

ANDA INSURANCE AGENCIES PTE LTD

1 King George's Avenue #06-00 Rehau Building Singapore 208557 Tel: 6534 2288 Email: enquiries@anda.com.sg Co. Reg. No.: 197903504K



Underwritten by:

eProtect Helper Insurance Policy Wording

Emergency Medical Assistance Provider: HENG-GREF INTERNATIONAL ASSISTS PTE. LTD. (24-hour Hotline: 6272 6018)

Your eProtect Helper policy is a Contract between You and Etiqa Insurance Pte. Ltd. and it consists of:

- this Policy document
- the Policy Schedule, which states Your details, the type of cover and Period of Insurance
- any Endorsement
- the application form, declaration and any other information given, which form the basis of this Contract.

We shall provide the respective Insurance in the terms set out in this Policy, provided that You pay the premium in full and We agree to accept it.

The conditions which appear in this Policy, Schedule and Endorsement, if any, are part of the contract and must be complied with. Failure to comply may mean that You shall not be able to claim under this Policy.

This hospital and surgical plan meets the Ministry of Manpower's minimum requirements for S Pass and Work Permit holders.

Eligibility

This Policy is only available to You if You:

- are a Singapore resident, living in Singapore;
- (b) employ a foreign domestic helper and she will be holding a valid work permit issued by Singapore's Ministry of Manpower; and
- have fully paid Your premium. (c)

Section 1: Letter of Guarantee

We will provide a Letter of Guarantee to the Ministry of Manpower in Singapore on your behalf to replace the \$\$5,000 cash deposit which you are required to deposit (as a form of security) in respect of your Foreign Domestic Helper.

In the event of a demand by the Ministry of Manpower, You are obliged to fully indemnify Us against any claims and expenses which We have incurred under this Guarantee.

Section 2: Personal Accident (Worldwide Cover)

Benefit A - Accidental Death

If Your Foreign Domestic Helper sustains Bodily Injury during the Period of Insurance which solely and directly causes Her death within 12 months of the Accident, We will pay to Her estate or legal personal representative 100% of the Sum Insured applicable to the Selected Plan.

Benefit B - Permanent Disablement

If Your Foreign Domestic Helper sustains Bodily Injury during the Period of Insurance which solely and directly causes Her Permanent Disablement within 12 months of the Accident, We will pay to Her or Her legal personal representative a proportion of the Sum Insured as stated in the Table of Compensation:

Table of Compensation

Permanent Disablement	Proportion of the Sum Insured	
 (c) Total and permanent (d) Total paralysis (e) Injuries resulting in b (f) Loss of hand at wrist (g) Loss of arm at shoul 	or of all fingers and both thumbs toss of sight of both eyes eing permanently bedridden der; between shoulder and elbow; at and below shoulder watween knee and hip; below knee	100%
Loss of	four fingers and thumb of one handfour fingers of one hand	50% 40%
Loss of thumb	both phalangesone phalanx	25% 10%

Loss of any finger	 three phalanges 	10%
	two phalanges	7%
	one phalanx	3%
Loss of metacarpals	first or second (additional)	3%
	third, fourth or fifth (additional)	2%
Loss of toes	all	15%
	 great, both phalanges 	5%
	great, one phalanx or any other toes	2%
Loss of Hearing	both ears	75%
	one ear	20%
Loss of Speech		50%
Loss of Sight	 sight of one eye, except perception of light or lens of one eye (our maximum liability is limited to 50% if both losses occur together) 	50%

What We do not cover under Benefit A and B

- 1. If the Permanent Disablement or death is caused directly or indirectly by Illness. For example, We will not pay a claim if Your Foreign Domestic Helper dies from a heart attack or a stroke.
- 2. If the Permanent Disablement or death is caused directly or indirectly by any physical disability which existed before the commencement of the Policy.

Benefit C - Accidental Medical Expenses

If Your Foreign Domestic Helper sustains Bodily Injury during the Period of Insurance which requires Medically Necessary outpatient treatment by a Doctor within 12 months of the Accident, We will reimburse the medical expenses up to the specified limit applicable to the Selected Plan.

This benefit is extended to cover an Accident occurring overseas only if Your Foreign Domestic Helper is travelling along with You or Your household members residing with You.

Benefit D - Traditional Chinese Medicine (TCM) Treatment

If Your Foreign Domestic Helper sustains Bodily Injury during the Period of Insurance which requires outpatient TCM treatment by a licensed Chinese physician within 12 months of the Accident, We will reimburse the TCM expenses up to the specified limit applicable to the Selected Plan.

Special conditions applicable to Section 2:

- 1. The total amount paid under Benefit B (Permanent Disablement) shall not exceed the Sum Insured specified under Section 2.
- 2. If a claim is payable for Loss of a whole member of the body, then no benefit shall be payable for Loss of parts of that member.
- 3. A valid claim made for Benefit A or for the maximum payable under Benefit B shall discharge Us from any further claim under Section 2 except for expenses incurred under Benefit C and/or Benefit D arising from the same Accident.
- 4. Any payment made under Benefit A (Accidental Death) will be reduced by any compensation due or already paid under Benefit B (Permanent Disablement) in respect of the same Accident.
- 5. In the event of Permanent Disablement not specified in the Table of Compensation above, the percentage of compensation will be assessed at Our discretion. We will not pay any benefit for losing sense of taste or smell.
- 6. For the same Accident, medical expenses may be claimed under Section 2 or Section 4 but not from both sections.

Section 3: Repatriation Expenses

We will pay for the repatriation expenses up to the specified limit applicable to the Selected Plan:

- 1. to send Your Foreign Domestic Helper back to Her Home Country in the event of Permanent Disablement or following a Serious Illness or Serious Injury; or
- 2. for burial or cremation in the locality where death occurs following Bodily Injury or Illness; or
- 3. to transport Her mortal remains or ashes to Her Home Country in the event of death. The cost of cremation will be covered under this Section.

Provided always that:

- (a) We will only pay for the repatriation expenses that are incurred overseas if Your Foreign Domestic Helper is travelling with You or Your household members residing with You. In such instance, Our maximum liability shall be the equivalent cost of transporting Her mortal remains or ashes from Singapore to Her Home Country.
- (b) No payment will be made under this Section if death or Permanent Disablement is caused directly or indirectly by You or any of Your household members residing with You.
- (c) Only "Silver Plan", "Gold Plan" and "Platinum Plan" cover repatriation expenses for death or Permanent Disablement due to any cause, including suicide and/or unexplained causes.

