

## INSURECARE – JUNIOR POLICY

This Policy, the Policy Schedule and any Endorsement or Memorandum thereon, shall be considered as one document and any word or expression to which a specific meaning has been attached in any of them, shall bear such meaning throughout.

You, the Insured, and We, the Company, agree that:

1. The Proposal shall be incorporated in and be the basis of the contract.
2. You will pay the Premium.
3. We will provide the insurance subject to the terms of this Policy.
4. The following shall be conditions precedent to any liability on Our part:
  - (a) Observance of the terms of this Policy relating to anything to be done or complied with by You or the Insured Person.
  - (b) The truth of the Proposal.

The Company agrees, subject to the terms, exclusions and conditions contained herein or endorsed hereon, to insure the Insured Person during Period of Insurance for the Benefits as stated in the Policy.

## DEFINITIONS

For the purpose of this Policy:

1. Accident or Accidental means a sudden, unforeseen or fortuitous event.
2. "AIDS" or "Acquired Immune Deficiency Syndrome" shall have the meanings assigned to it by the World Health Organization. AIDS includes Opportunistic Infection, Malignant Neoplasm or any disease or sickness in the presence of a sero-positive test for HIV and shall include H.I.V. (Human Immune Deficiency Virus) encephalopathy (dementia) and H.I.V. (Human Immune Deficiency Virus) Wasting Syndrome.

Opportunistic Infection includes but not be limited to pneumocystis carinii pneumonia, organism or chronic enteritis virus and/or disseminated fungi infection.

Malignant Neoplasm shall include but not be limited to Kaposi's sarcoma, central nervous system lymphoma and/or other malignancies now known or which become known as immediate causes of death, an illness, or disability, in the presence of Acquired Immune Deficiency.

3. Air Travel means mounting into travelling in or dismounting from any fully licensed passenger carrying aircraft as a passenger but not as a member of the crew nor for the purpose of engaging in any trade or technical operation in or on the aircraft.
4. Capital Sum Insured refers to the sum insured for Accidental Death
5. Chiropractor refers to a registered practitioner in chiropractic medicine who is licensed and practicing within the scope of his/her license pursuant to the laws of the country in which such practice is maintained.

The attending Chiropractor shall not be the Insured Person's spouse, the travelling companion of the Insured Person, or a person who is related to the Insured Person.

6. Company/ We/ Us/ Our /Ourselves refers to United Overseas Insurance Limited.
7. Dislocation means an injury to a joint, a place where two or more bones come together in which the ends of the bones are forced from their normal positions.
8. Fracture in bone means a partial or complete break in the continuity of the bone.
9. Hospital means an establishment which meets all the following requirements:
  - (a) holds a licence as a hospital (if licensing is required in the state or governmental jurisdiction);
  - (b) operates primarily for the reception, care and treatment of sick, ailing or injured persons as in-patients;
  - (c) provides twenty-four (24) hours a day nursing service by registered or graduated nurses;
  - (d) has a staff of one or more licensed Physicians or Surgeons available at all times;
  - (e) provides organized facilities for diagnosis and major surgical facilities; and

