

Group Economy Extra

Policy Wording



AIG Insurance (Thailand) Public Company Limited

Remark:

- The document is not a contract of insurance
- All benefits and coverages are subject to the policy terms, conditions, exclusions and to the limits indicate under the selected plan (if any)
- This English translation is for reference purposes only. In the event a difference arises regarding the meaning herein, the Thai version shall prevail

Group Personal Accident Insurance Policy
(Annual Premium Payment Mode)

By relying on the declaration in the insurance application, which forms a part of this Policy, and in consideration of the premium to be paid by the Policyholder and/or the Insured under the general terms and conditions, insurance agreements, exclusions and attachments to the Policy, the Company hereby promises to the Insured as follows:

Section 1: Definitions

Terms and phases having the specific meanings as given wherever herein, shall have the same meanings wherever they appear, unless otherwise specified in this Policy.

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|-----|--------------------|-------|--|
| 1.1 | Policy | means | the Schedule, general terms and conditions, insuring agreements, exclusions, attachments to the Policy, Special term, and endorsements which form a part of the insurance agreement. |
| 1.2 | Company | means | AIG Insurance (Thailand) Public Company Limited. |
| 1.3 | Insured | means | a person or an organization which is named as the Insured in this Schedule and/or endorsement, who/which is provided with coverage in respect to this Policy. |
| 1.4 | Policyholder | means | a person or an organization named as the Policyholder in this Schedule, who/which has taken out insurance for the benefit of the Insured. |
| 1.5 | Accident | means | an event which suddenly occurs from a factor outside a body, and which leads to a result that is unintended or unexpected by the Insured. |
| 1.6 | Injury | means | a physical injury resulting directly from an Accident, which arises individually and independently from other cause. |
| 1.7 | Any Loss or Damage | means | a physical Injury of the Insured due to an Accident, and causing the Insured's death, dismemberment, loss of sight, disability or Injury. |
| 1.8 | Deductible | means | a deductible for which the Insured shall be liable per Accident. |

- 1.9 Physician means a person who graduates with a Bachelor of Medicine, is properly licensed by the Medical Council of Thailand, and who obtains a medical license in a locality where medical or surgical services are provided.
- 1.10 Nurse means a person who obtains a nursing license under the law.
- 1.11 Hospital means any medical facility which provides medical services, with the capability to admit patients overnight and the premises, a sufficient number of medical personnel, as well as a full-range of service management, and in particular, a serious surgery room and permission to register as a hospital under the law on medical facilities in that territory.
- 1.12 Medical Treatment Establishment means any medical facility which provides medical services, with the capability to admit patients overnight, and permission to register as a medical treatment establishment under the law of that territory.
- 1.13 Clinic means a conventional medical facility which is permitted by law, operated by physicians who provide treatment, examinations, and diagnosis, and which cannot admit patients overnight.
- 1.14 Medical Standard means the international conventional medicine criteria or guidelines which leads to the appropriate treatment plan for patients, as per medical necessity, and in line with the patients' background summary of their injury, discovery, investigation results or others (if any).
- 1.15 Necessary and Reasonable Expense means any reasonable medical fee and/or expenses when compared to the provision of service provided by a Hospital, Medical Treatment Establishment or Clinic, which is charged to general patients by the Hospital, Medical Treatment Establishment, or Clinic where the Insured receives the treatment.
- 1.16 Medical Necessity means a medical service with the following conditions:
(1) Being in line with a diagnosis and treatment based on a service user's Injury;

- (2) Have a clear medical indicator in accordance with the current clinical practice;
- (3) Not being for the purpose of facilitating a service user or his/her family, or only for a medical service provider; and
- (4) Being a treatment service which meets the appropriate patient care standards as required for the Injury conditions of such service user.

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|------|-------------|-------|--|
| 1.17 | Policy Year | means | a period of one year from the effective date of the Policy, or a subsequent anniversary date for the Policy Year. |
| 1.18 | Terrorism | means | an act using force or violence and/or a threat by any person or group of persons, whether individually, on behalf of, or relating to any organization or government, which takes an act for the benefit of political, religious, ideological or similar purposes, as well as to cause a government and/or the public, or any part of the public, to become nervous, or in a state of fear. |

Section 2: General Terms and Conditions

2.1 Insurance Agreement

This Insurance Agreement arises from the Company's belief in the Policyholder's, the Insured's declaration in the insurance application, and additional declarations (if any) which have been signed by the Policyholder, or the Insured, as evidence for accepting insurance under the Insurance Agreement, and so the Company has issued this Policy.

