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PA Safe

Please read this insurance policy carefully to ensure that you understand the terms and conditions and that this policy meets your requirements. If there are any changes that may affect the insurance cover provided, please notify us immediately.



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Introduction

1. This is an Accident policy and benefits will only be payable upon death or Injury as a result of an Accident occurring during the Period of Insurance. The benefits described below are subject to maximum limits or to a deductible. Please check the Policy Schedule for details. Benefits are payable only if the insured event affects an Insured Person while he/she is covered under this Policy.
2. Please read this Policy carefully to make sure You understand it. If You have any questions about this Policy, please call or write to Us. Contact details are shown both in this Policy and Your Policy Schedule.
3. Please inform Us immediately of any change in Your address and of any other change affecting You which requires an alteration to the Policy.
4. In the event where You may be entitled to receive a benefit under this Policy, please let Us know as quickly as possible, but in any event not exceeding 30 days from occurrence of the Accident. This must be done in writing, addressed to Us, and evidenced by an acknowledgement from Us. We should point out that delays in notification could affect the validity of Your claim.

General Provisions

1. The Contract

- a) This Policy sets out the terms and conditions of a contract of insurance between Liberty Pte Limited from here on called the Company and You, also known as Insured or Insured Person(s).
- b) We will provide the insurance to You according to the terms set out in this

Policy, provided You pay the premium when due and We agree to accept it. The general conditions which appear in this Policy or in any Endorsement form part of the contract and must be complied with.

- c) It is important that You:
 - i) read the whole Policy to make sure that You understand the protection You have just bought; and
 - ii) are aware of the limits on the amounts We will pay you

2. Interpretation

- a) This Policy including Your proposal form, attached forms and papers, declarations, digital transmissions of declarations, Schedule and any Endorsement and amendment, printed or via electronic mail, shall be read together as one contract and any one word or expression to which a specific meaning has been attached, shall, unless the context otherwise requires, bear that specific meaning wherever it may appear.
- b) No change in this Policy shall be valid unless approved by Us and evidenced by an Endorsement reflecting the amendment to the Policy by Us.

3. Duty of Disclosure

- a) The accuracy of the information provided over the phone, via digital transmissions, or electronic mail, or in Your proposal form will form the basis of and be part of the contract. Before You enter into the Policy and during the Period of Insurance, You must tell Us all material information You know or could reasonably be expected to know which will affect Our decision on the coverage



and the terms of the Policy. If You are uncertain about whether a fact is relevant or not, You must tell Us about it. We will acknowledge receipt of material information by stating these on the Policy Schedule. If You do not provide this information to Us, We may:

- i)** reduce the amount payable for the claim under this Policy; or
 - ii)** refuse to pay the claim that may arise; or
 - iii)** cancel Your Policy from inception
- b)** Material information include but is not limited to: Insured Person's previous claim history and insurance records, age, occupation, health and physical impairments, disease, Illness and Usual Country of Residence.

4. Eligibility and Scope

a) Eligible Person(s)

- i)** To be eligible for cover under this Policy, You or Your spouse must be aged between eighteen (18) and sixty-five (65) years old. The eligible age for Child/ Children is from six (6) months to eighteen (18) years old, or up to twenty-five (25) years old, if they are still enrolled in an educational institution on full-time higher education. We may continue to cover you from 66 to 80 years old at a reduced sum insured and we may apply new terms, depending on Our decision. To be eligible for cover, all Insured Persons must be Residents of Singapore who are Permanently Residing in Singapore

- ii)** "Residents of Singapore" means Singapore Citizens and Permanent Residents

- iii)** "Permanently Residing" means residing permanently in Singapore during the Period of Insurance but with the liberty to travel outside Singapore for a period not exceeding ninety (90) consecutive days at any one time

- iv)** We may extend cover to an Insured Person who is not a Resident of Singapore subject to Our approval

b) Geographical Scope and Time Limits

- i)** This Policy covers an Insured Person in his/her Usual Country of Residence for twenty-four (24) hours unless otherwise amended or endorsed under this Policy

- ii)** This Policy covers an Insured Person outside his/her Usual Country of Residence, on a worldwide basis, provided that the maximum period an Insured Person is outside his/her Usual Country of Residence is not more than ninety (90) consecutive days at any one time



General Definitions

The following definitions apply to the Policy:

Term	Meaning
1. Accident/Accidental	An event or occurrence which is unintended, sudden, fortuitous and unforeseen.
2. Accidental Death Benefit	Benefit for death as a result of Accident
3. Age	The current age. A person is considered to be of his/her current age until his/her next birthday.
4. Child/Children	<p>a) An unmarried and unemployed child aged between six (6) months old to eighteen (18) years; or</p> <p>b) An unmarried and unemployed child aged between eighteen (18) and twenty-five (25) years of age if he or she is enrolled in an educational institution on full-time higher education</p>
5. Chiropractor/ Physiotherapist/ Traditional Chinese Physician	A person (other than an Insured Person or Insured Person's Immediate Family Member, relative, business partner, employer, employee or agent) engaging in the practice of chiropractic/physiotherapy and/or Traditional Chinese medicine and/or acupuncture (including a herbalist or bonesetter), who is duly licensed and registered to do so according to the laws and regulations applicable in the geographical area of his/her practice.
6. Company/We/Ours/Us	Liberty Pte Limited
7. Dental Practitioner	A person (other than an Insured Person or Insured Person's Immediate Family Member, relative, business partner, employer, employee or agent) qualified by a medical degree and duly licensed and registered to practise dentistry and who, in rendering treatment, is practising within the scope of his/her licensing and training in the geographical area of practice.
8. Effective Date	The commencement date of insurance as specified in the Policy Schedule or Endorsement.
9. Endorsement	An amendment to this Policy by an authorised person of the Company. Intermediary(ies) of the Company are not authorised to make any amendment.
10. Gainful Employment	Work by Insured where he/she derives an income, remuneration or profit.
11. Home	The residential address shown on the Insured Person's Singapore National Registration Card (NRIC) or any official document.
12. Home Country	The country of citizenship. In the event of multiple nationality, You shall select one nationality.
13. Hospital	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:



Term	Meaning
	<ul style="list-style-type: none"> a) has organised facilities for diagnosis, treatment and major surgery b) provides twenty-four (24) hours a day nursing services by registered graduate nurses c) is under the supervision of one or more Physicians 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
14. Illness/Sickness	A physical condition marked by a pathological deviation from normal health state.
15. Immediate Family Member	Your spouse, sons(s), daughter(s), son(s)-in-law, daughter(s)-in-law, parents, brothers(s), sister(s), grandparents and parent(s)-in-law.
16. Injury/Injured	External bodily injury sustained by an Insured Person during the Period of Insurance and is caused by an Accident solely and independently of any other causes within twelve (12) calendar months from date of such Accident.
17. Insured	A person or corporate body named in the Policy Schedule and is the legal holder of this Policy
18. Intensive Care Unit (ICU)	A specialised department of a Hospital that provides intensive care medicine or critical care medicine for patient who are faced with life threatening medical emergency.
19. Loss	Complete severance or permanent functional disablement.
20. Loss of Hearing	Permanent irrecoverable loss of hearing where: <ul style="list-style-type: none"> a) If a dB = Hearing loss at 500 Hertz b) If b dB = Hearing loss at 1000 Hertz c) If c dB = Hearing loss at 2000 Hertz d) If d dB = Hearing loss at 4000 Hertz e) $1/6$ of $(a+2b+2c+d)$ is above 80dB
21. Loss of Limb	Physical severance of a hand at or above the wrist or of a foot above the ankle joint, or the total and permanent functional disablement of an entire hand, arm, foot or leg.
22. Loss of Sight	Total and irrecoverable loss of sight of an eye rendering the Insured Person absolutely blind in that eye beyond remedy by surgical or other treatment.
23. Loss of Speech	Disability in articulating any three of the four sounds which contribute to the speech such as the Labial sounds, the Alveololabial sounds, the Palatal sounds and the Velar sounds or total loss of vocal cord or damage of speech centre in the brain resulting in Aphasia.
24. Medical Expenses	a) Expenses incurred within twelve (12) calendar months of sustaining an Injury, paid by the Insured Person(s),



Term	Meaning
	<p>inpatient and/or outpatient expenses for the purpose of treatment to the Injury(ies) sustained in an Accident</p> <p>b) These include expenses to Medical Practitioner, Physician, Traditional Chinese Physician, Chiropractor, Physiotherapist (upon referral by Medical Practitioner), Dental Practitioner, surgical, x-ray, laboratory, medical services, supplies and medication</p> <p>c) Includes expenses for dental treatment prescribed by a Dental Practitioner and where such treatment is deemed medically necessary to restore sound and natural teeth and is cause by an Accident. Expenses for dental treatment exclude cosmetic dental treatments, loss or damage to dental crowns, dental implants or fillings, dentures, braces or treatment to the gums.</p> <p>d) Reasonable and Customary for all treatment in the location where the expenses were incurred and shall not exceed total benefit payable</p>
25. Medical Practitioner/ Physician	A person (other than an Insured Person or Insured Person's Immediate Family Member, relative, business partner, employer, employee or agent) qualified by a medical degree and duly licensed and registered to practise western medicine and who, in rendering treatment, is practising within the scope of his/her licensing and training in the geographical area of practice.
26. Overseas	Outside the Republic of Singapore
27. Period of Insurance	The period of cover shown in the Policy Schedule and for any following period, for which cover is extended by mutual agreement.
28. Permanent	Lasting for a continuous period of twelve (12) calendar months and at the end of which is beyond any hope of improvement as certified by a Medical Practitioner.
29. Permanent Disablement	<p>Injury which:</p> <p>a) falls into one of the categories listed in the Permanent Disablement (Scale of Benefits) Table and</p> <p>b) having lasted for a continuous period of twelve (12) calendar months from the date of Accident and at the end of that period, beyond hope of improvement as certified by a Medical Practitioner</p>
30. Permanent Total Disablement	Injury which, having lasted for a continuous period of twelve (12) calendar months from the date of the Accident and entirely prevents the Insured Person from engaging in Gainful Employment of any and every kind and from which there is no hope of improvement as certified by a Medical Practitioner.
31. Plan	The plan selected by the Insured at time of application and as set out in the Policy Schedule.