- (f) is not primarily a clinic, nursing, rest or convalescent home or similar establishment and is not other than incidentally, a place for alcoholics or drug addicts.
10. Injury means bodily injury caused by an Accident and which shall have occurred solely by and independently of any other causes. Such bodily injury includes injuries resulting in permanent disability or death.
  11. Insured/ Policyholder refers to the parent of the Insured Person who is a Singapore Citizen, Singapore Permanent Resident or foreigner who is holding a valid Employment Pass or Work Permit issued by the authorities in Singapore and is residing in Singapore.
  12. Insured Person refers to the Child of the Insured/ Policyholder, age between 2 months and twenty-one (21) years old and is a Singapore Citizen, Singapore Permanent Resident or a foreigner who is holding a valid Dependent Pass, and is residing in Singapore together with the Insured/ Policyholder.
  13. Loss of Hearing means total and irrecoverable loss of hearing.
  14. Loss of Limb means:
    - (a) In the case of any upper limb loss by physical severance of at least all four fingers in their entirety or permanent total loss of use of any entire arm or hand;
    - (b) In the case of a lower limb loss by physical severance at or above the ankle or permanent total loss of use of an entire leg or foot.
  15. Loss of Speech means total permanent inability to communicate verbally.
  16. Loss of Sight includes total and irrecoverable loss of sight.
  17. Medical Expenses shall include expenses necessarily incurred for Hospital (including room and board), clinical, inpatient and outpatient medical and surgical treatments or other remedial attention, treatment or appliances given or prescribed by a registered Physician or Surgeon as a result of an Injury or due to Infectious Diseases.
  18. Physician or Surgeon refers to a practitioner of occidental medicines registered under the Medical Register of the Ministry of Health, Singapore. Should a claim arise outside of Singapore, Physician or Surgeon shall mean a practitioner of occidental medicines registered under the laws of the country in which the claim arises and no other person.
  19. Pre-existing Condition means any illness, condition, manifestation or symptom:
    - (a) for which the Insured Person had previously received treatment, medication or advice from a Physician; or
    - (b) which the Insured Person was aware of, or should reasonably have been aware of; or
    - (c) which would cause an ordinary prudent person to seek diagnosis, care or test prior to the inception date of Insurance.
  20. Proposal means any signed or electronic proposal form, declaration and any information supplied by You, or on Your behalf, or on behalf of the Insured Person.
  21. Permanent Total Disablement means a state of incapacity caused by an Accident which occurs within six (6) months from the date of Accident and having lasted for a continuous and uninterrupted period of at least twelve (12) consecutive months. It is also confirmed by the Physician or Surgeon that it is not going to improve after twelve (12) months and the Insured Person will not be able to engage in or attending to employment or occupation of any and every kind or where there is no employment or occupation, from attending to an Insured's usual duties.
  22. Third Degree Burn means a burn resulting in the damage or destruction of the skin to its full depth and damage to the tissues beneath.
  23. Traditional Chinese Medicine (TCM) Expenses charged by a registered Chinese Physician shall mean expenses necessarily incurred in relation to treatment by a registered herbalist, acupuncturist or bonesetter registered under the laws of the country in which the claim arises. The attending physician shall not be the Insured Person, or business partner or an employer or employee of the Insured Person or a person who is related to the Insured Person in any way.

## **INSURANCE BENEFITS**

### **Section 1 - Accidental Death**

In the event the Insured Person sustains Injury during the Period of Insurance, which shall directly and independently of any other cause, result in Death within twelve (12) months of the Accident, We will pay You a lump sum Benefit limit as stated in the Policy Schedule.

## Section 2 - Permanent Disablement Benefit

In the event of an Accident during the Period of Insurance, the Insured Person sustains Permanent Disablement as certified by a Physician, We will pay You a percentage of the Capital Sum Insured in the manner described in the Scale of Benefits below, up to the Capital Sum Insured as stated in the Policy Schedule.

<u>Scale of Benefits</u> - Permanent Disablement specified below and certified by a Physician	<u>% of Capital Sum Insured</u>
Permanent Total Disablement or Injury resulting in being permanently bedridden	200%
Permanent Partial Disablement specified below	
1. Loss or one or both arms (between shoulder and wrist)	100%
2. Loss of one or both legs (between hip and ankle)	100%
3. Loss of sight in one or both eyes	100%
4. Loss of sight in one eye except for perception of light	50%
5. Loss of lens of one eye	50%
6. Loss of hearing in both ears	75%
7. Loss or hearing in one ear	15%
8. Loss or speech	50%
9. Loss or four fingers and thumb of one hand	50%
10. Loss of four fingers of one hand	40%
11. Loss of thumb - one phalanx or two phalanges	20%
12. Loss of finger - three phalanges	10%
13. Loss of finger - two phalanges	5%
14. Loss of finger - one phalanx	3%
15. Loss of all toes of one foot	17%
16. Loss of great toe - one phalanx or two phalanges	5%
17. Loss of any toe other than great toe - one phalanx or two phalanges	3%
18. Third Degree Burns	
(a) Head - damage as a percentage of total body surface area	
• equals to or greater than 2% but less than 5%	50%
• equals to or greater than 5% but less than 8%	75%
• equals to or greater than 8%	100%
(b) Body - damage as a percentage of total body surface area	
• equals to or greater than 10% but less than 15%	50%
• equals to or greater than 15% but less than 20%	75%
• equals to or greater than 20%	100%