The limit of coverage under this Section will be unlimited (except for "Basic Plan") if the services are performed by Our appointed Service Provider (Heng-Gref International Assists Pte. Ltd.), otherwise the coverage is up to the specified limit applicable to the Selected Plan.

This benefit will apply, within the limits provided under this Section, in the event that Your Foreign Domestic Helper is infected with Covid-19.

Section 4: Hospitalisation and Surgical Expenses

We will reimburse the Medically Necessary hospitalisation and surgical expenses that You incur up to the specified limit applicable to the Selected Plan in the event Your Foreign Domestic Helper is confined in a Hospital as an Inpatient or for Day Surgery during the Period of Insurance as a result of Bodily Injury or Illness. Under "Basic Plan", the Insured will have to co-pay 25% for claim amounts above the first \$\$15,000.

- 1. In respect of the hospitalisation and surgical expenses, the cover will be based on a class-C ward in a public Hospital in Singapore, or class-B2 ward if the class-C ward is not available.
- 2. In the event that Your Foreign Domestic Helper is admitted to a ward higher than class-B2 in a public Hospital, We will apply the relevant 'pro-ration factor' to the hospitalisation and surgical expenses being claimed, in accordance to the percentage shown in the pro-ration table. This means that the amount paid is calculated by multiplying the relevant pro-ration factor against the actual expenses bring claimed.

Pro-ration Table

Type of Hospital	Type of Hospital Ward	Max Limit Payable
	B2 and below	100%
Any public or restructured Hospital	B1	70%
in Singapore	A2	60%
	A1	50%
Any private Hospital in Singapore	All ward types	40%
Any Hospital outside Singapore	All ward types	40%

- 3. For hospitalisation and surgical expenses incurred overseas, We will pay only if Your Foreign Domestic Helper was travelling with You or Your household members residing with You.
- 4. Hospitalisation and surgical expenses will include the following:
 - a) Inpatient Hospital Charges
 - Charges for room accommodation including meals and general nursing services for each day of confinement in the Hospital.
 - Charges for medical-related services including prescribed drugs, diagnostic procedures, ancillary service and consumable items.
 - Charges for surgery as an Inpatient or Day Surgery by a Doctor at a Hospital or an outpatient medical clinic.
 - b) Pre-Hospitalisation Diagnostic Services
 - Charges for diagnostic and laboratory tests recommended in writing by the attending Doctor, and incurred within
 ninety (90) days before Hospitalisation as an Inpatient (or for Day Surgery) for treatment of the same Bodily Injury or
 Illness.
 - c) Post-Hospitalisation Treatment
 - Charges incurred for follow-up treatment within ninety (90) days immediately following discharge from Hospital as an Inpatient (or for Day Surgery) for treatment of the same Bodily Injury or Illness but excluding charges for medicines or drugs prescribed for use beyond ninety (90) days after such discharge.

Provided always that:

- (a) Recurrent attacks, symptoms, complications or readmission to Hospital arising from the same initial cause within 90 days from date of discharge from the Hospital shall be considered as one Illness or Bodily Injury.
- (b) Our maximum liability for the Period of Insurance shall not exceed the limit stated in the Policy Schedule.
- (c) For the same cause, medical expenses may be claimed under Section 2 or Section 4 but not from both sections.

COVID-19 Insurance

This Section is extended to cover the Insured Person if she is diagnosed with COVID-19. We will only pay the hospital and surgical expenses incurred for her COVID-19 treatment, up to the limit shown in the schedule under this Section. The Insured Person must stay in a restructured hospital or community care facilities as directed by Singapore's Ministry of Health. Any treatment in a private hospital, medical centre or clinic is not covered.

Infectious Disease Cover

This Section is extended to cover the Insured Person for any medically necessary Hospitalisation & Surgical Expenses for Infectious Disease up to the total sum insured limit stated in the Schedule under this Section.

What we will not cover under this Section

In addition to the General Exclusions, We will also not pay any claims in respect of:

- 1. any Pre-existing Condition unless Your Foreign Domestic Helper has been continually insured under any other foreign domestic helper insurance policy with any insurance company in Singapore for not less than the preceding twelve (12) months. This exclusion does not apply for Covid-19 infection.
- 2. medical appliances, cosmetic treatment of any kind of treatment undertaken as a preventive measure including vaccination or inoculation
- 3. hospitalisation primarily for diagnosis, x-ray examinations or health check-ups or any other tests where there is no objective indication of impairment of normal health or any treatment of a preventive nature including acupuncture or any treatment which is not Medically Necessary.
- 4. charges for non-medical items (such as telephone, television, newspaper, guests' meals) whilst being Hospitalised.
- 5. circumcision unless Medically Necessary, eye tests, implants, medical appliances and prosthetic devices, including spectacles,

- hearing aids, wheelchairs and lenses.
- 6. medical expenses recoverable under the Work Injury Compensation Insurance or a similar Act of Ordinance.
- 7. any dental treatment or non-surgical eye treatment of any kind unless necessitated by Bodily Injury.
- 8. Any mandatory COVID-19 swab tests that the Insured Person is required to take for entry into or exit from Singapore, including pre-departure and post-arrival tests.

Section 5: Outpatient Cancer Treatment and/or Outpatient Kidney Dialysis Treatment

We will reimburse the charges up to the specified limit applicable to the Selected Plan incurred when Your Foreign Domestic Helper seeks Medically Necessary outpatient cancer treatment and/or kidney dialysis.

We will only pay for claims from either Section 5 or Section 6 for the same cause but not from both sections.

The following are excluded under Outpatient Kidney Dialysis benefit:

- 1. Complications that arise out of or in connection to kidney dialysis; and
- 2. Acquisition costs of any machine and equipment for kidney dialysis or peritoneal dialysis.

Section 6: Critical Illnesses Benefit

We will pay the lump sum benefit to Your Foreign Domestic Helper or Her legal personal representative if She is unequivocally diagnosed by a Doctor during the Period of Insurance to have suffered one of the Critical Illnesses listed under this Section.

We will pay the benefit under this Section only for the first instance of Critical Illness suffered by Your Foreign Domestic Helper after the commencement of this Policy and only once during the lifetime of this policy and after Your Foreign Domestic Helper has survived thirty (30) days from the date of confirmed diagnosis.