Term	Meaning
32. Pre-Existing Condition	Any Injury, Illness, disease or conditions which, prior to the Effective Date of this Policy, <ul style="list-style-type: none"> a) had manifested itself, worsened, became acute, or developed symptoms for which an ordinary prudent person would have sought medical advice, diagnosis, care or treatment, or b) the Insured Person had been diagnosed, treated, hospitalised, recommended for treatment or treated by a Medical Practitioner, which requires the Insured Person to be hospitalised or take prescribed drugs or medicine
33. Principal Sum Insured	The Accidental Death Benefit of the Plan as stated on the Policy Schedule
34. Policy	Refers to the contract of insurance between You and the Company and comprises the followings: <ul style="list-style-type: none"> a) Application form/online application, including any information provided or declaration made by the Insured for and on behalf of the Insured Person b) This Policy wordings c) Policy Schedule/The Schedule d) Endorsements e) Certificate of Insurance/Cover Note/Letter of Acceptance (where applicable)
35. Policy Schedule/ The Schedule	The Schedule issued to the Insured, and forming part of the contract of this Policy
36. Policy Year	Means a period of 12 months from the start date of the Period of Insurance shown in the Policy Schedule or for any period of cover as agreed between the Insured and Us.
37. Public Conveyance	<ul style="list-style-type: none"> a) Means any air, sea, road or rail conveyance or carrier which are mechanically propelled; and b) Operating under a license issued by a government authority having jurisdiction for the regular transportation of fare paying passengers and which has fixed, established and regular schedule and routes; and c) Includes but not limited to public bus, ferry, hovercraft, hydrofoil, ship, railway or underground train, tram, fixed wing aircraft, regularly scheduled commercial aircraft; and d) Does not include taxis, private hire cars/buses/coaches, all other modes of transportation that are chartered or arranged as part of a tour even if the services are regularly scheduled and any other carriers which are operated primarily for sight-seeing service and amusement of passengers
38. Reasonable and Customary Charges	Charges for medical care which do not exceed the general level of charges being made by others of similar standing in the locality where the charges are incurred, when furnishing like or comparable treatment, services or supplies to individuals of the same sex and of



Term	Meaning
	comparable age for a similar illness or injury and which in accordance with accepted medical standards, could not have been omitted without adversely affecting the Insured Person's medical condition. In Singapore, Reasonable and Customary Charges shall be deemed to be those laid down in Singapore Ministry of Health's fee benchmarks or any other applicable equivalent benchmarks
39. Surgery	Any invasive surgical intervention
40. Temporary Partial Disablement	Injury which solely and directly disables and prevents an Insured Person from attending to a substantial part of his/her usual business or occupation (of any and every kind) for a maximum period of 104 weeks from date of Accident
41. Temporary Total Disablement	Injury which solely and directly, totally disables and prevents an Insured Person from attending to his/her usual business or occupation (of any and every kind) for a maximum period of 104 weeks from date of Accident
42. Usual Country of Residence	The country of permanent residence, in which You are staying for a period exceeding ninety (90) consecutive days.
43. You/Your/Insured Person	An individual person/persons so described in the Policy Schedule, whose name is included in the proposal form and in respect of whom commencement of cover has been approved and confirmed in writing by Us, and refer to the person covered under the Policy.



Section 1. Accidental Death

1. If an Insured Person shall sustain Injury which results, solely and independently of any other causes, in death within twelve (12) calendar months from the date of the Accident, the Company will pay the amount for Accidental Death (Principal Sum Insured) as stated in the Policy Schedule.
2. Benefits payable shall be reduced by any benefits already paid under Section 2 (Permanent Disablement), Section 3 (Temporary Total Disablement), and Section 4 (Temporary Partial Disablement) in respect of the same Injury.

Section 2. Permanent Disablement

1. If an Insured Person shall sustain Injury which results in Permanent Disablement falling within one of the categories listed in the Permanent Disablement (Scale of Benefits) Table below within twelve (12) calendar months from the date of the Accident, the Company will pay the percentage of Principal Sum Insured as stated in the Policy Schedule.
2. Benefits payable shall be reduced by any benefits already paid under Section 3 (Temporary Total Disablement) and Section 4 (Temporary Partial Disablement) in respect of the same Injury.

Permanent Disablement (Scale of Benefits) Table

Description	Compensation (% of Principal Sum Insured)	
	Scale I	Scale II
Permanent Disablement resulting in		
• Loss of two limbs	100%	100%
• Loss of both hand or of all fingers and both thumbs	100%	100%
• Total loss of sight of one eye or both eyes	100%	100%
• Total paralysis	100%	100%
• Injuries resulting in being Permanently bedridden	100%	100%
• Any other injury causing Permanent Total Disablement	100%	100%
• Loss of one arm between or at shoulder to wrist	100%	100%
• Loss of one leg between or at hip to ankle	100%	100%
• Loss of sight of eye except perception of light	NIL	50%
• Loss of lens of eye	NIL	50%
• Loss of four fingers and thumb of one hand	NIL	40%
• Loss of four fingers	NIL	40%
• Loss of thumb		
○ Both phalanges	NIL	25%
○ One phalanx	NIL	10%
• Loss of index finger		
○ Three phalanges	NIL	10%
○ Two phalanges	NIL	8%
○ One phalanx	NIL	4%