### Provisions

- (a) Benefit shall only be payable in respect of any one Insured Person under Section 1 or Section 2 in connection with the same Accident and not both;
- (b) On the happening of an Accident give rise to a claim under 100% Permanent Partial Disablement, this Policy shall cease to apply to the Insured Person concerned;
- (c) Benefit payable as a result of one Accident shall not exceed 100% of the Capital Sum Insured for Permanent Disablement for any one Insured Person;
- (d) Benefit payable for loss or loss of use of a whole Limb shall not also include Benefit for parts of that Limb;
- (e) Permanent Total Disablement from gainful employment of any and every kind shall have lasted one hundred and four (104) weeks before Benefit becomes payable;
- (f) No Benefit shall be payable for Loss of Limb or Eye until at least thirteen (13) weeks after the date of the Accident and such Benefit shall only be payable if Death does not happen as a result of the Accident. If a Death Benefit is included but is less than the appropriate Benefit for Loss of Limb or Eye, the amount payable for loss of Limb or Eye shall not exceed the Death Benefit until thirteen (13) weeks have elapsed from the date of Accident and the balance shall then only be payable if the Death Benefit has not in the meantime become payable as a result of the Accident.
- (g) No Benefit shall be payable due solely to inability to take part in sports or pastimes.

## Section 3 - Bereavement Benefit

In the event that Section 1 of this Policy becomes payable, We will pay a lump sum Benefit limit as stated in the Policy Schedule as bereavement to You.

#### Section 4 - Medical and Surgical Expenses

We will reimburse You for the Medical Expenses necessarily incurred by the Insured Person for Injury sustains during the Period of insurance, up to the maximum limit as stated in the Policy Schedule for any one Accident.

##### Extensions

(a) Traditional Chinese Medicine and/or Chiropractic Treatment

This Policy extends to cover the charges necessarily incurred by the Insured Person for consultation and medical treatment by a certified/ registered Physician of Traditional Chinese Medicine or a Chiropractor, as a result of an Injury sustains during the Period of Insurance, subject to a sub-limit for each consultation session and up to the maximum limit as stated in the Policy Schedule.

The total liability of the Company for Traditional Chinese Medicine and/or Chiropractic Treatment shall not exceed the overall limit for Section 4 as stated in the Policy Schedule for any one Accident.

(b) Treatment for Infectious Disease

This Policy extends to cover the Medical Expenses necessarily incurred by the Insured Person for treatment of specified Infectious Diseases stated below contracted during the Period of Insurance. We will pay up to the maximum limit as stated in the Policy Schedule.

##### List of Infectious Diseases

1	Avian Influenza or 'bird flu' due to influenza A viral strains H5N1, H9N2, H7N7, H7N9 or H1N1	11	Monkey Pox
2	Chikungunya Fever	12	Mumps
3	Dengue Fever	13	Nipah Viral Encephalitis
4	Hand, Foot and Mouth Disease	14	Plague
5	Japanese Viral Encephalitis	15	Rabies
6	Legionnaires' Disease	16	Rubella
7	Malaria	17	Severe Acute Respiratory Syndrome (SARS)
8	Measles	18	Tuberculosis
9	Melioidosis or 'soil disease'	19	Variant Creutzfeldt-Jakob Disease (vCJD) or 'Mad Cow Disease'
10	Middle East Respiratory Syndrome Coronavirus (MERS- CoV)	20	Yellow Fever
		21	Zika Virus

This Benefit is payable for each and every diagnosis event during the Period of Insurance, subject to each diagnosis date having a separation period of at least ninety (90) days.

