

FREELANCER EARNINGS PROTECTION INSURANCE (FLEP)

Important Notice

In accordance to Section 25(5) of the Insurance Act (Cap. 142), We would remind You that You must disclose to Us fully and faithfully all the facts You know or could reasonably be expected to know, otherwise You may not receive any benefit from this Policy.

General Terms

1. This Policy, Schedule, Endorsement, Application, Proposal form, Declaration and attached supporting documents together with other statements in writing, if any, are evidence of the contract between You and Us and shall hereinafter be referred to as the "Policy". The proposal made to Us in connection with this Insurance shall be the basis and forms part of this contract.
2. This Policy, Schedule, Endorsement, application, Proposal Form, Declaration and attached supporting documents together with other statements in writing, if any, are to be read as one document and any word or expression to which a specific meaning has been attached in any part shall bear the same meaning wherever it appears.
3. We shall provide the respective Insurance in the terms set out in this Policy, provided that You pay the premium in full and We agree to accept it.
4. The conditions which appear in this Policy, Schedule and Endorsement, if any, are part of the contract and must be complied with. Failure to comply may mean that You shall not be able to claim under this Policy.

Who is eligible

To be eligible under this policy, the insured must be:

- ✓ a Singaporean or Permanent Resident of Singapore;
- ✓ residing in Singapore;
- ✓ a self-employed person (SEP) and currently earning a daily income not less than the benefit limits applied for;
- ✓ at least 18 and not more than 75 years of age.

General Definitions

Accident / Accidental means an unforeseen event of violent, external and visible nature, occurring during the Period of Insurance, which results in Bodily Injury and/or Sickness.

Activation Period means the period needed to incept your coverage.

Age means Age attained.

Benefit means the respective Benefit, as stated in the Policy, Schedule and/or Endorsement payable by Us under the terms and conditions and exclusions in respect of each event or loss covered by this Policy.

Bodily Injury means damage caused to the body by an external force suffered during the period of insurance and which is caused by an Accident solely and independently of any other causes. This shall not include any medical conditions, diseases, or viral infections, even if these conditions resulted from, or are connected with the accident directly or indirectly.

Day Surgery means a surgery which is carried out by a surgeon but not on an inpatient basis.

Downgrade means a decrease in the level of Benefits and /or the removal of coverage of Your Policy.

Effective Date of Insurance means the inception date of insurance as specified on the Schedule.

Endorsement means written evidence of an agreed change to this Policy.

Excess Period means the period of time you have to be out of work due to Sickness or Bodily Injury before any Benefit will start accumulating and any claim payment will be made.

Family Member means the insured member's husband or wife, children, parents, siblings, parents-in-law, brothers-in-law, sisters-in-law, grandparents, grandparent-in-law, daughters-in-law, sons-in-law or grandchildren.

Hospital means any institution in Singapore which fully meets all of the following criteria:

- (a) maintains permanent and full-time facilities for care of overnight resident patients; and
- (b) diagnostic and therapeutic facilities for surgical and medical diagnosis and treatment and care of injured and sick persons by or under the supervision of a staff of Medical Practitioners; and
- (c) continuously provides twenty-four (24) hours a day nursing service supervised by qualified nurses; and
- (d) is not, other than incidentally, a mental institution or a place for rest or a place for the aged, drug addicts or alcoholics.

Inpatient means a day of which the Hospital makes a room and board charge for admission of a minimum period of twenty-four (24) hours on the recommendation of a registered Medical Practitioner.

Hospitalisation Leave means the period of hospitalisation as certified by the Medical Practitioner of a hospital.