In case the Policyholder, or the Insured already knows, but made a false statement in the declaration under paragraph one, or already knows, but has concealed the facts without giving notice to the Company, and if the Company knows about such fact(s), it may charge a greater amount of premium or refuse to make the Insurance Agreement, and this Insurance Agreement will become voidable under Section 865 of the Civil and Commercial Code, and the Company will have the right to nullify the Insurance Agreement.

The Company shall not decline its liability by relying on a declaration other than that made by the Policyholder, or the Insured, in the document under paragraph one.

2.2 Validity and Change of Content in the Insurance Agreement

This Policy, including the insuring agreements and endorsements, constitute the Insurance Agreement. Any change to the Insurance Agreement shall be valid upon obtaining the Company's consent, and being recorded in this Policy or endorsement.

2.3 Report of an Accident

The Policyholder, the Insured, the beneficiary, or the representative of said person, as the case may be, shall report the Injury or Loss or Damage to the Company without delay. In the case of a death, the Company shall be reported immediately, unless it is proved that there is a reasonable necessity which prevents a report being made to the Company, as mentioned above, but a report shall be made as soon as possible.

2.4 Claim and Submission of Evidence of Damage

In the case of a claim, the Policyholder, the Insured, the beneficiary, or the representative of such person, as the case may be, shall submit the evidence required by the Company as necessary, at its own expense.

In the case of a claim due to death or disability, the above evidence shall be submitted within 30 days from the date of the death, or the date on which a Physician concludes that he/she is disabled. In the case of a claim which is due to other incidents, the evidence shall be submitted within 180 days from the date of the Accident, but if there is no claim within the specified period, this shall not deprive them of the right to claim, if the reason why the claim cannot be made within the specified period can be shown, and the claim is made as soon as possible.

2.5 Medical Examination

The Company is entitled to check the medical treatment and the diagnosis profile of the Insured as necessary for this insurance, and make a post-mortem examination in the case of necessity and non-conflict with the law, at the Company's own expense.

2.6 Payment of Compensation

The Company shall pay the compensation within 20 days from the date on which the Company receives complete and accurate evidence of the Loss or Damage. The compensation in the case of a death shall be paid by the Company to the beneficiary, while the other expenses shall be paid to the Insured.

In the case where there is a suspicion that a claim for the Company's compensation under the Policy, as mentioned above, is not in compliance with the insuring agreements in the Policy, the specified period may be extended as necessary, but by not more than 90 days from the date on which the Company receives all the required documents.

If the Company does not fully pay the compensation within the aforesaid specified period, the Company shall pay interest at the rate of 12 percent on the payable amount, from the due payment date thereof.

2.7 Beneficiary under the Policy

The Insured can name the beneficiary. When the Insured dies, the Company shall pay any benefit under the terms of the Policy to such beneficiary, as named. If the beneficiary is not named, the Company shall pay the compensation to the Insured's estate.

In case the Insured names only one beneficiary, and the beneficiary dies before, or at the same time as, the Insured, the Insured shall give a written notice to the Company, informing them about the change of beneficiary. If the Insured fails to give, or cannot give, such notice of change, when the Insured dies, the Company shall pay benefits to the Insured's estate.

In case the Insured names more than one beneficiary, and any beneficiary dies before, or at the same time as, the Insured, the Insured shall give a written notice to the Company, informing about a change to such beneficiary, or a change of benefits for the remaining beneficiaries. If the Insured fails to give, or cannot give, such notice of change about the beneficiary, when the Insured dies, the Company shall pay the benefits of the dead beneficiary to the remaining beneficiaries in an equal amount.

2.8 Change of Occupation

If the Insured encounters an Injury while performing acts, with remuneration, in other occupations which have a risk which is higher than that previously declared, the Company shall pay the compensation in the amount which is equal to the premium received for the previously declared occupation, and the Insured can purchase the coverage for the new occupation.

If the Insured changes his/her occupation to another type of occupation, which is identified by the Company as an occupation with a lower risk than the previously declared occupation, the Company shall decrease and return the premium on a pro-rata basis, from the date on which the Company receives the evidence of such change of occupation.