The following Critical Illnesses are covered under this Section up to the limit of benefit stated in the Schedule:

1. Major Cancers

A malignant tumour positively diagnosed with histological confirmation and characterised by the uncontrolled growth of malignant cells with invasion and destruction of normal tissue. The term malignant tumour includes leukaemia, lymphoma and sarcoma.

Major Cancer diagnosed on the basis of finding tumour cells and/or tumour-associated molecules in blood, saliva, faeces, urine or any other bodily fluid in the absence of further definitive and clinically verifiable evidence does not meet the above definition.

For the above definition, the following are excluded:

- a) All tumours which are histologically classified as any of the following:
 - Pre-malignant;
 - Non-invasive;
 - Carcinoma-in-situ (Tis) or Ta;
 - Having borderline malignancy;
 - Having any degree of malignant potential;
 - Having suspicious malignancy;
 - Neoplasm of uncertain or unknown behavior; or
 - All grades of dysplasia, squamous intraepithelial lesions (HSIL and LSIL) and intra epithelial neoplasia;
- b) Any non-melanoma skin carcinoma, skin confined primary cutaneous lymphoma and dermatofibrosarcoma protuberans unless there is evidence of metastases to lymph nodes or beyond;
- c) Malignant melanoma that has not caused invasion beyond the epidermis;
- d) All Prostate cancers histologically described as T1N0M0 (TNM Classification) or below; or
- e) Prostate cancers of another equivalent or lesser classification;
- f) All Thyroid cancers histologically classified as T1N0M0 (TNM Classification) or below;
- g) All Neuroendocrine tumours histologically classified as T1N0M0 (TNM Classification) or below;
- h) All tumours of the Urinary Bladder histologically classified as T1N0M0 (TNM Classification) or below;
- i) All Gastro-Intestinal Stromal tumours histologically classified as Stage I or IA according to the latest edition of the AJCC Cancer Staging Manual, or below;
- j) Chronic Lymphocytic Leukaemia less than RAI Stage 3;
- k) All bone marrow malignancies which do not require recurrent blood transfusions, chemotherapy, targeted cancer therapies, bone marrow transplant, haematopoietic stem cell transplant or other major interventionist treatment; and
- I) All tumours in the presence of HIV infection.

2. Heart Attack of Specified Severity

Death of heart muscle due to ischaemia, that is evident by at least three of the following criteria proving the occurrence of a new heart attack:

- a) History of typical chest pain;
- b) New characteristic electrocardiographic changes; with the development of any of the following: ST elevation or depression, T wave inversion, pathological Q waves or left bundle branch block;
- c) Elevation of the cardiac biomarkers, inclusive of CKMB above the generally accepted normal laboratory levels or Cardiac Troponin T or I at 0.5ng/ml and above;
- d) Imaging evidence of new loss of viable myocardium or new regional wall motion abnormality. The imaging must be done

by Cardiologist specified by Us.

For the above definition, the following are excluded:

- a) Angina;
- b) Heart attack of indeterminate age; and
- c) A rise in cardiac biomarkers or Troponin T or I following an intra-arterial cardiac procedure including, but not limited to, coronary angiography and coronary angioplasty.

Explanatory note: 0.5ng/ml = 0.5ug/L = 500pg/ml

3. Stroke with Permanent Neurological Deficit

A cerebrovascular incident including infarction of brain tissue, cerebral and subarachnoid haemorrhage, intracerebral embolism and cerebral thrombosis resulting in permanent neurological deficit with persisting clinical symptoms. This diagnosis must be supported by all of the following conditions:

- Evidence of permanent neurological deficit confirmed by a neurologist at least 6 weeks after the event; and
- Findings on Magnetic Resonance Imaging, Computerised Tomography, or other reliable imaging techniques consistent with the diagnosis of a new stroke.

The following are excluded:

- Transient Ischaemic Attacks;
- Brain damage due to an accident or injury, infection, vasculitis and inflammatory disease;
- Vascular disease affecting the eye or optic nerve;
- Ischaemic disorders of the vestibular system; and
- Secondary haemorrhage within a pre-existing cerebral lesion.

4. Coronary Artery Bypass Surgery

The actual undergoing of open-chest surgery or Minimally Invasive Direct Coronary Artery Bypass surgery to correct the narrowing or blockage of one or more coronary arteries with bypass grafts. This diagnosis must be supported by angiographic evidence of significant coronary artery obstruction and the procedure must be considered medically necessary by a consultant cardiologist.

Angioplasty and all other intra-arterial, catheter-based techniques, 'keyhole' or laser procedures are excluded.

5. Coma

A coma that persists for at least 96 hours. This diagnosis must be supported by evidence of all of the following:

- a) No response to external stimuli for at least 96 hours;
- b) Life support measures are necessary to sustain life; and
- c) Brain damage resulting in permanent neurological deficit which must be assessed at least 30 days after the onset of the

For the above definition, medically induced coma and coma resulting directly from alcohol or drug abuse are excluded.

6. Deafness (Irreversible Loss of Hearing)

Total and irreversible loss of hearing in both ears as a result of illness or accident. This diagnosis must be supported by audiometric and sound-threshold tests provided and certified by an Ear, Nose, Throat (ENT) specialist.

Total means "the loss of at least 80 decibels in all frequencies of hearing".

Irreversible means "cannot be reasonably restored to at least 40 decibels by medical treatment, hearing aid and/or surgical procedures consistent with the current standard of the medical services available in Singapore after a period of 6 months from the date of intervention."

7. Irreversible Loss of Speech

Total and irreversible loss of the ability to speak as a result of injury or disease to the vocal cords. The inability to speak must be established for a continuous period of 12 months. This diagnosis must be supported by medical evidence furnished by an Ear, Nose, Throat (ENT) specialist.

All psychiatric related causes are excluded.

8. Multiple Sclerosis

The definite diagnosis of Multiple Sclerosis and must be supported by all of the following:

- a) Investigations which unequivocally confirm the diagnosis to be Multiple Sclerosis; and
- b) Multiple neurological deficits which occurred over a continuous period of at least 6 months.

Other causes of neurological damage such as SLE and HIV are excluded.