##### Special Exclusions for Section 4(b)

This Policy will not pay for the Medical Expense incurred for:

- (i) diagnosis of Infectious Disease within fourteen (14) days from the inception of this Policy;
- (ii) Infectious Disease which has been announced as an epidemic by the health authority in Singapore or the Government of the Republic of Singapore or a pandemic by the World Health Organisation in the affected country(ies), from the date of announcement until the epidemic or pandemic ends.

#### Section 5 - Fracture and Dislocation

In the event of an Accident during the Period of Insurance, the Insured Person sustains a Fracture bone or Dislocation of a joint and is diagnosed by a Physician with a X-ray report, We will pay You a lump sum Benefit limit as stated in the Policy Schedule per such Injury up to three (3) Accidents in one Period of Insurance.

##### Special Exclusions for Section 5.

This Policy will not pay any claim if:

- (i) the Insured Person has been diagnosed as having osteoporosis prior to the effective date of this Policy;
- (ii) the subsequent Injury is on the same bone or joint.

#### Section 6 - Living Support Allowance

In the event the Insured Person sustains Injury during the Period of Insurance, resulting in being permanently bedridden within ninety (90) days from the date of Accident and is confirmed by the Physician or Surgeon that it is not going to improve after twelve (12) months, We will pay a weekly Living Support Allowance up to one hundred and four (104) weeks or demise of the Insured Person whichever occur first.

#### Special Exclusions for Section 6.

This Policy will not pay the weekly Living Support Allowance:

- (i) beyond one hundred and four (104) weeks for any one Injury; and
- (ii) if proper medical treatment from a Physician or Surgeon is not obtained immediately.

#### **Section 7 - Mobility Aids/ Home Modification**

In the event of an Accident during the Period of insurance, the Insured Person sustains 50% or more Permanent Partial Disablement as shown in the Scale of Benefits in Section 2, We will reimburse You:

- (a) the reasonable cost for purchasing or renting the mobility aids (including but not limited to crutch, wheelchair, motorized equipment or prosthetic equipment such as replacement limbs) or hearing aid as prescribed by a Physician or Surgeon; and/or
- (b) the reasonable cost incurred to modify the Your house where necessary. Such modification work must be completed within three (3) months from the date the Insured Person discharge from the Hospital.

The total liability of the Company for Section 7(a) and (b) shall not exceed the overall limit for Section 7 as stated in the Policy Schedule.

#### Special Exclusions for Section 7

This Policy will not pay any claim under this Section if:

- (i) any mobility or prosthetic aid related to any known medical condition prior to this Accident;
- (ii) the modifications make to a home which the Insured Person does not live in;
- (iii) damages arising from the modification work.

#### **EXCLUSIONS**

We shall not make any payment under any of the Insurance Benefits:

1. Caused by the Insured Person engaging in:
  - (a) activity that the Insured Person is being airborne (whether suspended or not) including hang gliding, parachuting or bungee jumping;
  - (b) flying except Air Travel;
  - (c) mountaineering (reasonably requiring the use of ropes), rock/ cliff climbing and hiking/ trekking in remote areas unless with licensed guides;
  - (d) winter sports except undertaken on a leisure basis;
  - (e) underwater activities requiring the use of artificial breathing apparatus except leisure scuba diving for an Insured Person who is duly qualified and certified as a diver by an internationally recognized diving organisation or unless such Insured Person is at the time of the happening of the event giving rise to a claim actually receiving diving instruction from a duly qualified and certified diving instructor;
  - (f) racing of any kind (other than on foot) or trial of speed or reliability;
  - (g) all forms of professional sports or in any games and sports whereby Insured would earn remunerations, donation, sponsorship or income of any kind.
  - (h) military, naval or air, or other armed force service other than National Service Reservist Training during normal peacetime.
2. Caused or contributed by:
  - (a) suicide or intentional self-injury;
  - (b) Pre-existing Condition;
  - (c) physical or mental defect or infirmity;
  - (d) pregnancy including childbirth, caesarean operation, abortion, miscarriage and all related complications except miscarriage due to an Accident;
  - (e) cosmetic or plastic surgery or any elective surgery or congenital anomalies;
  - (f) dental disease, dental care or surgery;
  - (g) treatment for obesity/ weight related improvement;
  - (h) general check-up, convalescence, custodial or rest cure;
  - (i) any sexually transmitted diseases;
  - (j) AIDS or any related diseases, immunodeficiency disorder or tested positive on an AIDS-related blood test;
  - (k) sickness or disease or bodily injury due to a gradually operating cause;
  - (l) the Insured Person being under the influence of alcohol, unless it can be established to our reasonable satisfaction by any claimant that alcohol was not a factor contributing to the happening of the injury;

- (m) the Insured Person being under the influence of drugs, unless it can be proven that the drug was taken in accordance to proper medical prescription and directions, and not for treatment of drug addiction.
- 3. Caused by war, invasion, act of foreign enemy hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection, or military or usurped power.
- 4. Arising from or in consequence of nuclear reaction, nuclear radiation or radioactive contamination.

## **CONDITIONS**

### **1. Alteration of Risks**

(a) Change in Country of Residence

It is a condition precedent to liability under this Policy that We must be informed in writing of any change in the Your or the Insured Person's Country of Residence. A change in the Country of Residence shall be deemed to mean the Person living or intending to live in another country other than Singapore in excess of twelve (12) consecutive calendar months.

We reserve the right to continue cover on prevailing terms and conditions or decline to continue cover under this Policy upon receipt of such information.

(b) Others

The Policyholder shall give Us immediate notice, in writing of any material alternation affecting the risk insured and or any Injury, disease, physical defect or infirmity by which the Insured Person has become affected and also notice of any other insurance effected against Accident or incapacity.

### **2. Premium**

We reserve the right to make amendments to the premiums based on underwriting considerations by giving You thirty (30) days prior written notice, mailed or delivered to You at the address shown in the Policy or through other electronic communication media.

### **3. Automatic Renewal of Coverage**

Unless We give thirty (30) days prior written notice, mailed or delivered to You at the address shown in the Policy or through other electronic communication media, to reduce limits, increase premiums or eliminate coverage or decline renewal of this Policy on any anniversary date, this Policy will be automatically renewed on the anniversary date of the Policy by the payment of Premium subject otherwise to the Terms and Conditions of this Policy. Our acceptance of premium shall constitute Our consent to renewal. In any event, coverage shall terminate when this Policy terminates.

### **4. Automatic Termination of Coverage**

Coverage under this this Policy will automatically expire and the Policy shall cease:

- (a) On the premium due date when any premium is not paid or when authorisation for payment for any premium is not given by bank processing centre on its due date;
- (b) When the Policy is not renewed in accordance with the provisions stated in Condition 3, on the dates specified therein;
- (c) When the Policy is cancelled by You or Ourselves in accordance with the provisions stated in Condition 6, on the dates specified therein;
- (d) Upon the expiry of the warranty period referred to in the Premium Before Cover Warranty if any premium is not paid on its due date;
- (e) On the date when the Insured Person attains twenty-two (22) years of age;
- (f) Upon the death of Yourself or the Insured Person.
- (g) When the Insured Person ceases to be a resident in Singapore in excess of twelve (12) consecutive calendar months Dependent Pass issued by the authorities in Singapore. In any event, coverage for the Insured Person shall terminate when the Policy terminates.