2.9 Coverage Benefits in the case of an Increase/Decrease in the Number of Insureds during the Policy Year

In case the Policyholder informs that the number and the name of the Insureds has increased/decreased during the Policy Year, the Company shall adjust the premium based on the period in which the coverage will be provided, or the remaining coverage period.

2.10 Termination of the Policy

2.10.1 The Company can terminate this Policy by giving a written notice not less than 30 days in advance, by registered post, to the Policyholder and/or the Insured at the latest address as informed to the Company. In this case, the Company will return the premium to the Policyholder and/or the Insured after deducting the amount of premium for the period in which this Policy has been in effect, on a pro-rata basis.

2.10.2 The Policyholder and/or the Insured can terminate this Policy by giving a written notice to the Company, and the Policyholder and/or the Insured shall be entitled to a return of the premium, after deducting the premium amount for the period in which this Policy has been in force, at the short-term premium rate as indicated in the table below:

Short-Term Premium Rates

Period of Insurance (Not Exceeding/Month)	% of Full-Year Premium
1	15
2	25
3	35
4	45
5	55
6	65
7	75
8	80
9	85
10	90
11	95
12	100

2.11 Auto Termination of the Insurance Agreement

This Policy and the insurance under this Policy shall be Auto Termination when The Insured is arrested in a prison or jail, the Company shall return the premium to the Insured after deducting the premium amount for the period in which this Policy has been in force, on a pro-rata basis.

2.12 Dispute Resolution by Arbitration

In the case of any dispute, controversy or claim under this Policy between the person entitled to make a claim under this Policy and the Company, and if the person entitled to make a claim wishes and deems it appropriate to resolve such dispute by arbitration, the Company shall agree with and accept the dispute resolution by arbitration in accordance with the Office of Insurance Commission’s Arbitration Rules.

2.13 Conditions Precedent

The Company shall be responsible for compensation under this Policy when the Insured, the beneficiary, or the representative of said person, as the case may be, fully complies with the Insurance Agreement and the conditions of the Policy.

Section 3 General Exclusions

This Policy shall not provide coverage for:

3.1 Any Loss or Damage arising from, or due to, the following incidents:

- 3.1.1 Act of the Insured taken while being under the influence of liquor, addictive substance, or narcotics to the degree that they are unconscious;
In the case of a blood test, "while being under the influence of liquor" refers to the level of alcohol in blood which is at least 150 milligrams percent.
- 3.1.2 Suicide, attempt to commit suicide, or injury to his/her own body;
- 3.1.3 Receipt of germs, parasites, except infections relating to germs or tetanus or rabies through a wound from an Accident;
- 3.1.4 Clinical or surgical treatment, unless it is required due to an Injury covered by this Policy, and which occurs within the period as specified in the Policy;
- 3.1.5 Miscarriage;
- 3.1.6 Treatment to a tooth, or the root of a tooth, unless such treatment is made within 7 days from the date of the Accident;
- 3.1.7 Change or wear of dentures, dental crown, or prosthodontics;
- 3.1.8 Food poisoning;
- 3.1.9 Back ache due to Disc Herniation, Spondylolisthesis, Degenerative Disc Disease, Spondylosis and Defect or Pars Interarticularis (Spondylolysis), unless it is Fracture or Dislocation of the spine as a result of an Accident;
- 3.1.10 War, invasion, malicious act of a foreign enemy or a warlike malicious act, whether declared or not, or a civil war, uprising, rebellion, riot, strike, disturbance, revolution, coup d'etat, martial law, or any event which causes an announcement or maintenance of martial law;
- 3.1.11 Terrorism;
- 3.1.12 Radiation or radioactivity from any nuclear fuel or nuclear waste from the combustion of nuclear fuel, and from any self-sustaining process relating to nuclear fission;

3.1.13 Exploration of radiation or a nuclear component, or any other hazardous material which may explode during the nuclear process.

3.2 Any Loss or Damage arising during the following times: (unless the coverage has been extended and an attached document was issued to extend such coverage)

3.2.1 While the Insured is involved in car or boat racing of all kinds, horse racing, ski racing of all kinds including jet ski racing, skate racing, boxing, parachute jumping (except parachute jumping for life saving), while getting on or off or being on a balloon or glider, participating in a bungee jump, diving with a diving tank and regulator;

3.2.2 While the Insured is riding or commuting on a motorcycle;

3.2.3 While the Insured is getting on or off or being in an aircraft which is not registered for carriage of passengers, and which is not operated as a commercial airline;

3.2.4 While the Insured is piloting or performing duties as a full-time employee on any aircraft;

3.2.5 While the Insured participates in a quarrel, or jointly instigates a quarrel;

3.2.6 While the Insured commits a criminal act which is subject to serious punishment, while the Insured is being arrested or is escaping arrest;

3.2.7 While the Insured is performing duties as a soldier, police officer, or volunteer, in a war or suppression, but if such performance is for more than 30 days, the Company shall return the premium starting from the performance of the duties in such war, or suppression, until the end of such performance. Thereafter, the Policy shall continue to be in effect until the end of the insurance period as specified in the Schedule.

