



LONPAC INSURANCE BHD (S98FC5635C)
(Incorporated in Malaysia)

CONFIDENTIAL

SAN YU ADVENTIST SCHOOL LTD

**299 THOMSON ROAD
SINGAPORE 307652**



**STUDENTS'
GROUP
PERSONAL
ACCIDENT
POLICY**

Policy No. : Z24PG02014231

Account No. : Z10005

PRIVACY POLICY

For information on our privacy policy, please visit our website
<https://www.lonpac.com.sg/home/privacy-policy>



LONPAC INSURANCE BHD (S98FC5635C)

(Incorporated in Malaysia)

Singapore Office: 300, Beach Road #17-04/06, The Concourse, Singapore 199555.

Tel: (65) 6250 7388 Fax: (65) 6296 3767 Website: www.lonpac.com.sg

GST Reg No.: F0-0005635-C

CONFIDENTIAL

THE SCHEDULE

Class of Policy	: STUDENTS' GROUP P.A.	Policy No.	: Z24PG02014231
Insured	: SAN YU ADVENTIST SCHOOL LTD	Replacing C/Note No.	: NOT APPLICABLE
Address	: 299 THOMSON ROAD SINGAPORE 307652	Replacing Policy No.	: Z23PG02013984
		Account No.	: Z10005 L/A
Business or Profession	: EDUCATIONAL INSTITUTION		
Period Of Insurance	: From 01-01-2024 To 31-12-2024	(both dates inclusive)	
Age Limit	: UP to 65 years		
Geographical Limit	: WORLDWIDE		
TYPE OF COVER	: 24 HOURS WORLDWIDE ACCIDENT COVERAGE RELATED ONLY TO ALL SCHOOL ACTIVITIES AND/OR CO-CURRICULAR ACTIVITIES		
POLICY BENEFITS	: AS PER "TABLE OF BENEFITS" OF THE POLICY - BASICPLUS PLAN - (BP21A)		
INTERESTS	: ENBLOC BASIS - ON THE LIVES OF ALL THE STUDENT AS PER SCHOOL'S REGISTER (TOTAL : 511 INSURED PERSONS)		
INFECTIOUS OR CONTAGIOUS DISEASE EXCLUSION DURING A PHEIC (LMA 5500)			

1. THIS INSURANCE DOES NOT COVER CLAIMS IN ANY WAY CAUSED BY OR RESULTING FROM AN INFECTIOUS OR CONTAGIOUS DISEASE, AN OUTBREAK OF WHICH HAS BEEN DECLARED A PUBLIC HEALTH EMERGENCY OF INTERNATIONAL CONCERN (PHEIC) BY THE WORLD HEALTH ORGANIZATION (WHO).			
2. THIS EXCLUSION SHALL APPLY TO CLAIMS MADE AFTER THE DATE OF ANY SUCH DECLARATION(S), OTHER THAN WHERE A RELEVANT DIAGNOSIS HAS BEEN MADE BY A QUALIFIED MEDICAL PRACTITIONER BEFORE THE DATE OF ANY SUCH DECLARATION(S).			
3. THIS EXCLUSION WILL CONTINUE TO APPLY UNTIL THE WHO CANCELS OR WITHDRAWS ANY RELEVANT PHEIC.			
4. INFECTIOUS OR CONTAGIOUS DISEASE MEANS ANY DISEASE CAPABLE OF BEING TRANSMITTED FROM AN INFECTED PERSON, ANIMAL OR SPECIES TO ANOTHER PERSON, ANIMAL OR SPECIES BY ANY MEANS.			
LMA 5433 - CYBER EXCLUSION			

WE WILL NOT PAY:			
A) ANY BENEFITS FOR BODILY INJURY OR ILLNESS; OR			
B) FOR ANY LOSS, DAMAGE, LIABILITY, COST OR EXPENSE;			
CAUSED DELIBERATELY OR ACCIDENTALLY BY THE USE OF, OR INABILITY			

Z10005 - VM11
24/PG02/Mar-v-1.0.0



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THE SCHEDULE

Class of Policy : STUDENTS' GROUP P.A.