Infectious Disease shall mean the definitive diagnosis of any of the following infectious diseases by a Medical Practitioner during the Period of Insurance and is supported by acceptable clinical, radiological, histological and laboratory evidence:

- 1) Hand, foot and mouth disease (HFMD)
- 2) Dengue fever (DHF)

- 3) Avian influenza or 'bird flu' due to influenza A viral strains H5N1, H9N2, H7N7, H7N9 or H1N1
- 4) Mumps
- 5) Rubella
- 6) Tuberculosis
- 7) Measles
- 8) Malaria
- 9) Anthrax infection
- 10) Yellow fever
- 11) Plague
- 12) Melioidosis or 'soil disease'
- 13) Rabies
- 14) Legionnaires' disease
- 15) Chikungunya
- 16) Nipah viral encephalitis
- 17) Japanese viral encephalitis
- 18) Variant Creutzfeldt-Jakob disease (vCJD) or 'mad cow disease'
- 19) Severe acute respiratory syndrome (SARS)
- 20) Middle-East respiratory syndrome coronavirus (MERS-CoV)
- 21) Zika virus
- 22) Group B Streptococcus infection Type III GBS ST283

Insured means the individual (or individuals) named in the schedule of lives as the person (or people) insured under this policy

Medical Practitioner means a registered and legally qualified physician, doctor or surgeon by a medical degree in western medicine and authorised by the medical licensing authority in Singapore to provide medical or surgical services within the scope of their licence and training. This cannot be You, Your family member, relatives, business partner, employer, employee or agent.

Medically Necessary means a medical service which is:

- (a) consistent with the diagnosis and customary medical treatment for a covered disability; and
- (b) in accordance with standards of good medical practices, consistent with current standard of professional medical care and of proven medical benefits; and
- (c) not for the convenience of the Insured or the Medical Practitioner, and unable to be reasonably rendered out of a hospital (if admitted as an inpatient); and
- (c) not of an experimental, investigational or research nature, preventive or screening nature.
- (d) not an elective treatment or a matter of personal choice

Own Account Workers refers to those workers who, working on their own account, hold the type of job defined as a 'self-employment job' and have not engaged on a continuous basis any 'employees' to work for them.

Outpatient means treatment by a registered medical practitioner and does not require a day admission or an overnight stay at a hospital

Period of Insurance means the period of cover as shown in the schedule.

Policyholder means the owner of this policy named in the schedule.

Pre-existing Medical Condition shall mean disabilities or conditions that Insured have reasonable knowledge of. Insured may be considered to have reasonable knowledge of a pre-existing medical condition if:

- (a) Insured had received or is receiving treatment; or
- (b) medical advice, diagnosis, care or treatment has been recommended; or
- (c) clear and distinct symptoms are or were evident; or
- (d) its existence would have been apparent to a reasonable person in the circumstances.

Pre-existing medical conditions will be covered after 12 months of continuous cover in this policy.

Renewal Date means one (1) day after the end of the existing Period of Insurance. The Policy is renewable at Our discretion.

Risk Classification of Insured Persons

Class 1 – Persons working indoor/office, non-manual and usually administrative work.

Class 2 – Persons working outdoor and/or non-hazardous manual work
(including but not limited to Grab/taxi drivers, food delivery and hawkers).

Class 3 – Persons who use motorcycle as daily mode of transport (rider/pillion rider) or Persons delivering work by Bicycle/E-scooter

Class 4 – Persons engaged in delivery work by Motorcycle

Schedule means the document which proves that you have the insurance cover, listing among other things, the policyholder, commencement date, and policy endorsement.

Schedule of Lives means a listing attached to this policy stating the names, particulars and coverage of the insured members under this policy.

Self-Employed Persons (SEP) refers to workers whom operate their own trade or business. They generally have significant autonomy over what assignments to accept and how, when and where they work. They are sometimes known loosely as “Freelancers” or “Independent Contractors”. More formally, they are known as “Own Account Workers”.

Sickness means a physical condition certified by a registered medical practitioner as a pathological deviation from the normal healthy state. This includes Infectious Diseases listed in the policy general definitions.

Specialist means a registered medical practitioner who has the extra qualifications and expertise needed to practice as a recognised specialist of diagnostic techniques, treatment and prevention, in a particular field of medicine including but not limited to neurology, pediatrics or orthopedic. They cannot be the insured member or the insured member’s family member or insured member’s business associates including any business partner, employers or employees.

Surgeon means a specialist who is qualified to perform surgery in accordance with the laws of the country in which the practice is granted.

Surgery means any invasive surgical intervention in accordance with Ministry of Health's (MOH) surgical code.