Section 4 Insuring Agreements

Subject to the general terms and conditions, exclusions, insurance agreements, and endorsements in respect to the Policy, and in consideration of the premium to be paid by the Policyholder and/or the Insured, the Company agrees to provide coverage for the following insurance agreements:

Insuring Agreement (Or.Bor.2)

**Loss of Life, Dismemberment, Loss of Sight, Loss of Hearing, Loss of Speech
or Permanent Disability Benefits**

Definitions

Dismemberment	means	an amputation of an organ from a wrist or ankle, which includes the permanent loss or functioning of such organ, with a clear medical indication that it can no longer function.
Loss of Sight	means	complete blindness with no healing method.
Permanent Total Disability	means	a disability to the degree that any work - full-time or another occupation - cannot be performed permanently.
Partial Permanent Disability	means	a disability to the degree that any work - full-time or another occupation - cannot be performed permanently, but they can perform work for remuneration.

Coverage

This insurance provides coverage for Loss or Damage from the Insured's physical Injury due to an Accident, which arises during the insurance period, and causes the Insured's Loss of life, Dismemberment, Loss of Sight, Loss of Hearing, Loss of Speech, or Permanent Total Disability within 180 days from the date of the Accident or Injury, for which the Insured shall be admitted for medical treatment as an In-patient in a Hospital or a Medical Treatment Establishment, and Loss of Life at any time as a result of such Injury, the Company shall pay compensation as follows:

1	100% of the sum insured	Loss of Life
2	100% of the sum insured	For permanent Total Disability, and such Permanent Total Disability continues for not less than 12 months from the date of the Accident, or there is a medical indication that the Insured suffers from Permanent Total Disability
3	100% of the sum insured	For loss of both hands from the wrists, or both feet from the ankles or loss of sight for both eyes
4	100% of the sum insured	For loss of one hand from the wrist, and one foot from the ankle
5	100% of the sum insured	For loss of one hand from the wrist and loss of sight in one eye

6	100% of the sum insured	For loss of one foot from the ankle and loss of sight in one eye
7	60% of the sum insured	For loss of one hand from the wrist
8	60% of the sum insured	For loss of one foot from the ankle
9	60% of the sum insured	For loss of sight in one eye
10	50% of the sum insured	For permanent loss of hearing or speech
11	15% of the sum insured	For permanent loss of hearing in one ear
12	25% of the sum insured	For loss of thumb (two knuckles)
13	10% of the sum insured	For loss of thumb (one knuckle)
14	10% of the sum insured	For loss of forefinger (three knuckles)
15	8% of the sum insured	For loss of forefinger (two knuckles)
16	4% of the sum insured	For loss of forefinger (one knuckle)
17	5% of the sum insured	For loss of each finger (not less than two knuckles) other than a thumb and a forefinger
18	5% of the sum insured	For loss of a big toe
19	1% of the sum insured	For loss of each toe (not less than one knuckle) other than a big toe

The Company shall pay the compensation under this Clause only for one item - maximum compensation, except for the permanent total loss of a finger or toe, as per Item 12 to Item 19, and no claim for compensation for any - Item 1 to Item 9 - can be made. The Company shall pay the compensation based on the actual Loss in respect to each item, in aggregate, but not more than the sum insured as specified in the Schedule and/or the insurance certificate.

In the case of Partial Permanent Disability for which a claim for compensation, as per Item 2 to Item 19, cannot be made, and which is not a loss of a gustatory sense or smell, the Company shall pay the compensation as per the opinion provided by the Company's Physician, but not more than 50% of the sum insured, as specified in the Schedule and/or the insurance certificate.

In aggregate, the Company shall pay compensation for the results under this Insuring Agreement, in a total amount of not more than the amount as specified in the Schedule and/or the insurance certificate. If the Company does not fully pay the sum insured under this Insurance Agreement, the Company shall continue to provide the coverage until the expiration of the insurance period, in an amount which is equal to the remaining sum insured only.