Description	Compensation (% of Principal Sum Insured)	
	Scale I	Scale II
<ul style="list-style-type: none"> • Loss of middle finger <ul style="list-style-type: none"> ○ Three phalanges ○ Two phalanges ○ One phalanx • Loss of ring finger <ul style="list-style-type: none"> ○ Three phalanges ○ Two phalanges ○ One phalanx • Loss of little finger <ul style="list-style-type: none"> ○ Three phalanges ○ Two phalanges ○ One phalanx • Loss of metacarpals <ul style="list-style-type: none"> ○ First or second (additional) ○ Third, fourth or fifth (additional) • Loss of toes <ul style="list-style-type: none"> ○ All ○ Great, both phalanges ○ Great, one phalanx ○ Other than great, if more than one toe lost, each • Loss of hearing <ul style="list-style-type: none"> ○ Both ears ○ One ear • Loss of speech • Third degree burns <ul style="list-style-type: none"> ○ Head <ul style="list-style-type: none"> ▪ Equals to or greater than 2% but less than 5% ▪ Equals to or greater than 5% but less than 8% ▪ Equals to or greater than 8% ○ Body <ul style="list-style-type: none"> ▪ Equals to or greater than 10% but less than 15% ▪ Equals to or greater than 15% but less than 20% ▪ Equals to or greater than 20% 		

3. Permanent total Loss of use of member shall be treated as Loss of member.

4. In the event of Permanent Disablement by Loss not specified above the percentage of compensation shall be assessed in proportion to the degree of disability certified by a Medical Practitioner as compared with the cases specified above without reference to the profession or occupation of the Insured Person.



5. The total aggregate sum payable in respect of any one Accident shall not exceed 100% of the Principal Sum Insured.
6. Where an Insured Person sustains disablement which falls within more than one category for which a benefit may be payable, payment will be made under the category with the higher (or highest) benefit only. In particular, if a benefit is payable for Loss of a whole member of the body, then no benefit shall be payable for Loss of part of that member.



Section 3. Temporary Total Disablement

1. If an Insured Person who is Gainfully Employed shall sustain an Injury which results in Temporary Total Disablement within twelve (12) calendar months from the date of the Accident, the Company will pay a weekly income benefit as specified in the Policy Schedule, for up to a maximum period of one hundred and four (104) weeks from the date of Accident, for each Accident.
2. You need to furnish medical proof from a Medical Practitioner of continuous disability as and when requested by the Company for any benefit to be paid to You.
3. Benefits payable under Section 3 (Temporary Total Disablement) and Section 4 (Temporary Partial Disablement) are mutually exclusive, and in aggregate shall not be payable for more than 104 weeks from the date of Accident in respect of the same Injury. For any period where the disablement lasts for less than a week, the benefits payable will be pro-rated accordingly.

Section 4. Temporary Partial Disablement

1. If an Insured Person who is Gainfully Employed shall sustain an Injury which results in Temporary Partial Disablement within twelve (12) calendar months from the date of the Accident, the Company will pay a weekly income benefit as specified in the Policy Schedule, for up to a maximum period of one hundred and four (104) weeks from the date of Accident, for each Accident.
2. You need to furnish medical proof from a Medical Practitioner of continuous disability as and when requested by the Company for any benefit to be paid to You.

3. Benefits payable under Section 3 (Temporary Total Disablement) and Section 4 (Temporary Partial Disablement) are mutually exclusive, and in aggregate shall not be payable for more than 104 weeks from the date of Accident in respect of the same Injury. For any period where the disablement lasts for less than a week, the benefits payable will be pro-rated accordingly.

Section 5. Daily Hospital Cash

1. If an Insured Person sustains an Injury which requires hospitalisation as part of the treatment within twelve (12) calendar months from the date of the Accident, the Company will pay a daily amount as specified in the Policy Schedule up to thirty (30) days per Accident, for each completed twenty-four (24) hour period that an Insured Person is confined at a Hospital for treatment of Injury.

Section 6. Medical Expenses

1. The Company will reimburse the Insured person for the Medical Expenses paid for treatment of Injury, up to the amount as specified in the Policy Schedule per Accident.
2. Includes expenses for dental treatment prescribed by a Dental Practitioner and where such treatment is deemed medically necessary to restore sound and natural teeth and is cause by an Accident. Expenses for dental treatment exclude cosmetic dental treatments, loss or damage to dental crowns, dental implants or fillings, dentures, braces or treatment to the gums.
3. When Insured Person is entitled to reimbursement for all, or part of such expense(s) from another source(s), the Company will be liable only for the excess of the amount recoverable from such source(s).



4. We will reimburse the Insured Person the Medical Expenses incurred for the treatment of Injury by a Traditional Chinese Physician and/or Chiropractor subject to S\$100.00 per visit and restricted to one (1) visit per day; subject to sub-limit of S\$500.00 per Policy Year.
5. We will reimburse the Insured Person for the Medical Expenses incurred for the treatment of Injury by a Physiotherapist (upon referral by Medical Practitioner), subject to a sub-limit which is capped at 25% of the Medical Expenses limit or S\$500.00 whichever is lower, per Accident.
6. We will reimburse up to 3 months from the date of Accident the purchase of and/or rental of mobility aids which are prescribed by a Medical Practitioner and medically necessary for the Injured Insured Person's mobility, subject to the sub-limit capped at 5% of the Medical Expenses limit or S\$250.00 whichever is lower, per Accident.