Policy No. : Z24PG02014231

TO USE, ANY APPLICATION, SOFTWARE OR PROGRAMME IN CONNECTION WITH ANY ELECTRONIC DEVICE (FOR EXAMPLE A COMPUTER, LAPTOP, SMARTPHONE, TABLET OR INTERNET-CAPABLE ELECTRONIC DEVICE).

LMA5433
08 JULY 2020

This policy is subject to the following endorsements, clauses, warranties, and/or special Exclusion(s) as printed in this Policy or added thereon or attached thereto and forming part of this Policy.

LONPAC INSURANCE BHD

CHIEF EXECUTIVE
(Singapore Branch)

FOR MORE INFORMATION ON OUR NETWORK

Please scan the QR code below for more information on how to contact us and the location of our headquarters and our branches.



Alternatively, you may visit our website at:
<https://www.lonpac.com/contact/our-network>

Students' Accident Protection Scheme 2024 (BasicPlus Plan)

WHEREAS the Insured described in the Schedule hereto has made to the **LONPAC INSURANCE BHD** (hereinafter called "the Company"), a written Proposal and Declaration which the Insured has agreed shall be deemed to be of a promissory nature and effect and the basis of this Contract and which is deemed to be incorporated herein and has paid or agreed to pay the Premium stated in the aforesaid Schedule as consideration for the Insurance hereinafter contained.

NOW THIS POLICY WITNESSETH that if any of the **EVENTS** referred to in the Table of Benefits shall happen at any time during the Period of Insurance stated in the Schedule or during any further Period for which the Company may accept payment for the renewal of this Policy, the Insured shall sustain any Bodily Injury caused by accidental means and being the sole and direct cause of the Insured Person's Death or Disablement as hereinafter defined, THEN the Company will pay the Benefit to the Insured Person, or in the event of his Death to his Parent or Legal Guardian or legal personal representatives or other person nominated by him in writing to the Company, the sum or sums of money set forth in the Schedule.

In witness whereof this Policy has been signed by and on behalf of the Company.

This Scheme is arranged and exclusively marketed by:



AB LIM PTE LTD (UEN: 198804259D)

Blk 123 Bukit Merah Lane 1 #04-78 Singapore 150123

Tel: 6272 2277 Fax: 6276 9909

Email: general@ablim.com.sg Website: www.ablim.com.sg

1. DEFINITIONS

- 1.1 **“The Benefit”** means the sum set out in the Table of Benefits against the relevant EVENT **PROVIDED THAT:**
- (a) No compensation stated in the Table of Benefits shall be payable:
 - (i) Under Item 3 - Accidental Death and/or Items 1 to 56 of Permanent Disablement Table unless the Death or Bodily Injury takes place within 12 months after the date of the injury.
 - (ii) Until the total amount of compensation shall have been ascertained and agreed.
 - (b) In respect of any sums payable under Items 1 to 56, the maximum shall not exceed the Sum Insured as stated in Permanent Disablement Table as stated herein.
 - (c) The Company shall not be liable to make any further payment under this Policy after a claim under Item 3 - Accidental Death and/or Items 1 to 56 of Permanent Disablement Table has been admitted and becomes payable.
- 1.2 **“Injury”** means Bodily Injury to the Insured Person caused solely and directly by accidental means (excluding any sickness, disease or medical disorder).
- 1.3 **“Medical Expenses”** means expenses (after deduction of any sum recovered or recoverable from all other sources) reasonably and necessarily incurred within 12 months of sustaining injury and paid by the Insured Person or by the Insured in respect of the Insured Person to a legally, qualified medical practitioner, dentist, registered nurse, hospital or nursing treatment, including the costs of prescribed medical supplies and ambulance hire, but excluding the cost of dental treatment unless such treatment is for injury to sound and natural teeth. Reimbursement of the medical expenses is in accordance with the Schedule of Payment as stipulated in Appendix 1.
- 1.4 **“Out-Patient Benefits”** means the medical expenses reasonably and necessarily incurred by the Insured Person for out-patient treatments including a minor and/or day surgery at a clinic or hospital, ambulance fees and follow-up treatments. The expenses include accidental emergency or clinical treatments, accidental dental treatments and Chinese physicians. Reimbursement of such expenses shall be up to the limit as stated in the Schedule of Payment.
- 1.5 **“In-Patient Benefits”** means the medical expenses reasonably and necessarily incurred by the Insured Person whereby there is an in-patient confinement in a hospital for a period of not less than 20 hours. The expenses include hospital accommodation, professional fees, ancillary charges and post-hospitalisation treatments. Reimbursement of such expenses shall be up to the limits as stated in the Schedule of Payment.
- 1.6 **“Hospital Accommodation”** under “In-Patient Benefits” means in-patient confinement in a hospital for a period of not less than 20 hours for which a daily room and board charge is incurred.
- 1.7 **“Hospital Allowance”** means a Cash Benefit of S\$15 per day when the Person is hospitalised as an in-patient arising out of an accident.
- 1.8 **“Period of Insurance”** means the period specified in the Schedule and any subsequent period for which the Insured shall have paid and the Company shall have accepted a Renewal premium.