9. Muscular Dystrophy

The unequivocal diagnosis of muscular dystrophy must be made by a consultant neurologist. The condition must result in the inability of the Life Assured to perform (whether aided or unaided) at least 3 of the 6 "Activities of Daily Living" for a continuous period of at least 6 months.

For the purpose of this definition, "aided" shall mean with the aid of special equipment, device and/or apparatus and not pertaining to human aid.

10. Paralysis (Irreversible Loss of Use of Limbs)

Total and irreversible loss of use of at least 2 entire limbs due to injury or disease persisting for a period of at least 6 weeks and with no foreseeable possibility of recovery. This condition must be confirmed by a consultant neurologist.

Self-inflicted injuries are excluded.

11. Fulminant Hepatitis

A submassive to massive necrosis of the liver by the Hepatitis virus, leading precipitously to liver failure. This diagnosis must be supported by all of the following:

- a) Rapid decreasing of liver size as confirmed by abdominal ultrasound;
- b) Necrosis involving entire lobules, leaving only a collapsed reticular framework;
- c) Rapid deterioration of liver function tests;
- d) Deepening jaundice; and
- e) Hepatic encephalopathy.

12. Motor Neurone Disease

Motor neurone disease characterised by progressive degeneration of corticospinal tracts and anterior horn cells or bulbar efferent neurones which include spinal muscular atrophy, progressive bulbar palsy, amyotrophic lateral sclerosis and primary lateral sclerosis. This diagnosis must be confirmed by a neurologist as progressive and resulting in permanent neurological deficit.

13. Benign Brain Tumour

Benign brain tumour means a non-malignant tumour located in the cranial vault and limited to the brain, meninges or cranial nerves where all of the following conditions are met:

- a) It is life threatening:
- b) It has caused damage to the brain;
- c) It has undergone surgical removal or, if inoperable, has caused a permanent neurological deficit; and
- d) Its presence must be confirmed by a neurologist or neurosurgeon and supported by findings on Magnetic Resonance Imaging, Computerised Tomography, or other reliable imaging techniques.

The following are excluded:

- Cvsts:
- Abscess;
- · Angioma;
- Granulomas;
- · Vascular Malformations;
- · Haematomas; and
- · Tumours of the pituitary gland, spinal cord and skull base.

14. Severe Encephalitis

Severe inflammation of brain substance (cerebral hemisphere, brainstem or cerebellum) and resulting in permanent neurological deficit which must be documented for at least 6 weeks. This diagnosis must be certified by a consultant neurologist, and supported by any confirmatory diagnostic tests.

Encephalitis caused by HIV infection is excluded.

15. Poliomvelitis

The occurrence of Poliomyelitis where the following conditions are met:

- a) Poliovirus is identified as the cause,
- b) Paralysis of the limb muscles or respiratory muscles must be present and persist for at least 3 months.

The diagnosis must be confirmed by a consultant neurologist or specialist in the relevant medical field.

16. Severe Bacterial Meningitis

Bacterial infection resulting in severe inflammation of the membranes of the brain or spinal cord resulting in significant, irreversible and permanent neurological deficit. The neurological deficit must persist for at least 6 weeks. This diagnosis must be confirmed by:

- a) The presence of bacterial infection in cerebrospinal fluid by lumbar puncture; and
- b) A consultant neurologist.

Bacterial Meningitis in the presence of HIV infection is excluded.

17. Angioplasty & other Invasive Treatment for Coronary Artery

The actual undergoing of balloon angioplasty or similar intra-arterial catheter procedure to correct a narrowing of minimum 60% stenosis, of one or more major coronary arteries as shown by angiographic evidence. The revascularisation must be considered medically necessary by a consultant cardiologist.

Coronary arteries herein refer to left main stem, left anterior descending, circumflex and right coronary artery.

Payment under this condition is limited to 10% of the Sum Assured under this policy subject to a S\$25,000 maximum sum payable. This benefit is payable once only and shall be deducted from the amount of this Contract, thereby reducing the amount

of the Sum Assured which may be payable herein.

Diagnostic angiography is excluded.

18. Progressive Scleroderma

A systemic collagen-vascular disease causing progressive diffuse fibrosis in the skin, blood vessels and visceral organs. This diagnosis must be unequivocally confirmed by a consultant rheumatologist and supported by biopsy or equivalent confirmatory test, and serological evidence, and the disorder must have reached systemic proportions to involve the heart, lungs or kidneys.

The following are excluded:

- a) Localised scleroderma (linear scleroderma or morphea);
- b) Eosinophilic fascitis; and
- c) CREST syndrome.

19. Systemic Lupus Erythematosus with Lupus Nepheritis

The unequivocal diagnosis of Systemic Lupus Erythematosus (SLE) based on recognised diagnostic criteria and supported with clinical and laboratory evidence. In respect of this contract, systemic lupus erythematosus will be restricted to those forms of systemic lupus erythematosus which involve the kidneys (Class III to Class VI Lupus Nephritis, established by renal biopsy, and in accordance with the RPS/ISN classification system). The final diagnosis must be confirmed by a certified doctor specialising in Rheumatology and Immunology.

The RPS/ISN Classification of Lupus Nephritis:

Class I	Minimal mesangial lupus nephritis
Class II	Mesangial proliferative lupus nephritis
Class III	Focal lupus nephritis (active and chronic; proliferative and sclerosing)
Class IV	Diffuse lupus nephritis (active and chronic; proliferative and sclerosing; segmental and global)
Class V	Membranous lupus nephritis
Class VI	Advanced sclerosis lupus nephritis

20. Loss of Independent Existence

A condition as a result of a disease, illness or injury whereby the Life Assured is unable to perform (whether aided or unaided) at least 3 of the 6 "Activities of Daily Living", for a continuous period of 6 months.

This condition must be confirmed by Our approved doctor.

Non-organic diseases such as neurosis and psychiatric illnesses are excluded.

For the purpose of this definition, "aided" shall mean with the aid of special equipment, device and/or apparatus and not pertaining to human aid.

What we do not cover under this Section

In addition to the General Exclusions, We will also not pay any claims in respect of:

- 1. Any Critical Illness diagnosed within 30 days of commencement of cover of this policy.
- 2. Cancer, coronary artery bypass surgery and heart attack if the condition is diagnosed within the first ninety (90) days from the commencement of cover under the Policy.
- 3. Death of the Foreign Domestic Helper within thirty (30) days from the date of diagnosis of the Critical Illness.

