ETIQA LIFE INSURANCE POLICY ETIQA TERM PLUS

This Policy is the entire contract between You and Us

This Policy forms the entire contract between You and Us, and consists of:

- 1) The Policy;
- 2) The Policy Information Page;
- 3) The Application Form;
- 4) The Policy Information Statement; and
- 5) Any Endorsements We may issue on this Policy.

Any change to this Policy must be contained in the Endorsement made to it by Etiqa Life Insurance Berhad.

As this is the legal contract between You and Us, please read Your Policy carefully and confirm that this life insurance plan meets Your requirements.

POLICY INFORMATION STATEMENT

Please inform Us immediately of any change of address of the Policy Owner or the Nominee, to ensure that there will be no interruption in communication from Us to You, and the Nominee.
Each Policy Owner has the obligation to pay the Premium to Us, according to the mode of Premium and other terms as agreed between the Policy Owner and Us.
You are given a Grace Period of thirty-one (31) days to pay the Premium due. If We do not receive Your Premium within the Grace Period, Your Policy may Lapse, except as stated under the Premiums, Lapse and Termination Provisions.
The Premium is paid by deduction of the Policy Owner's Kumpulan Wang Simpanan Pekerja (KWSP) account, subject to terms and conditions by KWSP.
However, for Policy Owner whose age is fifty-five (55) and above, and has insufficient fund in the KWSP Account 2, You may pay the Premiums by:
1) online banking;
2) credit card;
3) debit card; or
4) banking account auto debit service.
Once the above Premium paying method is opted, no reversion to KWSP account is allowed.
We reserve the right to vary the manner of payment from time to time, which shall be communicated to You via such channels or mediums as We may determine.
The Policy Owner has the right to terminate the Policy, for any reason.
In the event of termination within fifteen (15) days of the Free Look Period. We will cancel this Policy and refund the Premiums received by Us.
For request of cancellation of the Principal Life Insured's policy within the Free Look Period, We shall terminate this Policy and refund You the total Premiums received under the Family Package.
Notification must be received by Us during the Free Look Period. The Policy will be deemed to be received by Us on the date it is personally delivered, the date of posting if sent to Us by registered post, or on the date of transmission if electronically transmitted.
In the event of termination after the Free Look Period, the Policy Owner will not be receiving any surrender benefit under the Policy.
For request of cancellation of the Principal Life Insured's policy after the Free Look Period, We shall terminate this Policy under the Family Package.
In the event of unsuccessful Premium payment to Us for the Policy, We shall have the right to void the Policy from the day the application was accepted.
Where the Policy Owner is the Life Insured, the Policy Owner of the Policy may nominate a person to receive Insurance Benefit payable upon the death of the Life Insured.
The nomination must be registered with Us, and may be made: 1) At the time of application; or