## 5. Claims

- (a) No claim shall be admissible whilst the Premiums are in arrears. If anything occurs likely to give rise to a claim under this Policy,
- (b) No claim amount payable under this Policy shall carry interest.
- (c) If anything occurs likely to give rise to a claim under this Policy, You, the Insured Person or Insured Person's legal personal representative shall as soon as reasonably possible and in case within thirty (30) days, notify Us in writing and shall when require by Us, with all reasonable speed and at Your, Insured Person or Insured Person's legal personal representative expense give Us such further particulars as We may require.
- (d) As soon as reasonably possible after the occurrence of an Accident, the Insured Person shall avail himself to any medical examination, and in the event of death, We shall be entitled to make a post-mortem examination at Our expenses.
- (e) Either You, the Insured Person or Insured Person's legal personal representative's receipt shall discharge Us and shall have no right to claim from or sue Us. If there is more than one party having an interest You or the Insured Person, the Benefit shall represent the total amount payable in respect of that You or the Insured Person, for all interests covered by this Policy.

## 6. Cancellation

Either party may cancel this Policy by giving thirty (30) days' notice in writing to the other party at its last known address. If We give such notice, You shall become entitled to a proportionate return of premium, otherwise You Insured shall only be entitled to a return of premium in accordance with Our usual short period scale provided that no claim has been made in the then current Period of Insurance.

## 7. Fraud

Any fraud, misstatement or concealment in respect of this insurance or of any claim shall render this Policy null and void and any Benefit due shall be or become forfeited.

## 8. Arbitration

All differences arising out of this Policy shall be referred to the decision of an Arbitrator to be appointed in writing by appointed in writing by each of the parties, within one calendar month after having been required in writing to do so by either of the parties or in case the Arbitrators do not agree, of an Umpire appointed in writing by the Arbitrators before entering upon the reference. The Umpire shall sit with the Arbitrators and preside at their meetings and the making of an award shall be a condition precedent to any right of action against Us. If We disclaim liability to You for any claim hereunder and such claim shall not, within twelve (12) calendar months from the date of such disclaimer, have been referred to arbitration under the provisions herein contained, then the claim shall, for all purposes, be deemed to have been abandoned and shall not thereafter, be recoverable hereunder.

## MEMORANDA APPLICABLE TO THIS POLICY

### 1. Condition Precedent

The validity of this Policy is subject to the condition precedent that:

- (a) or the risk insured, the name insured has never had any insurance terminated in the last twelve (12) months due solely or in part to a breach of any premium payment condition; or
- (b) if the name insured has declared that it has breached any premium payment condition in respect of a previous policy taken up with another insurer in the last twelve (12) months:
  - (i) the named insured has fully paid all outstanding premium for time on risks calculated by the previous insurer based on the customary short period rate in respect of the previous policy; and
  - (ii) a copy of the written confirmation from the previous insurer to this effect is first provided by the named insured to the Company before cover incepts.

### 2. Contracts (Rights of Third Party) Act 2001

It is hereby understood and agreed that a person who is not a party to this Policy contract shall have no right under the Contracts (Rights of Third Parties) Act 2001 to enforce any of its terms.

### **3. Communicable Disease Exclusion (LMA5396)**

- (1) Notwithstanding any provision to the contrary within this policy, this policy does not cover all actual or alleged loss, liability, damage, compensation, injury, sickness, disease, death, medical payment, defence cost, cost, expense or any other amount, directly or indirectly and regardless of any other cause contributing concurrently or in any sequence, originating from, caused by, arising out of, contributed to by, resulting from, or otherwise in connection with a Communicable Disease or the fear or threat (whether actual or perceived) of a Communicable Disease.
- (2) For the purposes of this endorsement, loss, liability, damage, compensation, injury, sickness, disease, death, medical payment, defence cost, cost, expense or any other amount, includes, but is not limited to, any cost to clean-up, detoxify, remove, monitor or test for a Communicable Disease.
- (3) As used herein, a Communicable Disease means any disease which can be transmitted by means of any substance or agent from any organism to another organism where:
  - 3.1 the substance or agent includes, but is not limited to, a virus, bacterium, parasite or other organism or any variation thereof, whether deemed living or not, and
  - 3.2 the method of transmission, whether direct or indirect, includes but is not limited to, airborne transmission, bodily fluid transmission, transmission from or to any surface or object, solid, liquid or gas or between organisms, and
  - 3.3 the disease, substance or agent can cause or threaten bodily injury, illness, emotional distress, damage to human health, human welfare or property damage.