Section 7: Wages Reimbursement

We will compensate You the wages of Your Foreign Domestic Helper up to the specified limit applicable to the Selected Plan for the period when She is confined in a Hospital due to Illness or Bodily Injury.

Provided always that:

- (a) Your claim under hospitalisation and surgical expenses (Section 4) becomes payable.
- (b) This benefit is payable for each completed twenty-four (24) hours of Hospitalisation.
- (c) There will be no payment if Hospitalisation is caused directly or indirectly by Your deliberate act or that of Your household members residing with You.

This benefit will apply, within the limits provided under this Section, in the event that Your Foreign Domestic Helper is infected with Covid-19.

Section 8: Re-hiring Expenses

We will reimburse the employment agency charges up to the specified limit applicable to the Selected Plan that You incur to hire a replacement Foreign Domestic Helper in the event the services of Your Foreign Domestic Helper has to be terminated due to Serious Illness or Serious Injury which prevents Her from carrying out Her employment duties as certified by the attending Doctor.

Provided always that:

(a) You have obtained Our written agreement for all such expenses prior to incurring; and

- (b) The replacement Foreign Domestic Helper is employed within 90 days of the termination of Your Foreign Domestic Helper.
- (c) The replacement Foreign Domestic Helper is not a resident of Singapore.
- (d) The termination of the services of Your Foreign Domestic Helper is not caused directly or indirectly by Your deliberate act or that of Your household members residing with You.

This benefit will apply, within the limits provided under this Section, in the event that Your Foreign Domestic Helper is infected with Covid-19.

Section 9: Foreign Domestic Helper's Liability to Third Party

We will indemnify You against any costs of litigation up to the specified limit applicable to the Selected Plan if You become legally liable as a result of the negligence of Your Foreign Domestic Helper whilst in the course of Her employment with You which causes Bodily Injury or death to a third party and/or accidental damage to the third party's property within the Period of Insurance.

What We do not cover under this Section

In addition to the General Exclusions, We will also not pay any claims in respect of:

- Any agreement made between You, Your Foreign Domestic Helper and the third party unless liability would have existed in the absence of such agreement.
- 2. Any wilful or malicious act.
- 3. The ownership or use of any motor vehicle, watercraft or aircraft including firearms.
- 4. Alterations, additions or repair works.
- 5. Liquidated damages awarded under any penalty clause or any punitive or exemplary damages.
- 6. Any liability occurring in USA or Canada.
- 7. Any judgement that is not in the first instance delivered by a Singapore court.
- 8. Liability to any Interested Party.
- 9. Injury, sickness, death or destruction caused intentionally by Your Foreign Domestic Helper.
- 10. Liability arising out of any Communicable Disease that Your Foreign Domestic Helper transmits.

Section 10: Special Grant

We will pay the lump sum benefit to the legal personal representative of Your Foreign Domestic Helper towards the costs of the funeral if Your Foreign Domestic Helper suffers death, including death arising from Covid-19 infection during the Period of Insurance.

Section 11: Optional Benefits

We shall pay You these benefits up to the specified limit if You have opted in during the application of this insurance for which You have paid additional premiums and are reflected in the Policy Schedule:

1. Add-on 1: Security Bond Protector

We will waive Our rights of indemnification against You in the event of a demand made by the Ministry of Manpower in Singapore on the Letter of Guarantee (issued under Section 1) arising from the breach by Your Foreign Domestic Helper.

What We do not cover under this Benefit

In addition to the General Exclusions, We will also not pay any claims in respect of:

- (a) Any breach by You of the conditions of the Security Bond imposed by the Ministry of Manpower.
- (b) Any loss of which You are aware of prior to the effective date of the Policy.
- (c) Any loss that You incurred within the first thirty (30) days from the effective date of the Policy. This exclusion will not apply if the effective date of the Policy is the same as that of the Letter of Guarantee.
- (d) Any loss arising out of any circumstance caused directly or indirectly by You or Your household members residing with You.
- (e) Any excess that You have to be liable for as stated in the Policy Schedule.

2. Add-on 2: Additional Benefits

i) Daily Hospital Allowance

We will pay Your Foreign Domestic Helper the daily hospital allowance for each completed twenty-four (24) hours for Her recuperation use as stated in the Policy Schedule if She is Hospitalised in Singapore for at least three (3) completed 24-hour days because of an Illness or Bodily Injury. We will not pay if Your Foreign Domestic Helper is Hospitalised outside Singapore.

ii) Alternative Maid Services

We will reimburse You the expenses incurred for hiring temporary maid services for the period when Your Foreign Domestic Helper is Hospitalised in Singapore due to an Illness or Bodily Injury, up to the specified limit applicable to the Selected Plan.

iii) Ambulance Fees

We will pay for actual ambulance charges up to the specified limit applicable to the Selected Plan to transport Your Foreign Domestic Helper to a Hospital arising from an Accident.

iv) Fidelity Guarantee

We will reimburse You against the loss of Household Contents up to the specified limit applicable to the Selected Plan as the direct result of any act of fraud or dishonesty committed by Your Foreign Domestic Helper during the Period of Insurance.

Provided always that

- (a) We will pay up to a maximum limit of \$\$200.00 for loss of cash during the Period of Insurance;
- (b) the act of dishonesty must be discovered during the Period of Insurance or within 90 days after Your Foreign Domestic Helper has left Your employ, whichever is the earliest;
- (c) the loss must be reported to Us and the Police within 24 hours of the discovery;
- (d) it is Your duty to prove that the loss is a direct result of the act of fraud or dishonesty committed by Your Foreign Domestic Helper.

This insurance does not cover claims arising directly or indirectly in connection with:

- items insured under a separate insurance policy or reimbursable by other means;
- mysterious disappearances of Household Contents.

The benefits (except Fidelity Guarantee) will apply, within the limits provided under Add-on 2, in the event that Your Foreign Domestic Helper is infected with Covid-19.