For this section, 'mobility aids' refer to items such as wheelchairs, crutches, walking casts, walker and wearable prosthetics and does not include medical implants.

7. We will reimburse the Insured Person for the expenses incurred within 90 days from date of Accident, for ground ambulance service which is necessary to bring Insured Person from the site of Accident to the Hospital, between Hospitals, and between Home to Hospital when necessary, for the purpose of treatment and post hospitalisation treatment to an Injury.
8. We will pay the Reasonable and Customary Charges incurred, provided such expenses are incurred within twelve (12) calendar months from the date of the Accident.

Section 7. Personal Liability

We will indemnify You for all sums which You may be legally liable arising as a result of:

1. Accidental death or Injury to a third party; or
2. Accidental loss or damage to property of any third party

We will also indemnify You in respect of any claims to which the indemnity under this section applies:

1. All costs and expenses recoverable from You by third parties
2. All costs and expenses incurred with Our written consent

Our liability for all compensation payable in respect of any one occurrence and in the aggregate shall not exceed the Benefit Limit stated in the Policy Schedule.

Exclusions to Section 7

We are not liable in respect of legal liability arising from:

1. The death or Injury to You or Your Immediate Family Members
2. Loss or damage to any property that is owned or controlled by You or Your Immediate Family Members
3. Failure to perform Your duty under a contract
4. Accepting liability without Our agreement
5. Your own unlawful, malicious, deliberate or intentional, reckless or grossly negligent acts
6. Judgments or decisions which are not delivered by or obtained from a Court of competent jurisdiction within Singapore



7. Legal costs resulting from any criminal proceedings
8. Punitive, aggravated or exemplary damages
9. The ownership, possession or use of vehicles, aircraft, watercraft, firearms or animals
10. Your participation in any motor rallies, or car, motorcycle, boat or aerial racing
11. Aerial devices or aircraft landing areas
12. The vibration, removal or weakening of the support of any land or building
13. The transmission of any disease; and
14. The Work Injury Compensation Act (WICA)

Extensions

This Policy shall extend to cover the following subject to the terms and conditions of the Policy:

1. **Accidental Miscarriage**

Injury resulting in accidental miscarriage which is not due to any natural causes, or sickness related to pregnancy or childbirth is covered under the terms of this Policy for Section 6 (Medical Expenses).

2. **Amateur Sports and Activities**

Injury arising from participation in recreational sports and activities which are not competitive in nature is covered under the terms of this Policy. This will exclude any sports or activities which the Insured Person is participating in a professional capacity or from which the Insured Person could earn an income or remuneration.

3. **Bites from Insects and/or Animals**

Injury sustained as a result of insect and/or animal bites which is not related to Sickness or Illness are covered under the terms of this Policy

4. **Disappearance and Exposure**

a) If the Insured Person is exposed to the elements due to an Accident and as a result of such exposure suffers an Injury, We will pay compensation subject to the terms of this Policy

b) If the Insured Person's body has not been found within twelve (12) months after the date of the disappearance, sinking or wrecking of the aircraft or other conveyance in which the Insured Person was traveling in and it is reasonable to believe that the Insured has died as a result of Injury caused by an Accident, Section 1 (Accidental Death) shall become payable subject to a signed undertaking by the Insured Person's legal representative that if this belief is subsequently found to be wrong, such benefit shall be refunded to Us

5. **Drowning or Suffocation**

Injury sustained as a result of drowning or suffocation by poisonous fumes, gas or smoke will be covered under the terms of this Policy provided that such Injury did not arise out of or in connection with the Insured's own wilful or intentional act.

6. **Flood and Other Convulsions of Nature**

Injury sustained as a direct result of flood and other convulsions of nature including but not limited to volcano eruptions, fire storm, wind storm, typhoon, hurricane, tornado, tsunami, earthquake, lightning strike, will be covered under the terms of this Policy.



7. Food Poisoning

Injury sustained as a result of food poisoning will be covered under the terms of this Policy.

8. Hijack and/or Kidnap

Injury sustained as a direct result of hijack and/or kidnap involving unlawful seizure, or exercise of control by force or violence, or by threat of force or violence, with wrongful intent of an aircraft, vessel or Public Conveyance, and which You are a victim, or hostage of kidnap, not a provocateur, will be covered under the terms of this Policy. We will not pay if the hijack and/or kidnap is by one of the Insured Person(s) or any others related to the Insured Person(s) whether acting alone or in collusion with others.

9. Motor Cycling

Injury sustained from riding as a pillion or rider on a motor cycle, wearing proper safety helmet, and not engaging in racing, practice race, time trial, reliability trial, speed or duration testing, hill climbing, off road riding and riding of similar nature, will be covered under the terms of this Policy.

Under this extension, coverage is subjected to the followings:

- a) Coverage is restricted within Singapore only; and
- b) The maximum payable amount under Section 1 Accidental Death and/or Section 2 Permanent Disablement is capped at 50% of the total aggregate limits under both benefits or S\$500,000 whichever is lower

10. Murder and Assault

Injury sustained as a direct result of the Insured being a victim of murder or assault will be covered under the terms of this Policy provided that such Injury did not arise out of or in connection with the Insured's own participation or provocation of any such act.