Claim for Death Benefits

The Policyholder - the beneficiary shall submit the following evidence to the Company within 30 days from the date of the Insured's death, at his/her own expense:

1. Claim form, as specified by the Company;
2. Certificate of death;
3. Copy of the autopsy report, certified by the police official on duty, or the issuing authority;
4. Copy of the daily police report, certified by the police official on duty;
5. Copies of the Insured's national identification card and house registration, with "Death" stamped accordingly; and
6. Copies of the beneficiary's national identification card and house registration.

Claim for Permanent Total Disability or Dismemberment, Loss of Sight, Loss of Hearing, Loss of Speech Benefits

The Policyholder - the Insured shall submit the following evidence to the Company within 30 days from the date on which the Physician concludes that there is Permanent Total Disability or Dismemberment, Loss of Sight, Loss of Hearing, or a Loss of Speech, at his/her own expense:

1. Claim form, as specified by the Company;
2. Physician's report in respect to the Permanent Total Disability or Dismemberment, or Loss of Sight, Loss of Hearing, Loss of Speech.

Non-submission of the evidence within said period shall not deprive the Policyholder/Beneficiary of the right to claim, if it can show that there are reasonable grounds for such non-submission within the specified period, but submission is made as soon as possible.

Insuring Agreement

Medical Expense Benefit

Definitions

In-patient Room Charge	means	a room charge, meal expenses, nursing service fee and Hospital service fee at a Hospital or a Medical Treatment Establishment, which is provided on a daily basis.
In-patient	means	a person who has to be admitted for medical treatment in a Hospital or a Medical Treatment Establishment continuously for not less than 6 hours, and who shall be registered as in-patient and diagnosed and advised by a Physician, as per the indications which meet the Medical Standards, and within an appropriate period for the treatment of such Injury, and includes the event of admission as an in-patient, but who subsequently dies before the end of the 6 hours.
Alternative Medicine	means	a diagnosis, medical treatment or prevention of disease by way of a Thai traditional medicine method, local Thai medicine, Chinese traditional medicine, or any other method other than conventional medicine.

Coverage

If an Injury causes the Insured to be medically treated by a Physician, or taken care of by a Nurse within 52 weeks from the date of the Accident, the Company shall pay the compensation, and necessary and reasonable expenses arising from the required medical treatment, and as per the Medical Standards, for the In-patient Room Charge, observation room charge, treatment fee and nursing fee, based on the actual amount paid, but not more than the sum insured as specified in the Schedule and/or the insurance certificate, less the Deductible (if any).

However, if the Insured is compensated by government welfare, or other welfare or other insurance, the Insured shall submit the receipt with certification of the money paid by the government welfare or other authority, for the purpose of claiming the deficient amount from the Company.

Claim for Medical Expense Benefit

The Policyholder or the Insured shall submit the following evidence to the Company within 30 days from the date of discharge from the Hospital, the Medical Treatment Establishment, or the date of the medical treatment by a Clinic, at his/her own expense.

1. Claim form as specified by the Company;
2. Physician's report indicating important symptoms, diagnosis results, and medical treatment;
3. Original receipt showing expenses, or a closing summary of the budget with a receipt; and

A receipt showing the expenses shall be an original receipt, and the Company shall return the receipt with certification of the expenses paid to the Insured, in order to claim for the deficient amount from other insurers. However, if the Insured is compensated by government welfare, or other welfare or other insurance, the Insured shall submit the receipt with certification of the money paid by the government welfare or other authority, for the purpose of claiming the deficient amount from the Company.

Treatment Outside Thailand

For medical treatment of an Injury which is under the coverage of this Policy, the Company shall pay the compensation, at the foreign currency exchange rate which is in effect on the date as specified in a medical treatment receipt.

Limitations for the Insuring Agreement in respect to Medical Treatment Benefits

Coverage shall not be provided for a special nurse fee, walking aids (except for a crutch), wheelchair, external prosthetics, Alternative Medicine, or acupuncture.

Section 5 Endorsements

If any particulars in the following Endorsement conflicts with, or contradicts, the particular in the Policy, the particulars in the Endorsement shall prevail.

Subject otherwise to other conditions of the Insurance Agreement and exclusions in the Policy.