Upgrade shall mean an increase in a level of Benefit and/or the addition of coverage of Your Policy. It is subject to five (5) days Activation Period for the benefit upgrade from the last day of Your Period of Insurance. There will be no change to the existing coverage during the Activation Period and a prorated premium may be chargeable. Any Upgrade is also subject to Pre-existing Medical Condition exclusion.

Upgrade / Downgrade Effective Date shall mean 12.01am Singapore Time on the date We agree to provide an Upgrade/Downgrade of Your Policy and which in Your Policy Schedule recording that Upgrade or Downgrade, as the context might require.

Us/We/Our/Insurer/Company means Etiqa Insurance Pte. Ltd. (Company Reg. No. 201331905K).

Waiting Period means the period where no benefits will be paid unless it is due to accidental Bodily Injury.

You or Your means the policyholder referred to in the schedule.

What Does Your Policy Cover

This Policy is intended to protect the income loss of the insured due to Sickness or Bodily Injury which happens during the Period of Insurance and affecting the Insured's ability to perform work. The amount We will pay to the insured will depend on the conditions and maximum benefit limits as set out in the schedule,

1. Daily Income for Inpatient and Hospital Leave Benefit

We will pay the Insured the benefit as shown in the schedule, subject to the following:

- a) Insured member's stay in Hospital is for at least 6 hours;
- b) Hospital charges daily room and board after insured's stay at the hospital ; or
- c) Surgery performed on insured member at the hospital is a procedure listed in the Ministry of Health (MOH) table of surgical procedures
- d) Day Surgery

Includes any subsequent Hospitalisation Leave certification issued by the attending registered medical practitioner.

Payable after the Excess Period up to the maximum total of days as shown in the Schedule for each policy year.

2. Daily Income for Outpatient medical leave Benefit

We will pay the Insured the benefit as shown in the schedule, subject to the following;

- a) Medical leave certification is issued by a registered medical practitioner in Singapore as a result of Sickness or Bodily Injury.
- b) Medical leave certification is in a single medical certificate, given on insured member's first visit to a registered medical practitioner. Any subsequent medical leave certification given after the first visit will only be considered for the computation of this benefit at Our discretion on a case by case basis.

Payable after the Excess Period up to the maximum total of days as shown in the Schedule for each policy year.

General Exclusions (Applicable to all sections)

We shall not pay for any Benefits under this Policy caused by or contributed by or related to any of the following:

1. any pre-existing physical defect or infirmity, pregnancy, childbirth, abortion, miscarriage or any complication thereof; or
2. any medical or physical conditions arising within the seven (7) days of the effective date of reinstatement; or
3. any treatment or surgical operation for congenital conditions; or
4. any condition which is or results from erectile dysfunction and tests or treatment related to impotence or sterilization; or
5. any wilful or intentional acts of the Insured, suicide pacts or agreements or complications of suicide or attempted suicide, provoked homicide or assault or self-inflicted injury; or
6. any condition which is or results from intoxication by alcohol or drugs not prescribed by a Medical Practitioner; or
7. any condition, which is or results from a complication of infection with Human Deficiency Syndrome ("HIV"), any variance including Acquired Immune Deficiency Syndrome ("AIDS"), and AIDS Related Complications ("ARC"), or any opportunistic infections and/or malignant neoplasm (tumour) found in the presence of HIV, AIDS or ARC ;or
8. any mental and nervous disorders, including but not limited to insanity; or
9. any condition which is or results from a complication of venereal disease; or
10. all claims and losses based upon, arising out of, directly or indirectly resulting from or in consequence of, or any way involving:
 - (a) asbestos; or
 - (b) any actual or alleged asbestos related injury or damage involving the use, presence, existence, detection, removal, elimination or avoidance of asbestos or exposure or potential exposure to asbestos; or
11. any condition sustained whilst engaging in flying or other aerial activities other than in a fully licensed passenger carrying power driven aircraft as a passenger but not:
 - (a) as a member of the Aircrew and Airline personnel while flying in the course of occupation; or
 - (b) for the purpose of any trade or technical operation in or on the aircraft; or
12. the Insured taking part in naval, military, air force, police force, fire service department or any armed forces operation or any armed occupation. This exclusion does not apply to national service men and reservists undergoing peacetime military training and exercises, including travelling in military vehicles; or