11. National Service Full-Time and Reservist Training

- a) If the Insured Person is required to serve Full-Time National Service (under Section 12 of the Enlistment Act 1970 of the Republic of Singapore) on or after the commencement of the Period of Insurance, the Policy extends to cover the Insured Person once he is officially off-duty or has officially signed out from the military camp (or equivalent premises where such Full-Time National Service is served). However, any claims relating to or in connection with or arising directly or indirectly from Full-Time National Service duty are excluded from the Policy
- b) Injury sustained by the Insured Person during peacetime training or duties while on part-time National Service as a reservist within Singapore (under Section 14 of the Enlistment Act 1970 of the Republic of Singapore) in the Navy, Army, Air Force, Police Force, Fire Brigade or Civil Defence, will be covered for up to 40 days under the terms of this Policy. We will not be liable for any Injury caused directly or indirectly if the Insured Person was taking part in or was present at any operation during law enforcement, emergency response, disaster management, any insurrection, expedition, actual warfare or war-like character either as a combatant or non-combatant when the Injury was sustained.

Exclusions

These Exclusions are applicable to the entire Policy.

We will not pay for claims directly or indirectly arising from:



1. AIDS (Acquired Immunodeficiency Syndrome) & ARC (AIDS Related Complex) & HIV (Human Immunodeficiency Virus) infection.
2. Any Accident to an Insured Person which arises in the course of his/her occupation, if his/her occupation falls within the following categories or involves the following activities: pilots, air crew, professional sportspersons, professional divers or jockeys, fire fighters, police, naval, military, air force service or operations, construction or unskilled workers, ship crew or workers on board vessels, oil and gas rigs/platforms workers, offshore workers, stevedores, shipbreakers, welders, work involving height exceeding 30 feet above ground or floor level, works underground, handling of hazardous chemical/electrical and/or explosive materials, use of woodworking tools or machineries.
3. Any consequence whether direct or indirect of war, invasion, act of foreign enemy hostilities or warlike operations (whether war be declared or not) civil war, civil rebellion, revolution, insurrection, civil commotion assuming the proportions of or amounting to an uprising military, or usurped power.
4. Any act of terrorism including but not limited to:
 - a) the use or threat of force or violence; or
 - b) harm or damage to life or to property (or the threat of harm or damage) including, but not limited to, nuclear radiation or contamination by chemical or biological agents,

by any person or group committed for political, religious, ideological or similar purposes, with the aim of influencing any government or to put the public, or any section of the public in fear
5. Any Pre-Existing Condition.
6. Any unlawful or intentional act of an Insured Person, or his/her wilful exposure to danger (other than in an attempt to save human life), intentional self-injury, suicide or attempted suicide, while sane or insane.
7. Cosmetic (aesthetic) or plastic surgery or treatment, or any treatment which relates to or is needed because of previous cosmetic treatment or any treatment to correct facial disfigurement not due to accident, provided that this exclusion does not apply to reconstructive surgery if:
 - a) it is carried out to restore function or appearance after an Accident (provided that the Accident occurred while the Insured Person was covered under this Policy); and
 - b) it is done at a medically appropriate stage after the Accident; and
 - c) the cost of the treatment is approved by Us in writing before it is done
8. Effect or influence of alcohol or drugs not prescribed by a Medical Practitioner and the effect or influence of drugs prescribed by a Medical Practitioner for the treatment of drug addiction.
9. Flying or other aerial activity except as a fare-paying passenger, not as an operator or crew member, in a properly licensed aircraft operated by a licensed commercial air carrier or recognised charter company; or as passenger, not as an operator or crew member in a properly licensed private aircraft, as part of a business air travel.



10. Illness, disease, mental defect or infirmity, or insanity, bacterial or viral infections even if contracted by Accident.
11. Ionising radiations or contamination by radioactivity from any irradiated nuclear fuel, or from any nuclear waste from the combustion of nuclear fuel, radioactive toxic explosive, or other hazardous properties of any explosive nuclear assembly, or of its nuclear component
12. Medical or surgical treatment except where such treatment is rendered necessary by Injury within the scope of this Policy.
13. The Insured Person participating in any professional sports, rock climbing (except on man-made walls) or mountaineering which involves the use of guides or ropes, any underwater activities involving underwater breathing apparatus, any kind of speed contest or racing (other than on foot), motor rallies, hunting, potholing, caving, parachuting, sky diving, hang gliding, paragliding, cliff diving, bungee jumping, BASE jumping, competitive snow or ice sports.
14. The following activities or sports, except undertaken on a leisure purpose under the supervision of a licensed guide or instructor, will not be covered: hot-air ballooning, ice or winter sports, hiking or trekking undertaken outside Singapore.
15. The Insured Person participating in any sports or activities in a professional capacity and/or from which he or she could earn an income or remuneration.

Sanction Limitation and Exclusion Clause

This Policy shall not be deemed to provide any cover or benefit, or pay any claim, to the extent that the provision of such cover or benefit or payment of such claim would expose the Company to any sanction, prohibition or restriction under the United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, United Kingdom, United States of America or any jurisdiction applicable to the Company.