2. AGE LIMIT

This Policy shall not apply to any Insured Person immediately upon attaining the age of 65 years.

3. GENERAL EXCLUSIONS

This Policy does not cover Death or Disablement or any other loss or Bodily Injury caused directly or indirectly occasioned by, happening through any one or more of the following:

- 3.1 Intentional self-injury or suicide (whether felonious or not) or any attempt thereat, injury sustained whilst under the influence of alcohol or drugs.
- 3.2 Any consequence of accidents whilst engaged in hazardous and/or extreme and/or professional sports, winter sports, mountaineering, scuba diving (except participating in Co-Curricular Activities), training for competitions or participating in competitions (except whilst representing the Insured), hunting, motor rallies and racing of any kind other than on foot.
- 3.3 Sickness or illness, childbirth or pregnancy or any medical condition, pre-existing conditions, physical defect or infirmity notwithstanding that such event may have accelerated or induced by accident.
- 3.4 Full-time military or police personnel, other than Insured Person engaging in peacetime reservist, military training and exercise including travelling in military vehicles.
- 3.5 Any consequence of declared or undeclared war or any act thereof, invasion or civil war.
- 3.6 Flying or other aerial activity except participating in Co-Curricular Activities (CCAs) or as a fare-paying passenger in an aircraft provided and operated by a commercial airline or air charter company which is duly licensed for the regular transportation of such passenger.
- 3.7 Any consequence of accidents whilst working either on a part-time or full-time basis.
- 3.8 Cosmetic (aesthetic), Plastic or Reconstructive Surgery/Treatment, or any treatment relates to or is needed because of previous cosmetic treatment.

4. TABLE OF BENEFITS

The Benefits are stated in Appendix 1.

Medical Expenses shall be payable up to a maximum of S\$8,000 any one accident during the Period of Insurance.

Hospital Allowance shall be payable up to a maximum of S\$6,000 in respect of any one accident when the Person is hospitalised as an in-patient and shall be calculated on a per-day basis.

When more than one infirmity arises from one accident, the aggregate sum payable shall not exceed S\$25,000 excluding Funeral Expenses.

5. EXTENSIONS

It is hereby declared and agreed that this Policy is extended to cover the following:

- 5.1 The Insured Persons whilst participating in ALL Co-Curricular Activities (CCAs) and their respective activities organised by the Insured and/or approved by The Ministry of Education (MOE), and/or The Ministry of Social and Family Development (MSF) and/or The Early Childhood and Development Agency (ECDA) and/or the relevant governing bodies.
- 5.2 The Insured Persons whilst on approved job-orientation arranged by the Insured during the school vacation.
- 5.3 Accidental Death or Bodily Injury to the Insured Persons arising out of lightning strikes, accidental drowning, suffocation, riot and civil commotion.