Endorsement to the Group Personal Accident Insurance Policy

Extension of Coverage

(Attached only to the Group Personal Accident Insurance Policy for Annual Premium Payment Mode)

Company Code: **Or.Bor.3.1**

Endorsement No.	Forming a part of Policy No.	Preparation Date:
Policyholder Name:		
Insured Name:		
Period of Insurance: From	Time: - hours To	Time: 24.00 hours
Premium:	Stamp Duty:	Tax: Total:

Extension of Coverage : It is agreed that during the effective period, as stated in this Endorsement, said Policy shall extend its coverage to any Loss or Damage caused by, or in connection with, or arising at, the following time, provided that it applies only to the Insuring Agreement which specifies the sum insured.

Insuring Agreement	Extension of Coverage For Riding or Commuting Motorcycles	
	Sum Insured (Baht)	Premium (Baht)
		®

The Company's liability is not more than the sum insured, as specified in this Endorsement.

If any particulars in this Endorsement conflicts with, or contradicts, the particulars in the Policy, the particulars in this Endorsement shall prevail.

Subject otherwise to other conditions of the Insurance Agreement and exclusions in the Policy



Endorsement to the Group Personal Accident Insurance Policy

Extension of Coverage

(Attached only to the Group Personal Accident Insurance Policy for Annual Premium Payment Mode)

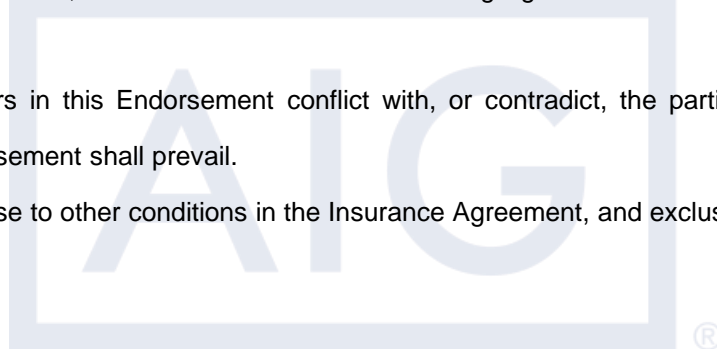
Company Code: **Or.Bor.5**

Endorsement No.	Forming a part of Policy No.	Preparation Date:
Policyholder Name:		
Insured Name:		
Period of Insurance: From	Time: - hours To	Time: 24.00 hours
Premium:	Stamp Duty:	Tax: Total:

Limit of Liability: It is agreed that if an Injury which is suffered by the Insured is a result of a murder or it is caused by physical abuse, the sum insured under the Insuring Agreement - Or.Bor.2 - shall be decreased to Baht

If any particulars in this Endorsement conflict with, or contradict, the particulars in the Policy, the particulars in this Endorsement shall prevail.

Subject otherwise to other conditions in the Insurance Agreement, and exclusions in the Policy.



Summary of Terms and Conditions, Insuring Agreement, Exclusion
Group Personal Accident Insurance Policy
(Annual Premium Payment Mode)

Definitions

Accident	means	an event which suddenly occurs from a factor outside a body, and which leads to a result that is unintended or unexpected by the Insured.
Injury	means	a physical injury resulting directly from an Accident, which arises individually and independently from other cause.
Any Loss or Damage	means	a physical Injury of the Insured due to an Accident, and causing the Insured's death, dismemberment, loss of sight, disability or Injury.

General Terms and Conditions

- **Claim and Submission of Evidence of Damage**

In the case of a claim, the Policyholder, the Insured, the beneficiary, or the representative of such person, as the case may be, shall submit the evidence required by the Company as necessary, at its own expense.

In the case of a claim due to death or disability, the above evidence shall be submitted within 30 days from the date of the death, or the date on which a Physician concludes that he/she is disabled. In the case of a claim which is due to other incidents, the evidence shall be submitted within 180 days from the date of the Accident, but if there is no claim within the specified period, this shall not deprive them of the right to claim, if the reason why the claim cannot be made within the specified period can be shown, and the claim is made as soon as possible

- **Payment of Compensation**

The Company shall pay the compensation within 20 days from the date on which the Company receives complete and accurate evidence of the Loss or Damage. The compensation in the case of a death shall be paid by the Company to the beneficiary, while the other expenses shall be paid to the Insured.

In the case where there is a suspicion that a claim for the Company's compensation under the Policy, as mentioned above, is not in compliance with the insuring agreements in the Policy, the specified period may be extended as necessary, but by not more than 90 days from the date on which the Company receives all the required documents.