Conditions

1. Liability

We will have no liability to pay any benefits under this Policy if You or any Insured Person

- a) fails to fully and truthfully disclose to Us, all material information known (or which could reasonably be expected to be known), before inception of this Policy, during the Period of Insurance, and upon each renewal
- b) fails to properly observe and fulfil the terms and conditions of this Policy
- c) makes any untrue statement
- d) omits, suppresses or incorrectly states any material information affecting the risk
- e) makes any claim that is fraudulent or exaggerated or makes any false declaration or statement in support of a claim. The Company reserves the right to recover from You any amounts that may have already been paid out

2. Changes in Circumstances

If there is any change in circumstances affecting the risk, You must give Us



immediate written notice and pay any additional premium that We may require. In particular, You must notify Us of any changes in occupation/business or Usual Country or Residence of any Insured Person. If You do not provide this information to Us, We may:

- a) reduce the amount payable for the claim under this Policy; or
- b) refuse to pay the claim that may arise; or
- c) cancel Your Policy from inception

3. Misstatement of Age

If at the correct age an Insured Person would not have been eligible for cover under this Policy, no benefit shall be payable, and our liability shall be limited to the refund of the premium paid without interest.

4. Policy Renewal

This Policy is renewable at Our option, subject to underwriting requirements being fulfilled and at the premium rates determined at that time by Us. An application for change of benefits to a different plan can only be made at renewal and is subject to Our acceptance at that time. Where at renewal a request is made to hold cover, the maximum period that cover can be held will be fourteen (14) days. If at the end of this period the Policy is cancelled or lapsed for any reason whatsoever, You must pay Us a premium for the number of days the cover was held which will be calculated pro-rata on the renewal premium subject to minimum premium of S\$25 + GST.

5. Taking Precautions

You and all Insured Persons must at all times take reasonable precautions to prevent accidents, loss or damage.

6. Automatic Termination

Cover under this Policy for any particular Insured Person shall automatically terminate

on the earliest happening of the following events:

- a) on the death of such Insured Person; or
- b) upon such Insured Person ceasing to satisfy any of the eligibility requirements set out in this Policy; (provided that if an Insured Person satisfies the age eligibility requirements at the commencement of a Period of Insurance, his/her cover shall not automatically terminate when he/she attains a higher age during that Period of Insurance); or
- c) upon being convicted of a criminal act

7. Cancellation/Termination of Cover

- a) You have the right to cancel this Policy at any time by giving written notice to Us. If no claims have been made during the current Period of Insurance, We will grant You a pro-rated refund of the total premium paid corresponding to the unexpired Period of Insurance subject to a minimum premium of S\$25 + GST
- b) You have the right to terminate cover for any Insured Person at any time by giving Us written notice, and upon such termination, You will be granted a pro-rated refund of the premium paid in respect of that Insured Person corresponding to the unexpired Period of Insurance subject to a minimum premium of S\$25 + GST
- c) We have the right to cancel this Policy or any Section or part of it by giving You thirty (30) days' written notice, and upon cancellation You will be granted a pro-rated refund of the total premium paid corresponding to the unexpired Period of Insurance



8. Right to Return Policy/Free Look

In the event that You are not satisfied with the Policy for any reason and there are no claims on the Policy, it may be returned to Us for cancellation with effect from inception, within fourteen (14) working days after receipt of the Policy by You. Any premium billed will be refunded without interest. This right to return Policy is applicable only to newly incepted policies.

9. Payment of Benefits

Any benefit payable under this Policy shall be paid to the Insured Person or to the Insured Person's legal representative or estate. Any payment made by Us in accordance with this condition shall in all cases finally and completely discharge Us of all our liability.

10. Expenses Covered by Other Sources

If You or any Insured Person becomes entitled to a refund or reimbursement of all or part of claimed expenses from any other source, or if there is in place any other insurance against the events covered, We will only be liable for the excess of the amount recoverable from such other source or insurance. This condition is only applicable to benefits whereby payment is on a reimbursement or indemnity basis.

11. Claim Procedures

- a) Written notice shall be given to Us as soon as possible and in any event within thirty (30) days of the occurrence of any event, which may give rise to a claim under this Policy
- b) A claim form obtainable from Us upon request shall then be submitted to Us within thirty (30) days after the expiry period for which the claim is made, accompanied by the necessary supporting evidence of the occurrence, character and extent of loss

- c) All certificates, receipts, information and evidence required by Us shall be supplied free of expense to Us, in the form prescribed by Us

- d) Failure to comply with the time and procedure stipulated for the making of a claim in this clause may invalidate the claim and no benefit shall be payable under this Policy

- e) We shall have the right and the opportunity through our medical representatives to examine any Insured Person whenever and as often as may be reasonably required within the duration of any claim. In addition, We shall have the right to require an autopsy in the case of death, where this is not forbidden by law or religious beliefs. We will bear the expenses incurred in such examinations, unless the claim is proved to be invalid, in which case We shall be entitled to recover all the expenses so incurred from You

12. Legal Proceedings

No legal proceeding may be commenced against Us prior to the expiration of sixty (60) days after written proof of loss has been furnished in accordance with the requirement of this Policy. If the Insured Person shall fail to supply the requisite proof of loss as stipulated by the terms of the Policy, the Insured Person may, within a grace period of one (1) year from the time that the written proof of loss should have been furnished, submit the relevant proof of loss to Us with satisfactory reasons for the failure to comply with Policy terms. The acceptance of such proof of loss shall be at Our sole and entire discretion. After such grace period has expired, We will not accept for any reason whatsoever such written proof of loss.