5.4 Accidental Death or Permanent Total Disablement to the Insured Person arising out of:

“Disappearance”

If the body of the insured Person has not been found within 12 months from the date of the disappearance following sinking or wrecking or destruction of that aircraft or conveyance in which he was travelling at the time of the injury and under such circumstances as would otherwise be covered hereunder the disappearance of the Insured Person shall be considered as constituting a claim but only under Item 3 – Accidental Death of this Policy. This payment is made subject to the requirement that the Insured Person’s legal personal representatives must provide a signed undertaking to the Company to guarantee that if it is subsequently found that the Insured Person is living, they undertake to and shall on demand, return to the Company any sums the Company have paid under this Policy.

“Exposure”

If following an accident the Insured Person is unavoidably exposed to the natural elements and as a result of such exposure suffers an injury as specified in the Table of Benefits, such injury shall be considered as constituting a claim but only under Item 3 – Accidental Death and Item 4 – Permanent Disablement of this Policy.

- 5.5 The Insured Persons whilst travelling including by motorcycle (both as pillion and rider) to and from his place of residence or the Insured premises or place where the CCA is held for the purpose of the Insured’s official activity. Provided that any such event giving rise to a claim under the Policy is not incurred during or after any substantial interruption or deviation from the journey made for a reason unconnected with the Insured’s official activity which would ordinarily have materially added to the risk of injury.
- 5.6 Accidental Death or Bodily Injury to the Insured Persons during official school hours and/or CCAs arising out of rock climbing (as a CCA), food poisoning, horse-riding, scuba-diving, unprovoked assault and murder.
- 5.7 Injuries caused by and/or arising out of bee, wasp and hornet stings and animal bites.
- 5.8 Bites by Aedes mosquitoes resulting in dengue fever.
- 5.9 Fainting during CCAs resulting in Bodily Injury.
- 5.10 Treatments by Chinese Physicians on injuries up to a limit of S\$200 any one accident subject to a maximum of S\$40 per visit.
- 5.11 The Principal, Vice-Principal(s), Teachers, Executive and Administrative Staff during official working hours and/or whilst on official duties both in Singapore and overseas.
- 5.12 All the Part-time Employees whilst on official duties.
- 5.13 All the Members of the Advisory or Management Committee whilst engaged in official matters or activities organised by the Insured.
- 5.14 All the Committee Members of the Insured’s Alumni whilst engaged in official matters or activities organised by the Insured.
- 5.15 All the Parent/Community/School Volunteers or the Parent Support Group/Parent-Teacher Association (registered or ad-hoc) whilst engaged in official matters or activities organised by the Insured or its Alumni.
- 5.16 In the event of Death occurring during school hours or arising out of school activities or during CCAs, accidental or otherwise, the Company shall pay S\$1,500 Funeral Expenses. This Benefit shall be in addition to other Benefits payable under the Policy.

6. GENERAL CONDITIONS

6.1 Interpretation

This Policy and the Schedule shall be read together as one contract and any word or expression to which a specified meaning has been attached in any part of this Policy or the Schedule shall bear such specified meaning wherever it may appear.

6.2 Claims Notification

Every notice or communication to be given or made under this Policy shall be delivered in writing to the Company. No change in this Policy shall be valid unless approved by an Authorised Representative of the Company and such approval shall be endorsed hereon.

6.3 Fraud

If any claim under this Policy shall be in any respect fraudulent or if any fraudulent means or devices shall be used by the Insured or the Insured Person or anyone acting on behalf of the Insured or the Insured Person to obtain any Benefit under this Policy, the Company shall be under no liability in respect of such claim.

6.4 Policy Not Assignable

This Policy is not assignable and the Company shall not be affected by notice of any trust charge lien assignment or other dealing with this Policy. The receipt of the Insured or his legal personal representative shall in all cases be an effectual discharge to the Company.

6.5 Claims Procedure

See attachment – Appendix 2.

6.6 Other Insurance (Applicable to Medical Expenses only)

If at the time of any claim for indemnity under Item 1 - Medical Expenses of the Table of Benefits, there shall be any other insurance covering the same Benefit, the Company shall not reimburse more than its rateable proportion of the Medical Expenses incurred. In the event of the Insured Person being covered under an insurance policy whereby it is a statutory requirement for such insurance policy to reimburse any Medical Expenses, the Company shall reimburse only after deduction of any such sum recovered from such insurance policy.