13. the Insured engaging in diving, mining, logging, sawmilling, wood working, underground works, explosive making or handling or custodians or blasters, gas manufacturing or whilst on duty as a ship crew or fisherman; or
14. war, invasion, act of foreign enemy, hostilities or warlike operations (whether war be declared or not), civil war, and civil commotion assuming the proportions of or amounting to a popular uprising, military rising, mutiny, rebellion, revolution, insurrection, military or usurped power or confiscation, nationalization, requisition or destruction of or damage to property under the order of any government, public or local authority or martial law or state of siege or any of the events or causes which determine the proclamation or maintenance of martial law or state of siege; or
15. ionizing radiations or contamination by radioactivity from any nuclear fuel or nuclear waste from the combustion of nuclear fuel or nuclear weapons or materials. Solely for the purpose of this exclusion, combustion shall include any self-sustaining process of nuclear fission; or
16. engagement in a sport as an occupation and/or in a professional capacity and/or where the Insured would or could earn income or remuneration from engaging in such sport; or
17. racing risks of any kind other than racing on foot, swimming and racing in dinghies; or
18. any Infectious Disease which is announced or notified as an epidemic or pandemic by the Health Authority in Singapore or the Government of the Republic of Singapore; or a pandemic by the World Health Organisation. The cover for the epidemic or pandemic Infectious Disease shall cease from the date of such announcement or notification; or
19. You committing any unlawful acts or wilful exposure to unnecessary danger (such as jaywalking or speeding) except in an attempt to save human life, or
20. Extraction of impacted teeth or wisdom teeth, cosmetic or plastic surgery; or
21. any dental work or treatment, extraction of impacted teeth or wisdom teeth, eye examinations; or
22. anomalies and cosmetics or plastic surgery; or
23. any treatment for obesity, weight reduction or weight improvement.

General Conditions (Applicable to all sections)

1. Residential Qualification

In the event of change of residence, You shall notify Us in writing and the Insurance shall be terminated with effect from the date You leave Singapore. For this purpose, change of residence means living or intending to live outside Singapore in excess of twelve (12) consecutive calendar months.

2. Overseas Travel / Medical Treatment

We shall not pay any Benefit whilst the Insured is overseas.

3. Free Look Period

You have fourteen (14) days from the date You receive this Policy to examine the terms and conditions of the Policy and may cancel the Policy within the foregoing 14-day period by written request to Us in which case premiums paid will be refunded, if a claim has not been made under the Policy. If the Policy is sent by post, it is deemed to have been delivered in the ordinary course of post. Where the Policy is so cancelled, We will have no liability whatsoever under the

cancelled Policy and We will be entitled to recover any expense incurred by Us in underwriting the Policy. This provision is not applicable to any policies with Period of Insurance of less than a year and renewals.

4. Misstatement of Age

If the age of the Insured has been misstated and the premium paid as a result thereof is insufficient, any claim payable under this Policy shall be prorated based on the ratio of the actual premium paid to the correct premium which should have been charged for the year. Any excess premium, which may have been paid as a result of such misstatement of age, shall be refunded without interest.

5. Misrepresentation/Fraud

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

6. Change of Risk Class of Work

If You engage in any work in which a greater risk may be incurred than in the work disclosed in the application for this Policy without first notifying and obtaining Our written agreement (which may be subject to the payment of such reasonable additional premium as We may require as the consideration for such agreement), We will not pay nor be liable for any claim in respect or arising out of or in the course of such work.

7. Risk Class

We reserve the right to cancel this Policy from the Effective Date of Insurance should an incorrect risk class be indicated.

8. Portfolio Withdrawal Condition

We reserve the right to cancel the portfolio as a whole if We decide to discontinue underwriting this Insurance product. Cancellation of the portfolio as a whole shall be given by written notice to You at least thirty (30) days before the cancellation and We will run off all Policies to expiry of the period of cover within the portfolio

9. Payment of Benefit

Any Benefit payable under this Policy shall be paid to You or Your nominated beneficiary, if any, as stated in the Schedule or otherwise to Your estate. Any receipt by You or Your nominated beneficiary or estate of any Benefit payable under this Policy shall in all cases be deemed final and complete discharge of all of Our liabilities in respect of such Benefit.