	2) By notifying Us in writing, at any time after the issuance of the Policy.
	The Policy Owner may specify the shares to be paid to the Nominee. In the absence of such specified shares by the Policy Owner, We shall pay the Nominee in equal shares.
	A nomination by the Policy Owner under a Trust, regardless of any written law, shall not form part of the estate of the Life Insured, or be subject to his or her debt.
	Upon the payment of Insurance Benefit, We shall be discharged from any further liability under the Policy.
Right to revoke a	A nomination shall be revoked:
nomination	Upon the death of the Nominee or where there is more than one Nominee, upon death of all the Nominees, during Your lifetime;
	2) By a notice in writing from the Policy Owner to Us; or
	3) By any subsequent nomination by the Policy Owner to Us.
	Subject to the above, a nomination shall not be revoked by a will or by any other act, event or means. Revocation of nomination requires the consent from the trustee if there is a Trust policy created.
	Where there is more than one Nominee and one of the Nominees who is nominated as an executor predeceases the Policy Owner, in the absence of any subsequent nomination by the Policy Owner disposing of the share of the deceased Nominee, We shall pay the share to the remaining Nominees in proportion to their respective shares.
Sales illustration	Any sales illustration that You have received is strictly for Your reference only to understand the benefits, the main terms and conditions of the Policy.
	The sales illustration is not intended to be a legally binding contract between You and Us.
Our Head Office	Our Head Office address is:
Address	Etiqa Life Insurance Berhad
	Level 19, Tower C,
	Dataran Maybank,
	No 1, Jalan Maarof, 59000 Kuala Lumpur.
	Telephone Number: 03-2297 3888
	Facsimile Number: 03-2297 3800
	E-mail: info@etiqa.com.my
The claim process and how to make a claim	The Claimant must notify Us of a claim for any Insurance Benefit by writing to Our contact address, within the notification timeframe. The claim notification must include the Life Insured's proof of age such as a copy of the identity card, passport, and other required claim documentation. The claim notification period and claim documentation is specific to the type of Insurance Benefit according to the terms and conditions of the Policy.
	Claim notification may be submitted after the notification timeframe, if it can be shown that notice was given as soon as it was reasonably possible.
	Should there be any assistance required when making a claim, the Claimant should contact Etiqa Oneline at 1-300-13-8888.
	Additional documentation may be requested by Us when the Claimant notifies Us of a claim, or following a preliminary assessment by Us of the documentation accompanying the claim form. The Claimant will be notified in writing of any additional documentation requirements.
	Documentation supporting a claim shall be provided at the Claimant's own cost.
	Once all documentation is received by Us, We will admit or reject the claim for Insurance Benefits according to the terms and conditions of the Policy. Our claim decision will be advised to the Claimant in writing. We reserve the right to deduct any related charges and outstanding amounts owing to Us before any claim is payable under this Policy.
How to contact Us	If You need to contact Us, have any questions relating to the Policy, or have a request to change the contents of the Policy, please write to Our postal address: Etiqa Life Insurance Berhad, Dataran Maybank, No. 1, Jalan Maarof, 59000 Kuala Lumpur; facsimile to 03-2297 3800, or e-mail to Us at info@etiqa.com.my , or by calling Etiqa Oneline at 1300-13-8888.
How to complain to Us	If a Claimant or Policy Owner is not satisfied with Our service under the Policy, please write to Our postal address: Complaint Management Unit, Etiqa Life Insurance Berhad, Level 6, Tower B, Dataran Maybank, No 1, Jalan Maarof, 59000 Kuala Lumpur; or by facsimile to 03-2297 1919, or e-mail at complaint_cmu@etiqa.com.my . Our telephone number is 1-300-13-8888 (for overseas callers, the number is +603-2780 4500).
How to complain to the government regulator	If a Claimant or Policy Owner is not satisfied with Our conduct, please write to the BNM, including details of the conduct, nature of their dispute, Our name, Policy number, and any correspondence between the Claimant or Policy Owner and Us.



The postal address for writing to BNM is: Director, Jabatan LINK dan Pejabat Wilayah, Bank Negara Malaysia, P.O. Box 10922, 50929 Kuala Lumpur; or by facsimile to 03-2174 1515; or e-mail at bnmlink@bnm.gov.my. The BNM telephone number is 1-300- 88- 5465.

How to settle a dispute through mediation

The Ombudsman for Financial Services (OFS) may be contacted by the Claimant or Policy Owner, in the event that the Claimant or Policy Owner is dissatisfied with the decision of Etiqa Life Insurance Berhad to a dispute, or Etiqa Life Insurance Berhad's failure to respond to a complaint within sixty (60) days. The OFS contact details are as follows:

Email : enquiry@ofs.org.my

or

Fax : 603-2272 1577

or

Postal address : Chief Executive Officer,

Ombudsman for Financial Services

Level 14, Main Block, Menara Takaful Malaysia, No.4, Jalan Sultan Sulaiman, 50000, Kuala Lumpur.

Alternatively, the Claimant or Policy Owner may file the dispute in person at the OFS office.

The OFS must be contacted within six (6) months from the date of the final decision from Etiqa Life Insurance Berhad to the dispute of the Claimant or Policy Owner.

For further details on the OFS, please obtain the information pamphlets from Etiqa Life Insurance Berhad or visit the OFS website at www.ofs.org.my.

Engagement of the OFS is subject to the terms of reference pursuant to section 126 of the Financial Services Act 2013. Contacting the OFS does not affect the Claimant's or Policy Owner's right to take legal action against Etiqa Life Insurance Berhad should they be dissatisfied with the outcome by the OFS.

How to settle a dispute through arbitration

If a Claimant or Policy Owner disputes a decision We have made relating to the Policy, and does not wish to mediate the dispute, nor accepts the OFS's decision following mediation, the Claimant or Policy Owner may refer to arbitration. Request for referral must be made within twelve (12) months from notification of the decision.

The Claimant or Policy Owner and We shall mutually agree to appoint a single Arbitrator. If the Claimant or Policy Owner and We cannot agree upon a single Arbitrator within one (1) month of the notice of arbitration, then the Claimant or Policy Owner and We shall each appoint an Arbitrator, and the two Arbitrators will appoint an umpire. The umpire shall sit with the Arbitrators and preside at their meetings. All appointments must be in writing by the respective parties making the appointment.