6.7 Cancellation

The Company may cancel this Policy by giving the Insured seven (7) days' notice by registered letter to the Insured at the Insured's last known address and in such a case the Company will return a proportion of the Premium corresponding to the unexpired Period of Insurance.

The Insured may also cancel the Policy by giving the Company a written notice and in such a case the Company will return the unexpired portion of the premium paid less fifteen percent (15%) for administrative expenses.

However, there should be no refund in premium to the Insured when:

- (a) claim(s) has been made or has arisen under the Policy;
- (b) one or more claims have been paid under or in connection with the Policy;
- (c) the Policy has been in force for nine (9) months or more.

If the Policy is cancelled prior to the effective date of the insurance, a minimum premium of S\$50.00 (before GST) will be charged.

6.8 Arbitration

If any difference shall arise as to the amount to be paid under this Policy (liability being otherwise admitted) such difference shall be referred to an arbitrator to be appointed in accordance with the statutory provisions in that behalf for the time being in force. Where any difference is by this condition to be referred to arbitration the making of an award shall be a condition precedent to any right of action against the Company.

6.9 Jurisdiction

This Policy shall be constructed according to and governed by the laws of the Republic of Singapore.

7. CONDITION PRECEDENT (Applicable to New Policyholders only)

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

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

8. PREMIUM PAYMENT WARRANTY

- 8.1 Notwithstanding anything herein contained but subject to Clause 2 hereof, it is hereby agreed and declared that if the period of insurance is 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 60 days of the:-
- (a) inception date of the coverage under the policy, renewal certificate or cover note; or
 - (b) effective date of each endorsement, if any, issued under the policy, renewal certificate or cover note.
- 8.2 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 60-day period referred to above, then:-
- (a) The cover under the policy, renewal certificate, cover note or endorsement is automatically terminated immediately after the expiry of the said 60-day period;
 - (b) The automatic termination of the cover shall be without prejudice to any liability incurred within the said 60-day period; and
 - (c) The Company shall be entitled to a pro-rata time on risk premium subject to a minimum of S\$25.
- 8.3 If the period insurance is less than 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.

9. AUTOMATIC ADDITION & DELETION CLAUSE

It is hereby declared and agreed that this Policy provides for the automatic addition of any new eligible person upon the date of joining the school, the Amount of Compensation for each Benefit being in accordance with the Table of Benefits normally provided for similar description or category of Insured Person as specified in the List of the Insured Persons of this Policy, and the automatic deletion of any existing Insured Person upon the date of leaving the school. The Insured shall pay an additional premium to the Company, if any, as the case may be.

10. TERRORISM EXCLUSION ENDORSEMENT (NMA2920 – 08/10/2001)

Notwithstanding any provision to the contrary within this insurance or any endorsement thereto it is agreed that this insurance excludes loss, damage, cost or expense of whatsoever nature directly or indirectly caused by, resulting from or in connection with any act of terrorism regardless of any other cause or event contributing concurrently or in any other sequence to the loss.

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

This endorsement also excludes loss, damage, cost or expense of whatsoever nature directly or indirectly caused by, resulting from or in connection with any action taken in controlling, preventing, suppressing or in any way relating to any act of terrorism.

If the Underwriters allege that by reason of this exclusion, any loss, damage, cost or expense is not covered by this insurance the burden of proving the contrary shall be upon the Insured.

In the event any portion of this endorsement is found to be invalid or unenforceable, the remainder shall remain in full force and effect.

11. EXCLUSION OF THE CONTRACTS (RIGHTS OF THIRD PARTIES) ACT 2001

A person 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.

12. IT CLARIFICATION CLAUSE

Property damage covered under this Policy shall mean physical damage to the substance of property.

Physical damage to the substance of property shall not include damage to data or software, in particular any detrimental change in data, software or computer programs that is caused by a deletion, a corruption or a deformation of the original structure.

Consequently the following are excluded from this Policy.

- (a) Loss of or damage to data or software, in particular any detrimental change in data, software or computer programs that is caused by a deletion, a corruption or a deformation of the original structure, and any business interruption losses resulting from such loss or damage. Notwithstanding this exclusion, loss or damage or damage to data or software which is the direct consequence of insured physical damage to the substance of property shall be covered.
- (b) Loss or damage resulting from an impairment in the function, availability, range of use or accessibility of data, software or computer programs, and any business interruption losses resulting from such loss or damage.

