p> <ul style="list-style-type: none"> <li>▪ your policy schedule;</li> <li>▪ this policy contract;</li> <li>▪ your application form and any documents you provided with it; and</li> <li>▪ any endorsement to your policy, if applicable.</li> </ul>
<b>Policy owner</b>	You, the person who owns this policy. Your details are shown in the policy schedule or endorsement.
<b>Policy anniversary</b>	Means the same date and month as the issue date in the next year (i.e. counted 12 months from the issue date).
<b>Policy schedule</b>	<p>The document attached to your policy. It shows important information about your policy, including the following:</p> <ul style="list-style-type: none"> <li>▪ policy number;</li> <li>▪ details of policy owner and person insured;</li> <li>▪ your premium details; and</li> <li>▪ the benefits of your policy and the sum insured.</li> </ul>
<b>Policy year</b>	12-month period starting from the issue date or on each policy anniversary.
<b>Private transport</b>	<p>Refers to any vehicle used for regular transport and provided the driver or person insured (as the case may be) holds a valid license recognised by the local transport authorities to operate the private transport.</p> <p>Private transport includes (but is not limited to) any private car, company car, motorcycle and cars falling under the “Private Car Rental Scheme” adhering to the local government regulations.</p>
<b>Public transport</b>	Public transport means any regularly scheduled aircraft, bus, ferry, hovercraft, hydrofoil, ship, train, tram or underground train which has fixed and established routes and is operated by a licensed carrier or operator to transport fare-paying passengers. This does not include taxis and all other methods of transport that are chartered or arranged as part of a tour even if they are regularly scheduled.
<b>Sum insured</b>	As shown on the policy schedule or endorsement.

**Temporary total disability**

Refers to a physical condition caused solely and directly by an accident that temporarily prevents the person insured from totally engaging in any work for income in any occupation, business, or activity. The person insured will be regarded as having a temporary total disability where:

- a) if the person insured was engaged in any occupation or business that generates income when the accident happened, he/she is no longer engaged in any occupation or business that generates income because of the accident; or
- b) if the person insured was not engaged in any occupation or business that generates income when the accident happened, he/she becomes unable to perform 3 out of the 6 Activities of Daily Living (ADL) due to the accident. The person insured's inability to perform 3 out of the 6 ADL must be confirmed by a medical practitioner that we approve of.

**Total and permanent disability**

Refers to a state of incapacity that is:

- a) caused by accidental injury sustained by the person insured;
- b) continuous for a period of at least six (6) months;
- c) medically certified by our appointed registered medical practitioner as total, permanent, and having no hope of improvement beyond six (6) months; and
- d) totally preventing the person insured from engaging in or giving attention to any and every kind of work to earn or obtain wages, compensation or profit for the remainder of his/her life; or if the person insured has no occupation at the time of the accident, he/she must be unable to perform 3 out of the 6 Activities of Daily Living (ADL) as a result of the accident. The person insured's inability to perform 3 out of the 6 ADL must be confirmed by a medical practitioner that we approve of.

**We, us and our**

FWD Singapore Pte. Ltd.

**You and your**

The policy owner. Your details are shown in the policy schedule.

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## For more information

Please contact your Financial Adviser Representative or check out our website.

[fwd.com.sg](http://fwd.com.sg)



Call our hotline  
+65 6820 8888

For the most up-to-date information regarding our operating hours, please visit our website.

## About FWD

FWD Group is a pan-Asian life insurance business with more than 11 million customers across 10 markets, including some of the fastest growing insurance markets in the world.

FWD reached its 10-year anniversary in 2023. The company is focused on making the insurance journey simpler, faster and smoother, with innovative propositions and easy-to-understand products, supported by digital technology. Through this customer-led approach, FWD is committed to changing the way people feel about insurance.

As buying a life insurance policy is a long-term commitment, an early termination of the policy usually involves high cost and the Surrender Value, if any, that is payable to you may be zero or less than the total premiums paid. It is usually detrimental to replace an existing accident and health plan with a new one.

A penalty may be imposed for early plan termination and the new plan may cost more, or have less benefits at the same costs.

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 us or visit the Life Insurance Association or SDIC websites ([www.lia.org.sg](http://www.lia.org.sg)) or ([www.sdic.org.sg](http://www.sdic.org.sg)).

This material is issued by FWD Singapore Pte. Ltd.  
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