The single Arbitrator (in the case where the Claimant or Policy Owner and Us agree to a single Arbitrator), or the Arbitrators and umpire (in the case where the Claimant or Policy Owner and Us do not agree on a single Arbitrator), shall review the dispute and make a decision. The arbitration decision will cover the settlement of the dispute and the costs of arbitration. The decision of arbitration is not contestable and is binding on the Claimant or Policy Owner and Us.

Note: For further details, please refer to the full terms and conditions under the Policy.

GENERAL DEFINITIONS

This section identifies and defines phrases, words or abbreviations which are common throughout the Policy. These definitions are identified in upper case. Where these definitions are provided in the singular form, the interpretation will include the plural form, and vice versa according to the context.



Common Phrase, Word or Abbreviation	Definition
Accident	A sudden, unforeseen, violent and unplanned event which is external and visible in nature, that results in bodily injury.
Activities of Daily Living	Activities of Daily Living are as follows: 1) Transfer Getting in and out of a chair without requiring physical assistance; 2) Mobility The ability to move from room to room without requiring any physical assistance; 3) Continence The ability to voluntarily control bowel and bladder functions such as to maintain personal hygiene; 4) Dressing Putting on and taking off all necessary items of clothing without requiring assistance of another person; 5) Bathing or Washing The ability to wash in the bath or shower (including getting in or out of the bath or shower) or wash by any other means; and 6) Eating All tasks of getting food into the body once it has been prepared.
Arbitrator	An independent party, appointed to settle a dispute between a Claimant and Us, as an alternative to the courts. The Arbitrator is not BNM or OFS.
Bank Negara Malaysia, or BNM	The government body in Malaysia responsible for primary regulation of insurance companies. BNM's Customer Services Bureau provides an avenue for a party to file complaints against any misconduct or unfair market practice by Us.
Claimant	The Policy Owner, the Life Insured or the Nominee of the Policy Owner's estate, who is entitled to claim the Insurance Benefit, according to the terms and conditions of the Policy.
Commencement Date	The earliest date at which the Policy Owner is eligible for Insurance Benefit according to the terms and conditions of the Policy. The Commencement Date is provided in the Policy Information Page.
Endorsement	A change to the Policy. The Endorsement will be notified or issued by Us to You.
Expiry Date	The last date at which the Life Insured is eligible to Insurance Benefit according to the terms and conditions of the Policy. The Expiry Date is provided in the Policy Information Page.
Family Package	An insurance package for a family. The Life Insured under the Family Package is indicated in the Policy Information Page.
Free Look Period	This is the period of fifteen (15) days, from when the Policy was received by the Policy Owner.
Grace Period	The additional period of time that provided for Policy Owner to pay the Premium due. The Grace Period under this Policy is thirty-one (31) days from the date the Premium is due.
In Force	A status of the Policy reflecting the eligibility of a Policy Owner to Insurance Benefit according to the terms and conditions of the Policy. A Policy has the status of In Force at a point in time, if at that point in time all the following conditions are fulfilled: 1) We have issued the Policy to the Policy Owner; 2) The Life Insured is alive; 3) The Premiums due on the Policy have been received within the Grace Period by Us, according to the terms and conditions of the Policy; 4) The eligibility of the Policy Owner to Insurance Benefit has not been terminated or voided, according to the terms and conditions of the Policy; and 5) The Expiry Date has not been exceeded.
Insurance Benefit, or Benefit	The collective name for the payments made according to the terms and conditions of the Insurance Benefit section of the Policy.
Issue Date	The date that the Policy was issued by Us. The Issue Date is provided in the Policy Information Page.
Lapse(d)	A Policy has a Lapse status when the Premiums due have not been received by Us within the Grace Period