13. 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 refer to our website at www.lonpac.com.sg or visit the General Insurance Association (GIA) or SDIC websites (www.gia.org.sg or www.sdic.org.sg).

APPENDIX 1 – TABLE OF BENEFITS (BASICPLUS PLAN)

The EVENT

Injury occurring during the Period of Insurance resulting directly and solely of any other cause in:

Main Benefits*

1.	Medical Expenses (in accordance with Schedule of Payment listed below)	Up to S\$8,000
2.	Hospital Allowance Benefit (Daily allowance of S\$15)	Up to S\$6,000
3.	Accidental Death Benefit including lightning strike, drowning, murder and assault	S\$25,000
4.	Permanent Disablement Benefits (refer to Table of Benefits)	Up to S\$25,000
5.	Special Grant (Funeral Expenses)	S\$1,500

Medical Expenses (Schedule of Payment – Up to S\$8,000 per accident)

1.	Out-Patient Benefits (Up to a limit of S\$1,000) (includes minor/day surgery at a clinic/hospital, ambulance fees & follow-up treatments)	
1.1	Accidental Emergency/Clinical Treatments (GPs/A&E/Polyclinics/SOC)	Up to S\$350
1.2	Accidental Dental Treatments	Up to S\$450
1.3	Chinese Physicians (maximum S\$40 per visit)	Up to S\$200
2.	In-Patient Benefits (Up to a limit of S\$7,000) (if hospitalised for more than 20 hours)	
2.1	Hospital Accommodation (including ICU) – daily @ S\$120 up to 45 days	Up to S\$5,400
2.2	Professional Fees (Physician/Surgeon/Anaesthetist fees)	Up to S\$400
2.3	Ancillary Charges (X-rays, prescriptions, medical supplies, operating theatre)	Up to S\$800
2.4	Post-hospitalisation Treatments	Up to S\$400

Permanent Disablement Benefits (Table of Benefits)

1	Loss of two limbs	S\$20,000
2	Loss of both hands, or all fingers and both thumbs	S\$20,000
3	Total loss of sight of both eyes	S\$20,000
4	Total paralysis	S\$25,000
5	Injuries resulting in being permanently bedridden	S\$20,000
6	Any other injury causing Permanent Total Disablement	S\$20,000
7	Loss of arm or hand	S\$10,000
8	Loss of arm at shoulder	S\$10,000
9	Loss of arm between shoulder and wrist	S\$10,000
10	Loss of arm at elbow	S\$10,000
11	Loss of arm between elbow and wrist	S\$10,000
12	Loss of arm at wrist	S\$10,000
13	Loss of leg or foot	S\$10,000
14	Loss of leg - at hip	S\$10,000
15	- between knee and hip	S\$10,000
16	- below knee	S\$10,000
17	- fractured leg or patella with established non-union	S\$1,000
18	- shortening of leg by at least 5 cm	S\$1,000
19	Loss of - whole eye	S\$10,000
20	- sight of one eye	S\$10,000
21	- sight of one eye, except perception of light	S\$5,000
22	- lens of one eye	S\$5,000
23	Loss of four fingers and thumb of one hand	S\$7,500
24	Loss of four fingers	S\$4,500