10. Claim Procedures

- (a) All claims and relevant supporting documents must be notified to Us as soon as possible but not later than thirty (30) days after any event which may entitle You to claim under this Policy.
- (b) Any documents or evidence required by Us to verify the claim shall be provided by You at Your own expense and submitted via claims online.
- (c) Any medical examination if required by Us to verify the claim shall be at Our expense.

11. Incomplete Claims

Claims are not deemed complete and eligible benefits are not payable unless all relevant supporting documents for such claims have been submitted and agreed by Us. Any variation or waiver of the foregoing shall be at Our sole discretion.

12. Subrogation

If We shall become liable for any payment under this Insurance, We shall be subrogated to the extent of such payment to all Your rights and remedies against any party and shall be entitled at Our own expense to sue in Your name. You shall give or cause to be given to Us all such assistance in Your power as We shall require to secure the rights and remedies and at Our request shall execute or cause to be executed all documents necessary to enable Us to effectively to bring suit in Your name.

13. Interest and Currency

No amount payable under this Policy shall carry any interest. Premiums and eligible benefits payable under this Policy shall be in Singapore Dollars (SGD).

14. Other Insurance

No person shall be covered under more than one such identical Policy issued by Us. In the event You are covered under more than one such Policy, We shall consider You to be Insured under the Policy which was issued first (where the benefits provided under each such Policy are identical) or which provides the greatest amount of Benefit and We shall refund any duplicated premium payment which may have been made by You or on Your behalf.

15. Notice of Trust or Assignment

We shall not accept or be affected by notice of any trust or assignment or the like which relates to this Policy.

16. Legal Proceedings

No action at law or in equity shall be brought to recover on the Policy prior to expiration of sixty (60) days after written proof of loss has been furnished in accordance with the requirements of this Policy. If You fail to supply the requisite proof of loss as stipulated by the terms, provisions and conditions of this Policy, You may, within a grace period of one (1) calendar year from the time that the written proof of loss to be furnished, submit the relevant proof of loss to Us with cogent reason(s) for the failure to comply with the Policy terms, provisions and conditions. 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.

17. Alterations

We reserve the right to amend the terms and provisions of this Policy by giving thirty (30) days prior notice in writing by ordinary post to Your last known address in Our records, and such amendment will be applicable from the next renewal of this Policy. No alteration to this Policy shall be valid unless authorised by Us and such approval is endorsed thereon.

18. Contracts (Rights of Third Parties) Act (Cap.53B)

A person who is not a party to this Policy contract shall have no right under the Contracts (Rights of Third Parties) Act (Cap.53B) to enforce any of its terms.

19. Cancellation of Policy

(a) Cancellation by You

i. For annual coverage:

You can cancel Your Policy at the end of any Period of Insurance by giving Us at least thirty (30) days' prior written notice.

- ii. For monthly coverage:

You can cancel Your Policy at the end of any Period of Insurance by giving Us at least seven (7) days' prior written notice.

You shall not be allowed to reinstate Your Policy unless agreed by Us.

- (b) Cancellation by Us

We may cancel Your Policy by giving You at least thirty (30) days' prior written notice in writing to Your address on file.

- (c) Automatic cancellation

Cover under Your Policy will cancel automatically:

- i. If You cease to be a Singapore Citizen/Singapore Permanent Resident;
- ii. When You reach the age of seventy-six (76) years old;
- iii. If you are no longer a Self-Employed Person;
- iv. Upon the death of the Insured;
- v. Upon full payment of Benefits;
- vi. Upon failure of renewal due to non-premium payment; or
- vii. Upon termination by the Policyholder

This will be confirmed in writing. Thereafter, Your Policy will not be renewed.

- (d) Premium Position upon Cancellation (Annual Plan)

Months remaining on Your Annual Policy	11	10 - 9	8 - 7	6 - 5	4 - 3	2
Refund of premium payable (%)	60	50	40	30	20	10

No refunds will be provided if any claims have been paid out under the policy.

- (e) Cancelling weekly or monthly coverage means that Your Policy is no longer valid after the Period of Insurance, and will not be automatically renewed. No pro-rated premium refunds will be provided.