If the Company does not fully pay the compensation within the aforesaid specified period, the Company shall pay interest at the rate of 12 percent on the payable amount, from the due payment date thereof.

- **Coverage Benefits in the case of an Increase/Decrease in the Number of Insureds during the Policy Year**

In case the Policyholder informs that the number and the name of the Insureds has increased/decreased during the Policy Year, the Company shall adjust the premium based on the period in which the coverage will be provided, or the remaining coverage period.

- **Auto Termination of the Insurance Agreement**

This Policy and the insurance under this Policy shall be Auto Termination when The Insured is arrested in a prison or jail, the Company shall return the premium to the Insured after deducting the premium amount for the period in which this Policy has been in force, on a pro-rata basis.

Insuring Agreements

This policy affords coverage only with respect to such result for which a sum insured as specified in the Schedule and/or the insurance certificate only for Loss or Damage following;

1. Loss of Life, Dismemberment, Loss of Sight, Loss of Hearing, Loss of Speech or Permanent Disability (Or.Bor.2) Benefits
2. Medical Expense Benefit

Endorsements

1. Extension of Coverage for Riding or Commuting Motorcycles (Or.Bor.3.1) [®]
2. Extension of Coverage for Murder or Physical Abuse (Or.Bor.5)

General Exclusions

This Policy shall not provide coverage for:

1. **Any Loss or Damage arising from, or due to, the following incidents:**

- 1.1 Act of the Insured taken while being under the influence of liquor, addictive substance, or narcotics to the degree that they are unconscious;

In the case of a blood test, "while being under the influence of liquor" refers to the level of alcohol in blood which is at least 150 milligrams percent.

- 1.2 Suicide, attempt to commit suicide, or injury to his/her own body;

- 1.3 Receipt of germs, parasites, except infections relating to germs or tetanus or rabies through a wound from an Accident;

1.4 Clinical or surgical treatment, unless it is required due to an Injury covered by this Policy, and which occurs within the period as specified in the Policy;

1.5 Miscarriage;

1.6 Treatment to a tooth, or the root of a tooth, unless such treatment is made within 7 days from the date of the Accident;

1.7 Change or wear of dentures, dental crown, or prosthodontics;

1.8 Food poisoning;

1.9 Back ache due to Disc Herniation, Spondylolisthesis, Degenerative Disc Disease, Spondylosis and Defect or Pars Interarticularis (Spondylolysis), unless it is Fracture or Dislocation of the spine as a result of an Accident;

1.10 War, invasion, malicious act of a foreign enemy or a warlike malicious act, whether declared or not, or a civil war, uprising, rebellion, riot, strike, disturbance, revolution, coup d'etat, martial law, or any event which causes an announcement or maintenance of martial law;

1.11 Terrorism;

1.12 Radiation or radioactivity from any nuclear fuel or nuclear waste from the combustion of nuclear fuel, and from any self-sustaining process relating to nuclear fission;

1.13 Exploration of radiation or a nuclear component, or any other hazardous material which may explode during the nuclear process.

2. Any Loss or Damage arising during the following times:

2.1 While the Insured is involved in car or boat racing of all kinds, horse racing, ski racing of all kinds including jet ski racing, skate racing, boxing, parachute jumping (except parachute jumping for life saving), while getting on or off or being on a balloon or glider, participating in a bungee jump, diving with a diving tank and regulator;

2.2 While the Insured is riding or commuting on a motorcycle;

2.3 While the Insured is getting on or off or being in an aircraft which is not registered for carriage of passengers, and which is not operated as a commercial airline;

2.4 While the Insured is piloting or performing duties as a full-time employee on any aircraft;

2.5 While the Insured participates in a quarrel, or jointly instigates a quarrel;

2.6 While the Insured commits a criminal act which is subject to serious punishment, while the Insured is being arrested or is escaping arrest;

2.7 While the Insured is performing duties as a soldier, police officer, or volunteer, in a war or suppression, but if such performance is for more than 30 days, the Company shall return the premium starting from the performance of the duties in such war, or suppression, until the end of such performance. Thereafter, the Policy shall continue to be in effect until the end of the insurance period as specified in the Schedule.

Remark A Full coverage and other conditions are in accordance with the Group Personal Accident Insurance Policy (Annual Premium Payment Mode) approved by the Office of Insurance Commission (OIC).