3. Add-on 3: Dental Care

If Your Foreign Domestic Helper suffers from tooth decay resulting in an oral cavity, We will pay the Medically Necessary charges for dental treatment, up to the specified limit applicable to the Selected Plan:

Benefits (Per Period of Insurance)		Max Payable limit	
		Plan 1	Plan 2
(a)	Extraction of tooth (non-surgical), up to 2 teeth		
(b)	Amalgam or composite/resin fillings (permanent), up to 2 teeth	\$1,000	\$3,000
(c)	Inter-oral films or panoramic X-ray, up to 1 set		

Provided always that:

- (a) Treatment must be provided by a Dentist in Singapore; and
- (b) You pay a Co-Payment of twenty percent (20%) of the total expenses incurred for dental treatment for each and every claim; and
- (c) The claim must be supported by a receipt issued by the Dentist stating the covered treatment.

Co-Payment refers to the amount that You co-pay on the admissible claimable amount made under the Policy.

What We do not cover under this Benefit

In addition to the General Exclusions, We will also not pay any claims in respect of:

- (a) Routine and preventive treatment procedures like check-ups, X-rays except for the purpose of tooth extraction, scaling and polishing:
- (b) Root canal, crowning treatment;
- (c) Where a Dentist has not certified the dental treatment as Medically Necessary;
- (d) Dental treatment due to tooth or gum or oral diseases or from normal wearing out of the tooth;
- (e) Cosmetic dental procedures under any circumstances;
- (f) Expenses incurred after the expiry of the Period of Insurance.

4. Add-on 4: In-Hospital Psychiatric Care

If Your Foreign Domestic Helper is diagnosed to suffer from a Psychiatric Condition and is referred by the attending Doctor for Inpatient treatment in Singapore, We will pay the Medically Necessary charges up to the specified limit applicable to the Selected Plan:

Benefits (Per Period of Insurance)	Max Payable Limit	
In-hospital Psychiatric Care	<u>Plan 1</u> \$3,000	<u>Plan 2</u> \$5,000

Provided always that:

- (a) Treatment must be provided by a duly qualified and licensed psychiatrist and in a public Hospital in Singapore.
- (b) The claim must be supported by a diagnostic report issued by the psychiatrist stating the existence of the medical condition.

Psychiatric Condition refers to a mental illness diagnosed by a psychiatrist that affects the mood, thinking and behaviour. Examples of mental illness include depression, schizophrenia, panic and bipolar disorders, obsessive compulsive and personality disorders.

What We do not cover under this Benefit

In addition to the General Exclusions, We will also not pay any claims in respect of:

- (a) Costs of pre-Hospitalisation and post-Hospitalisation treatment;
- (b) Care and treatment of any emotional, personality, mental and nervous disorders including depression except when admitted as an Inpatient and treated by a psychiatrist in a Hospital;
- (c) Expenses incurred after the expiry of the Period of Insurance.

Section 12: Definitions

	Terms	Meanings
1	Accident	A sudden and unforeseen event that solely and independently results in Bodily Injury,
<u> </u>	Accident	disablement or death and which is not caused by any Illness or medical condition.
2		Damage or harm caused to the body by an external force sustained during the Period of Insurance and is caused solely by an Accident and excludes all medical conditions including
	Bodily Injury	bacterial or viral infections even if such conditions resulted from or were in some way connected
		with the Accident.
		The definitive diagnosis of any infectious diseases including COVID-19 by a qualified Doctor
		during the Period of Insurance and is supported by acceptable clinical, radiology, histological and laboratory evidence.
3	Infectious Disease	For the avoidance of doubt, COVID-19 is defined as an Infectious Disease named by the World
		Health Organistion as "COVID-19" and caused by the severe acute respiratory syndrome
		SARS-SOV-2. Procedures or treatments by Doctor or surgeon and which does not require an overnight
4	Day Surgery	Hospital stay.
		A person legally qualified by a medical degree in dentistry and is practicing within the scope of
5	Dentist	his/her licensing and training. The Dentist cannot be You, Your business partner, Your
		employer or employee or a person related to You by blood, marriage or adoption. A registered medical practitioner in western medicine who is practicing as a general practitioner
		or specialist within the scope of his license according to the laws of the country in which such
6	Doctor	practice is maintained. The Doctor cannot be You, Your business partner, Your employer or
		employee or a person related to You by blood, marriage or adoption. Any treatment by a specialist must be referred by the attending Doctor.
	Foreign Domestic	Named as the 'Insured Person' in the Policy Schedule who holds a valid work permit issued by
7	Helper, She, Her	the Ministry of Manpower and whom You employ as a foreign domestic worker.
8	Home Country	The country of which Your Foreign Domestic Helper is a citizen.
		An establishment duly constituted and registered subject to the applicable national laws and regulations as a hospital for the care and treatment of sick and injured persons as bed paying
		patients, and which:
9	Hospital,	(a) has organised facilities for diagnosis, treatment and major surgery;
	Hospitalisation	(b) provides twenty-four (24) hours a day nursing services by registered graduate nurses;
		(c) is under the supervision of one or more Doctors at all times; and (d) is not primarily a clinic, a place for custodial care for alcoholics or drug addicts, a nursing
		or rest or convalescent home or a home for the aged or similar establishment.
		Any moveable household goods, valuables and personal belongings kept in Your home and
		belonging to You and/or Your household members residing with You or for which You are responsible excluding:
10	Household Contents	(a) anything more specifically insured under another policy;
10	Household Contents	(b) motor vehicles and accessories, personal mobility devices and pedal cycles;
		(c) money, securities for money, or documents of any kind, contact lenses and hearing aids;
		or (d) items in connection with any business, profession or trade.
11	Illness	Worsening physical health not caused by an Accident for which medical treatment by a Doctor
L''	IIII1633	is necessary.
12	Inpatient	Any admittance into a Hospital for treatment, for which the Hospital levies a daily room and board charge.
		(a) You or Your immediate family including anyone related to You by blood, marriage or
13	Interested Party	adoption;
		(b) a business partner, employer, employee, or agent of any of the above. Physical severance or permanent and irrecoverable functional disablement of the body
14	Loss	member, which is beyond remedy by surgical or other treatment.
		Permanent irrecoverable loss of hearing where:
		If a dB = Hearing loss at 500 Hertz
15	Loss of Hearing	If b dB = Hearing loss at 1,000 Hertz If c dB = Hearing loss at 2,000 Hertz
		If d dB = Hearing loss at 4,000 Hertz
		1/6 of (a+2b+2c+d) is above 80 dB
16	Loss of Limb	The complete severance of a hand at or above the wrist or of a foot above the ankle joint, or
<u> </u>		the total and permanent functional disablement of an entire hand, arm, foot or leg. The total and irrecoverable loss of sight of an eye rendering absolute blindness in that eye,
17	Loss of Sight	which is beyond cure by surgical and other treatment.
		The disability in articulating any three of the four sounds which contribute to the speech such
18	Loss of Speech	as the labial sounds, the alveolobial sounds, the palatal sounds and the velar sounds or total
<u> </u>		loss of vocal cord or damage of speech center in the brain resulting in aphasia. Medical services, procedures or supplies that:
19	Medically Necessary	(a) a Doctor needs to treat an Illness or Bodily Injury because the patient's medical condition
		will be adversely affected without them;
		(b) are widely accepted within the medical community in Singapore as being appropriate
		based on the relevant medical specialty's recognised standards; (c) are not considered experimental and/or developmental in nature by the medical profession
	1	1