13. Mediation/Arbitration

All disputes arising out of this Policy may be submitted to the Singapore Mediation Centre for settlement by mediation in accordance with the mediation procedure for the time being in force, if the parties so agree. The parties agree to take part in the mediation in good faith and undertake to honour the terms of any settlement reached. If any dispute is not referred to mediation or if mediation fails, the dispute has to be referred to arbitration. Arbitration shall be conducted in accordance with the Arbitration Rules of the Singapore International Arbitration Centre for the time being in force. The tribunal shall consist of one(1) arbitrator. The seat of the arbitration shall be Singapore. The language of the arbitration shall be English.

14. Applicable Law

This Policy shall be governed by and interpreted in accordance with the laws of Singapore.

15. Contract (Rights of Third Parties) Act

A person or any entity who is not a party to this Policy shall have no right under the Contracts (Rights of Third Parties) Act 2001 to enforce any of its terms.

16. Assignment

This Policy is not assignable. We shall not be affected by notice of any trust, charge, lien, assignment or other dealing with this Policy.

17. Alterations

We reserve the right to amend the terms and provisions of this Policy, and such amendment will be applicable from the effective date of such amendment. No alteration to this Policy shall be valid unless approved in writing by an authorised person of the Company and reflected in an Endorsement. Intermediary(ies) of the Company have no authority to amend or to

waive any of the terms and conditions of this Policy.

18. Currency Exchange Rates

Payment of all claims and benefits will be made in Singapore currency. Charges incurred in any other currency shall be payable in Singapore Dollars on the basis of the quoted exchange rate in effect on the date such charges were incurred.

19. Clerical Error

A clerical error by Us shall not invalidate insurance otherwise validly in force, nor continue insurance otherwise not validly in force.

20. Subsisting Insurance

An Insured Person may only be covered under one PASafe Policy. Should an Insured Person try to obtain cover under more than one PASafe Policy, cover will only be effective under the Policy with the earliest issue date and the Insured Person shall not be covered under any other PASafe Policies issued subsequently, and any premiums paid under such policies shall be refunded without interest.

21. Payment Before Cover Warranty (Individual)

- a) Notwithstanding anything herein contained but subject to clauses b and c hereof, it is hereby agreed and declared that the total premium due must be paid and actually received in full by the Company (or the intermediary through whom this Policy was effected) on or before the inception date ("the inception date") of the coverage under the Policy, renewal certificate, cover note or Endorsement
- b) In the event that the total premium due is not paid and actually received in full by the Company (or the intermediary through whom this Policy was effected)



on or before the inception date referred to above, then the Policy, renewal certificate, cover note or Endorsement shall not attach and no benefits whatsoever shall be payable by the Company. Any payment received thereafter shall be of no effect whatsoever as cover never attached on the Policy, renewal certificate, cover note and Endorsement

- c) In respect of insurance coverage with "Free Look" provision, the Insured may return the original Policy document to the Company or intermediary within the "Free Look" period if the Insured decides to cancel the cover during the "Free Look" period. In such an event, the Insured will receive a full refund of the premium paid to the Company provided that no claim has been made under the insurance and the cover shall be treated as if never put in place.

22. Premium Payment Warranty (Corporate)

- a) Notwithstanding anything herein contained but subject to clause b hereof, it is hereby agreed and declared that if the period of insurance is sixty (60) days or more, any premium due must be paid and actually received in full by the Company (or the intermediary through whom this Policy was effected) within sixty (60) days of the:
 - i) inception date of the coverage under the Policy, renewal certificate or cover note
 - ii) effective date of each Endorsement, if any issued under the Policy, renewal certificate or cover note
- b) In the event that any premium due is not paid and actually received in full by the Company (or the intermediary through

whom this Policy was effected) within the 60-day period referred to above, then:

- i) the cover under the Policy, renewal certificate, cover note or Endorsement is automatically terminated immediately after the expiry of the said sixty (60) day period
 - ii) the automatic termination of the cover shall be without prejudice to any liability incurred within the said sixty (60) day period; and
 - iii) the Company shall be entitled to a pro-rata time on risk premium subject to a minimum of S\$25.00 + GST
- c) If the period of insurance is less than sixty (60) days, any premium due must be paid and actually received in full by the Company (or the intermediary through whom this Policy was effected) within the period of insurance.

23. Breach of Premium Warranty

It is condition precedent that this Policy is issued on the basis that the named Insured has never had any insurance (for the risk insured) cancelled due solely or in part to a breach of premium payment warranty in the last twelve (12) months.

Policy Owners' Protection Scheme

This Policy is protected under the Policy Owners' Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for Your Policy is automatic and no further action is required from You. For more information on the types of benefits that are covered under the scheme as well as the limits of coverage, where applicable, please contact Us



(sgservicecenter@libertymutual.com) or visit the
GIA/LIA or SDIC web-sites (www.gia.org.sg or
www.lia.org.sg or www.sdic.org.sg)