Subject to all other Terms, Conditions and Exclusion of the Policy.

### **4. Free Look Cover**

For a new policy issued to You, We will give You a "Free Look" period of at least fourteen (14) business days from the date You receive the policy document. The policy document is deemed to have been received by You three (3) days after we have dispatched it.

Should You decide not to continue with the insurance purchased, You may return the original policy document to Us within this period and We will refund You premium in full, if You have not made a claim. The "Free Look" period will not apply to policies with a term less than one (1) year. It will also not apply to policy renewals.

### **5. PDPA Clause (Individual)**

In accordance to the provisions of the Personal Data Protection Act 2012 ("PDPA"), the UOI's Privacy Notice shall form part of the terms and conditions of this Policy.

A copy of UOI's Privacy Notice can be found at [www.oui.com.sg](http://www.oui.com.sg)

### **6. Policy Owner's Protection Scheme**

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

### **7. Premium Before Cover Warranty**

- (1) The premium due must be paid to the Insurer (or the intermediary through whom this Policy or Bond was effected) on or before the inception date ("the inception date") or the renewal date of the coverage. Payment shall be deemed to have been effected to the Insurer or the intermediary when one of the following acts takes place:
  - (a) Cash or honoured cheque for the premium is handed over to the Insurer or the intermediary;
  - (b) A credit or debit card transaction for the premium is approved by the issuing bank;
  - (c) A payment through an electronic medium including the internet is approved by the relevant party;
  - (d) A credit in favour of the Insurer or the intermediary is made through an electronic medium including the internet.
- (2) In the event that the total premium due is not paid to the Insurer (or the intermediary through whom this Policy or Bond was effected) on or before the inception date or the renewal date, then the insurance shall not attach and

no benefits whatsoever shall be payable by the Insurer. Any payment received thereafter shall be of no effect whatsoever as cover has not attached.

- (3) In respect of insurance coverage with Free Look provision, the policyholder may return the original policy document to the Insurer or intermediary within the Free Look period if the policyholder decides to cancel the cover during the Free Look period. In such an event, the policyholder will receive a full refund of the premium paid to the Insurer provided that no claim has been made under the insurance and the cover shall be treated as if never put in place. Free Look provision does not apply to Bond.

#### **8. Nuclear/ Chemical/ Biological Terrorism Exclusion**

It is agreed that, regardless of any contributory cause(s), this Policy does not cover any claims(s) in any way caused or contributed to by an act of terrorism involving the use or release or the threat thereof of any nuclear weapon or device or chemical or biological agent.

For the purpose of this exclusion an act of terrorism means an act, including but not limited to the use of force or violence and/or the threat thereof, of any person or group(s) of persons, whether acting alone or on behalf of or in connection with any organization(s) or government(s), committed for political, religious, ideological or ethnic purposes or reasons including the intention to influence any government and/or to put the public, or any section of the public, in fear.

If the Company alleges that by reason of this exclusion any claim is not covered by this policy the burden of proving the contrary shall be upon the Insured.

#### **9. Sanction Limitation and Exclusion Clause**

No Insurer shall be deemed to provide cover and No Insurer shall be liable to pay any claim or provide any benefit hereunder to the extent that the provision of such cover, payment of such claim or provision of such benefit would expose that Insurer to any Sanction, Prohibition or Restriction under United Nations Resolutions or the Trade or Economic Sanctions, Laws or Regulations of Singapore, The European Union, United Kingdom or United States of America.