	 in Singapore; (d) are not elective or preventive in nature and are also not given to the patient for personal comfort or convenience; and (e) are charged at fair market rates in Our opinion.
Period of Insurance	The period specified in the Policy Schedule during which Your Foreign Domestic Helper is in Your employment. (a) Cover commences from the date Your Foreign Domestic Helper: arrives in Singapore directly for Her employment with You; or in the case She is transferring from another employer to Your employment, cover commences from the effective date of her new work permit in respect of Her employment with You. (b) Her cover ceases on the date Your Foreign Domestic Helper: leaves Singapore upon completion of Her employment with You; or in the case where She is changing to a new employer, Her cover will end on the effective date of the new work permit with Her subsequent employer; or in the case where Her stay is extended under the instruction of the Ministry of Manpower (MOM), Her cover will end on the expiry of the Special Pass issued by MOM.
Permanent Disablement	A state of incapacity resulting from the Foreign Domestic Helper suffering Bodily Injury within twelve (12) months of the Accident, which permanently prevents the Foreign Domestic Helper from engaging in any and every kind of occupation, where the injury: (a) falls into one of the categories listed in the Scale of Compensation under Section 2; and (b) is medically certified within twelve (12) consecutive calendar months of the Accident, with no hope of improvement.
Physical Abuse	An intentional act that will cause harm to a person's body. This includes, but is not limited to: hitting, pushing, pulling, pinching, twisting, bending or manipulating any part of a person's body in a manner that causes discomfort, pain and/or injury.
Pre-Existing Condition	 A Bodily Injury or an Illness which: (a) has existed (or symptoms or manifestations of which has existed) prior to the effective date of the Policy based on normal medically accepted pathological development of the Illness; or (b) the Foreign Domestic Helper was aware of or should reasonably have been aware of, irrespective of whether treatment was actually received. For the avoidance of doubt, any congenital condition, physical defect or infirmity which existed prior to the inception of this policy are also deemed Pre-Existing Conditions.
Serious Illness or Serious Injury	Permanent suffering of a Bodily Injury or Illness which renders Your Foreign Domestic Helper unable to carry out her work for which She is employed for during the Period of Insurance.
Sum Insured	The maximum limit that the relevant section will pay based on the Selected Plan as shown in the Policy Schedule.
We, Us, Our, Etiqa	Etiqa Insurance Pte. Ltd., underwriter of this Policy.
You, Your, Policyholder	Employer of the Foreign Domestic Helper who is registered with MOM and described as 'The Insured' in the Policy Schedule.
	Permanent Disablement Physical Abuse Pre-Existing Condition Serious Illness or Serious Injury Sum Insured We, Us, Our, Etiqa

Section 13: General Exclusions

The exclusions listed here apply to the whole Policy. We will not pay for claims that are directly or indirectly caused by or arising from:

- 1. Any actions brought in the courts of Law of any territory outside Singapore
- 2. Ambulance fees, unless with ADD-ON 2
- Cosmetic surgery
- 4. Dental work, unless with ADD-ON 3 (except due to accidental injuries)
- 5. Vaccination
- 6. Infertility, sub-fertility, assisted conception or any contraceptive operation, including their related complications
- 7. Sex change operations, including their related complications
- 8. Optional items which are outside the scope of treatment
- 9. Health screening examinations for the purpose of diagnosis and any treatment of a preventive nature
- Treatment of conditions or injuries arising from any malicious / wilful / illegal acts by employer or employer's family members
- 11. Treatment for conditions or injuries arising from any criminal acts committed by worker
- 12. Maternity charges (including Caesarean operations or abortions, and their related complications)
- 13. Treatment for conditions or injuries arising from voluntary participation in hazardous sports
- 14. Treatment of conditions or injuries arising directly or indirectly from nuclear fallout, war and related risk
- 15. Repeat occurrence of:
 - a) Treatment of conditions or injuries arising from drug addiction or alcoholism
 - b) Treatment of conditions or injuries arising from participation in civil commotion, riot, or strike
 - c) Treatment of mental conditions and conditions or injuries arising from self-inflicted injuries and attempted suicide
 - d) Treatment of venereal diseases and/or sexually transmitted diseases
- 16. Treatment of conditions deemed as Pre-Existing Condition within the first 12 months of employment under the same employer
- 17. Overseas medical treatment
- 18. Private nursing charges
- 19 . Purchase of medical equipment

- 20. Medical repatriation; not applicable if covered under Your policy schedule
- 21. Outpatient rehabilitation such as physiotherapy, occupational therapy and speech therapy, unless recommended by a medical practitioner during hospitalisation period
- 22. Traditional Chinese medicine or any forms of alternative treatment
- 23. Treatment which has received reimbursement from Work Injury Compensation Insurance (WICI) and other forms of insurance coverage

In any claim where We refuse a claim because of any of the exclusions listed here, and You or Your Foreign Domestic Helper disagree with Our decision, then it will be You and/or Your Foreign Domestic Helper's responsibility to prove that such loss is covered.

Section 14: General Conditions

The terms and conditions listed here apply to the whole Policy. You and Your Foreign Domestic Helper must comply with the following conditions to have the full protection of this Policy.

1. Contract

This Policy is a contract between You (as Policyholder) and Us and contains this Policy Wordings, the Policy Schedule and any endorsements.

We reserve the right to make changes to the Policy's terms and conditions by giving You a written notice of at least 30 days. Any changes to the terms and conditions of this Policy is only valid if We have given our approval in writing and issue You Our official endorsement(s).