Life Insured	The person named as the Life Insured in the Policy Information Page as the life being insured. The Life Insured does not have any right to the Policy, unless the Life Insured is also the Policy Owner.
Material Information	Any information (including reports), answers, and disclosures provided by the Policy Owner or Life Insured, or a third party on behalf of the Policy Owner or Life Insured, which is:
	In respect of the Life Insured or Policy Owner; and
	Is provided prior to the Issue Date or the latest endorsement date.
Nominee	The person that You have nominated to receive the Insurance Benefit payable under the Policy upon the death of the Life Insured. The nomination must be registered with Us.
Non-Participating	This is a Non-Participating Policy. The Policy shall not share in the profit or surplus of the Company's fund.
Ombudsman for Financial Services, or OFS	An independent body set up to help settle disputes between a Claimant and Us, as an alternative to the courts.
Overseas	Foreign countries other than Malaysia.
Personal Data	Shall have the same meaning ascribed to it as under section 4 of the Personal Data Protection Act 2010. Personal Data refers to the information, reports, answers, and disclosures provided by the Policy Owner or the Life Insured, or a third party on behalf of the Policy Owner or Life Insured, which is in respect of the Life Insured or Policy Owner.
	Personal Data does not include information, reports, answers, and disclosures which are in the public domain.
Policy	This document, and all subsequent Endorsements which are identified as relating to this document.
Policy Anniversary	The anniversary of the Commencement Date.
Policy Owner, You, or Your	The entity or person named as the Policy Owner in the Policy Information Page. The Policy Owner has full right to the Policy.
Policy Year	Any one (1) year period that starts on the Commencement Date, or a subsequent Policy Anniversary.
Premium	The amount of money paid regularly by the Policy Owner to Us, according to the terms and conditions of the Policy.
Principal Life Insured	One of the lives insured under a Family Package. The principal life insured is also the policy owner of all policies under a Family Package. The Principal Life Insured of this Policy, if any, is provided in the Policy Information Page.
Sane	A state of mind which permits normal perception, behaviour, and social interactions. A person is not regarded as Sane if that person:
	Has been certified as insane by a psychiatrist, where the psychiatrist is licensed and recognised as a psychiatrist in Malaysia; and
	 Is undergoing regular treatment by the psychiatrist for the cause, condition or outcome directly related to insanity.
Sum Insured	The amount of insurance coverage provided by the Policy. The Sum Insured is provided in the Policy Information Page.
Trust	A nomination by the Policy Owner, other than a Muslim Policy Owner, shall create a Trust in favour of the Nominee of the Insurance Benefit payable under the Policy upon the death of the Life Insured if:
	1) The Nominee is his or her spouse or child; or
	2) The Nominee is his or her parent, where there is no spouse or child living at the time of nomination.
	A Policy Owner may appoint a trustee for the Policy moneys and in the event of failure to do so, the competent Nominee; or where the Nominee is incompetent to contract, the parent of the incompetent Nominee other than the Policy Owner and where there is no surviving parent, the public trustee or a trust company nominated by the Policy Owner, shall be the trustee.
	For a Muslim Policy Owner, no Trust policy shall be created. The Nominee of a Muslim Policy Owner shall receive the Insurance Benefit payable upon the death of the Life Insured as an executor and not solely as a beneficiary.
We, the Company, Our, or Us	Etiqa Life Insurance Berhad.



GENERAL TERMS AND CONDITIONS

Contract Basis	The Policy, Policy Information Page and Endorsement, if any, are evidence of the contract between the Policy Owner and Us. The application made to Us, and such additional information disclosed to Us in connection with this insurance coverage shall form part of this contract.
Headings and Tables	Unless indicated otherwise, headings and tables within the Policy are inserted for convenience only, and shall not affect the interpretation of the Policy.
How to contact Us	If You need to contact Us, have any questions relating to the Policy, or have a request to change the contents of the Policy, please write to Our postal address: Etiqa Life Insurance Berhad, Dataran Maybank, No. 1, Jalan Maarof, 59000 Kuala Lumpur; facsimile to 03-2297 3800, or e-mail to Us at info@etiqa.com.my , or by calling Etiqa Oneline at 1300-13-8888.
Currency for all payments	All payments under the Policy shall be made in the legal currency of Malaysia.
Applicable law	The Policy shall be interpreted and governed by the legislation of Malaysia.
Changes in taxation, regulations and legislation	We may vary the terms of the Policy, if there are changes in taxation, regulations or legislation that affect this Policy. We shall notify You in writing when terms in this Policy need to be changed.
Sanction limitation and exclusion clause	This Policy shall not provide cover and We shall not be liable to pay any claim or provide any Benefit hereunder to the extent that the provision of such cover, payment of such claim, or provision of such Benefit would expose Us to any sanction, prohibition or restriction under the United Nations resolutions, or trade or economic sanctions, laws or regulations of the European Union, United Kingdom or United States of America or any of its states, and/or any other applicable economic or trade sanction laws or regulations. We may terminate this Policy with immediate effect and shall not thereafter be required to transact any business with You in connection with this Policy.