25	Loss of thumb	-	both phalanges	S\$3,000
26	Loss of thumb	-	one phalanx	S\$1,500
27	Loss of index finger	-	three phalanges	S\$1,500
28		-	two phalanges	S\$1,000
29		-	one phalanx	S\$500
30	Loss of middle finger	-	three phalanges	S\$1,000
31		-	two phalanges	S\$800
32		-	one phalanx	S\$400
33	Loss of ring finger	-	three phalanges	S\$1,000
34		-	two phalanges	S\$800
35		-	one phalanx	S\$400
36	Loss of little finger	-	three phalanges	S\$1,000
37		-	two phalanges	S\$800
38		-	one phalanx	S\$400
39	Loss of metacarpals	-	first or second (additional)	S\$300
40		-	third, fourth or fifth (additional)	S\$200
41	Loss of toes	-	all	S\$5,000
42		-	great, both phalanges	S\$1,500
43		-	great, one phalanx	S\$500
44		-	other than great, if more than one toe lost, each	S\$300
45	Loss of hearing	-	both ears	S\$7,500
46		-	one ear	S\$5,000
47	Loss of speech			S\$7,500
48	Loss of speech and hearing in both ears			S\$10,000
49	Removal of lower jaw by surgical operation			S\$5,000
50	Cost of artificial limb			S\$3,000
	Third Degree Burns	-	Head – damage as a percentage of total body surface area	
51		-	equals to or greater than 2% but less than 5%	S\$5,000
52		-	equals to or greater than 5% but less than 8%	S\$10,000
53		-	equals to or greater than 8%	S\$15,000
	Third Degree Burns	-	Body – damage as a percentage of total body surface area	
54		-	equals to or greater than 2% but less than 5%	S\$5,000
55		-	equals to or greater than 5% but less than 8%	S\$10,000
56		-	equals to or greater than 8%	S\$15,000

Note: The aggregate of all Benefits payable in respect of any one accident shall not exceed S\$25,000.

The complete and irrecoverable loss of use of any member or members specified above shall be deemed to be loss of such member or members.

In the event of partial loss of any member or members specified above a proportionately lower percentage of compensation as decided by the Company shall be payable.

In the event of Permanent Disablement by physical loss or loss of use not specified in the Table in the Policy, the percentage of compensation shall be assessed by the Company at their absolute and sole discretion as the Company deem fit.

APPENDIX 2 – SUMMARY OF CLAIMS PROCEDURE

1. Reporting a Claim

In the event of any claim, the Claimant (the Insured Student/Parent/Guardian/Legal Representative) is advised to contact AB Lim Pte Ltd **directly** via

- | | |
|-----|--|
| 1.1 | Download and complete the Claim Form from www.ablim.com.sg |
| 1.2 | Email - claims@ablim.com.sg |
| 1.3 | Fax - 62769909 |
| 1.4 | Phone - 62722277 (Philip Leow) |

Please report all claims to us within 31 days from the date of accident.

2. Details to be Furnished

The following details are to be provided when reporting a claim:

- | | |
|------|--|
| 2.1 | Name of School/Education Institution |
| 2.2 | Name of Insured Person (Student/Staff) |
| 2.3 | Class and NRIC/FIN |
| 2.4 | Correspondence Address |
| 2.5 | Contact Numbers (Home/Office/Mobile) |
| 2.6 | Email Address |
| 2.7 | Date/Time/Place of Accident |
| 2.8 | Brief Account of the Accident |
| 2.9 | Nature of the Injury |
| 2.10 | Name/Bank Account of Payee |

3. Documents Required

To facilitate our claims documentation, the following documents are to be submitted to the Company within 365 days from the date of accident for claims processing:

- | | |
|-----|--|
| 3.1 | All Medical Bills / Receipts / Tax Invoices incurred for medical treatments and/or consultations. |
| 3.2 | A Medical Report (obtained at the Claimant's expense) must be furnished for claims exceeding S\$1,000. |
| 3.3 | For Motor-related accidents, a copy of the Police Report is required. |
| 3.4 | For Fatal cases, the following additional documents must be furnished: <ul style="list-style-type: none"> ✓ Coroner's report ✓ Birth Certificate ✓ Death Certificate ✓ Confirmation letter from the School/Education Institution |

4. Submission of Claims

Upon full recovery from the injury, the Claimant may either:

- | | |
|-----|---|
| 4.1 | email us the Claim Form and all the necessary documents (as listed under Item 3) in clear pdf or jpeg format. Kindly keep all the Original documents for at least 6 months from the date of submission and made readily available upon request or |
| 4.2 | send all the necessary documents by Registered Post to AB Lim's office.
(For our easy reference, please write down the Insured Person's Name & School/Education Institution on the envelope). |

For enquiries and claims, please contact:



AB LIM PTE LTD (UEN: 198804259D)

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