20. Renewal

Policy will be automatically renewed for monthly plans.

Premium payable will be adjusted according to the Insured's Age at the Renewal Date

Premium payable on Your Policy are not guaranteed and we reserve the right to amend the premium by giving You thirty (30) days written notice of any change to Your address in Our records.

21. Modification

We reserve the right to modify the terms and conditions of Your Policy within the Period of Insurance by giving You prior notice of at least thirty (30) days, and such modification shall be applicable from the effective date as stated in Our written notice to Your address on file.

No modification of Your Policy shall be valid unless approved in writing by Our authorised representative, and such approval shall be evidenced by way of an Endorsement to Your Policy issued by Us. No broker or agent has the authority to modify or to waive any of the terms and conditions of Your Policy

22. Benefits Limits

The maximum total amount We will pay under Your Policy is the limit specified in Your Schedule for each Benefit or the annual aggregate for both Benefits, whichever lower.

23. Commencement and Period of Your Policy

Your Policy begins from the inception date or the latest Renewal Date whichever is the later and continues for the Period of Insurance.

24. Governing Law

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

Payment Before Cover Warranty (Applicable to Individual Policyholders Only)

1. The premium due must be paid to the Insurer (or the intermediary through whom this Policy was effected) on or before the inception date or the Renewal Date of the coverage. Payment shall be deemed to have been effected to the Insurer or the intermediary when one of the following acts takes place:
 - (a) A credit or debit card transaction for the premium is approved by the issuing bank;
 - (b) A payment through an electronic medium including the internet is approved by the relevant party;
 - (c) A credit in favour of the Insurer or the intermediary is made through an electronic medium including the internet.
2. In the event that the total premium due is not paid to the Insurer (or to the intermediary through whom this Policy was effected) on or before the inception date or the Renewal Date, then the insurance shall not attach and no benefits whatsoever shall be payable by the Insurer. Any payment received thereafter shall be of no effect whatsoever as cover has not attached.
3. In respect of insurance coverage with Free Look provision, You may return the original policy document to the Insurer or intermediary within the Free Look period if You decide to cancel the cover during the Free Look period. In such an event, You will receive a full refund of the premium paid to the Insurer provided that no claim has been made under the insurance and the cover shall be treated as if never put in place.

Premium Payment Warranty (Applicable to Corporate Policyholders Only)

1. Notwithstanding anything herein contained but subject to clause 2 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 Us (or the intermediary through whom this policy was

effected) within sixty (60) days of the inception date of the coverage under the Policy, renewal certificate or cover note.

2. In the event that any premium due is not paid and actually received in full by Us (or the intermediary through whom this Policy was effected) within the sixty (60)-day period referred to above, then:-
 - (a) the cover under the Policy, renewal certificate or cover note is automatically terminated immediately after the expiry of the said sixty (60)-day period
 - (b) the automatic termination of the cover shall be without prejudice to any liability incurred within the said sixty (60)-day period; and
 - (c) We shall be entitled to a pro rata time on risk premium subject to a minimum of S\$25 (before GST).

Premium shall be based upon the Insured's attained Age as at the Effective Date of Insurance. Premium rates are not guaranteed and may be increased or varied by Us upon renewal of the Policy, based on Our portfolio claims experience in this class of business. We will advise You of the change in writing at least thirty (30) days before Your premium is increased or varied by Us. The revised premium rates will apply to all Insureds under the Policy.

Dispute Resolution

Any dispute arising from a matter that is related to or in connection with this Policy shall be referred to the Financial Industry Disputes Resolution Centre Ltd ("FIDReC"). This would apply as long as the dispute can be brought before FIDReC.

In the event that the dispute cannot be referred to or dealt with by FIDReC, it shall be referred to and resolved by arbitration in Singapore in accordance with the Arbitration Rules of the Singapore International Arbitration Centre which shall be applicable at that time.

Personal Data Use

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

Policy Owners' Protection Scheme

This policy is protected under the Policy Owners' Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for 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 or visit the General Insurance Association (GIA) or SDIC web-sites (www.gia.org.sg or www.sdic.org.sg).

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