2. Reasonable Care

You and Your Foreign Domestic Helper must act prudently and take all reasonable precautions to prevent any loss, damage, Accident, Bodily Injury or Illness and take all practical steps to reduce, as far as possible, the chances of any claims.

3. Fraud

If the proposal or declaration of the Insured is untrue in any respect or if any material fact affecting that risk be incorrectly stated herein or omitted therefrom or if this Insurance, or any renewal thereof shall have been obtained through any misstatement, misrepresentation or suppression or if any claims made shall be fraudulent or exaggerated or if any false declaration or statement shall be made in support thereof then in any of these cases, this Insurance shall be void.

4. Alteration

This Policy shall cease to be in force if there be any material alteration in risk unless We declare in writing to continue with the insurance.

Subrogation

We have the right to proceed recovery at Our expense in Your or Your Foreign Domestic Helper's name against any third party who may be responsible for an occurrence of an event giving rise to a claim under this Policy.

6. Other Insurances

If at the time of any incident which results in a claim under this Policy, you have other insurance covering the same loss, we will not pay more than our share. This exclusion does not apply to Section 2 (Personal Accident) and Section 10 (Special Grant).

7. Cancellation and Refund of Premium

- (a) We may at any time cancel this Policy by giving You 7 days' notice in writing, in which case the premium paid will be refunded on a pro-rated basis.
- (b) Cover will cease immediately when Your Foreign Domestic Helper is repatriated from Singapore or transferred to another employer by You or a registered maid employment agency in Singapore.
- (c) In the event of termination of Your Foreign Domestic Helper's employment contract or work permit with You, cover ceases automatically from the date of the Letter of Discharge from the Ministry of Manpower. You are required to provide the Letter of Discharge to effect cancellation of the Policy.
- (d) A refund of the premium based on the table below will be payable for policy cancellation. No refund shall be given where a claim has been lodged under the Policy.

Cancellation of the Policy	% of Premium to be Refunded
Before the date of commencement	Admin charge \$50.00 exclusive of GST
	(\$54.00 inclusive of GST for 2023 policies;
	\$54.50 inclusive of GST for 2024 and later policies)
Within 1 month from the date of commencement	90% (minimum \$50.00 exclusive of GST)
	(\$54.00 inclusive of GST for 2023 policies;
	\$54.50 inclusive of GST for 2024 and later policies)
Within the 2 nd month from the date of commencement	80%
Between 2 and 4 months from the date of commencement	50%
Between 4 and 6 months from the date of commencement	30%
Between 6 and 9 months from the date of commencement	15%
After 9 months from the date of commencement	No refund

8. Dealing with Disputes

If there is any dispute on Your Policy that we cannot reach an agreement, it must be referred to Financial Industry Disputes Resolution Centre Ltd (FIDREC) for mediation. If the dispute cannot be resolved through FIDREC, it must be referred to the Singapore International Arbitration Centre (SIAC) through legal proceedings using SIAC Rules that are applicable to the period that Your Policy is in force.

9. Payment 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 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.

10. Illegality Clause

If providing any cover or benefit under this Policy would expose Us to any prohibition, or restriction under the laws or regulations of Singapore, this Policy and its benefits shall be considered void, as if cover was never granted.

11. Governing Law

This Policy will be governed by and interpreted in accordance with Singapore law.

12. Sanction Limitation and Exclusion

We will not provide cover and We shall not be liable to pay any claim or provide any benefit under this Policy to the extent that the provision of such cover, payment of such claim or provision of such benefit would expose Us to any sanction, prohibition or restriction under any applicable sanctions law or regulations.

13. No Cover

Not withstanding anything to the contrary, this policy shall not cover or provide for the payment of claims or Benefits to specific persons or entities where the application of or compliance with certain laws and regulations including but not limited to trade sanctions, anti-terrorism or anti-money laundering (as may be applicable to Us, Our parent companies and/or Our ultimate controlling entities, Our reinsurers, their parent company and/or ultimate controlling entity) prohibit performance under the policy based on:

- the identity, domicile, resid
- \ence, place of incorporation, establishment (whether incorporated or unincorporated);
- · or citizenship, of You, or claimant or the parent company and ultimate controlling entity of You, or claimant; or
- the country where the claim arises.

Should any person or entity be found to have been erroneously enrolled under this policy, insurance coverage for such person or entity shall cease with immediate effect and any unearned Premiums paid in respect of such person or entity shall, subject to compliance with laws and regulations, be refunded without interest to You.

Should any claim for payment of any nature be found to have been made under this policy by a person or entity excluded by this provision, no such payment will be made.

Section 15: Claims Procedure

1. Claims Submission

You can submit your claim through a claim form obtainable from Us upon request or from Our website or distributor's website – https://www.etiqa.com.sg/personal-claims/ or www.anda.com.sg.

2. 30-Day Claims Notification

You must notify Us in writing within 30 days of the incident that may give rise to a claim. We can deny Your claim if it is submitted after the 30 days' notification period. If unfortunately that happens, but You can reasonably prove to Us that You were unable to notify Us earlier due to reasons beyond Your control, We will consider to assess Your claim. If You anticipate that You would not be able to submit Your claim within 30 days of its happening, please call Us or write to Us so that We can advise You further.

3. Fraudulent Claims

You are responsible to ensure that Your claims and declarations submitted to Us are true and made in good faith. In cases where Our investigation proves that a claim We received is dishonest or exaggerated, We will reject the claim, cancel the relevant Policy and refer the matter to the relevant authorities.

4. Supporting Documents

When submitting a claim, You are responsible for providing Us with all supporting documents at Your expense. A checklist of the supporting documents We need is available on our website. We will only be obliged to pay claims if We are satisfied with all the supporting documents which You have submitted to Us.

5. Interest

We do not pay any interest on any benefit that is paid from this Policy.

Personal Data Use (Personal Data Protection Act 2012)

Any information collected or held by Us whether contained in Your application or otherwise obtained may be used and/or disclosed to Our associated individuals/companies or any independent third parties (within or outside Singapore) for any matters relating to Your application, any policy issued and to provide advice or information concerning products and services which We believe may ne of interest to You and to communicate with You for any purpose. Your data may also be used for audit business analysis and reinsurance purposes.

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 this Policy is automatic and no further action is required from the Insured. 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 Etiqa or visit the GIA or SDIC websites (www.gia.org.sg or www.sdic.org.sg).