GENERAL RIGHTS AND OBLIGATIONS

Conditions precedent to rights	The Policy Owner and Life Insured due observance and fulfilment of the terms and conditions of the Policy, shall be conditions precedent to the rights under the Policy.
Options to change the Sum Insured	The Policy Owner may reduce the Sum Insured by written notice to Us, subject to the terms and conditions of the Policy.
	Increase of Sum Insured is not allowed for this plan. Should the Policy Owner wish to have a higher Sum Insured, a new plan should be applied, subject to the terms and conditions of the Policy.
Right to terminate the	The Policy Owner has the right to terminate the Policy, for any reason.
Policy	In the event of termination within fifteen (15) days of the Free Look Period. We will cancel this Policy and refund the Premiums received by Us.
	For request of cancellation of the Principal Life Insured's policy within the Free Look Period, We shall terminate this Policy and refund You the total Premiums received under the Family Package.
	Notification must be received by Us during the Free Look Period. The Policy will be deemed to be received by Us on the date it is personally delivered, the date of posting if sent to Us by registered post, or on the date of transmission if electronically transmitted.
	In the event of termination after the Free Look Period, the Policy Owner will not be receiving any surrender benefit under the Policy.
	For request of cancellation of the Principal Life Insured's policy after the Free Look Period, We shall terminate this Policy under the Family Package.
	In the event of unsuccessful Premium payment to Us for the Policy, We shall have the right to void the Policy from the day the application was accepted.
Right to terminate due to anti-money laundering and counter financing of terrorism	If We discover, or have justified suspicion, that the Policy is exploited for money laundering activities or to finance terrorism, We reserve the right to terminate the Policy immediately. We shall deal with all Premiums paid and all benefits or sums payable in respect of the Policy in accordance with any applicable laws.

Obligation to correct mistakes and errors

We shall correct any mistake or error made in the Policy as soon as We are aware of, or are informed of, such mistake or error. Our correction will be made via an Endorsement to the Policy, and will be valid from the Commencement Date of the Endorsement.

Data protection obligations and rights

We shall be able to process Personal Data according to the section 4 of the Personal Data Protection Act 2010. We shall be able to disclose Personal Data provided by the Policy Owner or the Life Insured, as the context may require, to:

- Etiqa Life Insurance Berhad, Etiqa Family Takaful Berhad, Etiqa Life International (L) Ltd or Etiqa Offshore Insurance (L) Ltd;
- 2) Other entities within the Maybank Group;
- Our authorised agents and service providers with whom We have contractual agreements to provide functions, services and activities;
- Other insurance companies or Takaful operators and distribution partners (such as, banks, Islamic banks, insurance brokers, Takaful brokers, reinsurance companies, Retakaful operators);
- 5) Industry trade associations such as Life Insurance Association of Malaysia (LIAM), Persatuan Insurans Am Malaysia (PIAM) and Malaysian Takaful Association (MTA);
- 6) Our merchants and strategic partners;
- 7) Any parties authorised by the Policy Owner or a Life Insured (from time to time); or
- 8) Regulatory enforcement and governmental agencies as permitted or required by law, authorised by any order of court or to meet obligations to regulatory authorities.

The Policy Owner and Life Insured will keep Us updated in respect of all such Personal Data as soon as is practical.

We shall not be liable for any direct or indirect loss or damage due to any inaccuracy or incompleteness in the Personal Data provided to Us.

We may from time to time request that the Policy Owner and Life Insured provide other Personal Data required for the purposes of the Policy.

Prior to providing Us with the Personal Data of any individual, the Policy Owner or Life Insured providing the Personal Data, must inform that individual of Our privacy notice.

For the detailed privacy notice on how We collect, use, process, protect and disclose Personal Data, please visit Our branches, contact Etiqa Oneline at 1-300-13-8888, or refer to Our website at www.etiqa.com.my.

Obligation to take reasonable care and not to misrepresent

It is the duty of the Policy Owner and Life Insured to take reasonable care not to make a misrepresentation when answering the questions or making the disclosures, when:

- 1) Making an application;
- 2) If varying the Policy; and
- 3) If required by Us to confirm answers or declarations previously provided.

This duty shall continue until the Commencement Date of the Policy, or the effective date of a subsequent variation.

In the event that We identify misrepresentation within two (2) years of the later of the Commencement Date, the remedies of the Financial Services Act 2013 will apply.

We can only challenge a Policy for misrepresentation more than two (2) years from the later of the Commencement Date, if We are able to show that the Policy Owner or the Life Insured suppressed or fraudulently provided Material Information, which if known by Us, would have led to Our refusal to issue the Policy, or would have led Us to impose terms and conditions less favourable than those imposed in the Policy. In such an event the remedies of the Financial Services Act 2013 will apply.

Non-disclosure or misrepresentation of Material Information

In the event that We terminate this Policy due to misrepresentation or non-disclosure of Material Information, the remedies of the Financial Service Act 2013 will apply.

Right to adjust terms for misstatement of age and sex

If the age or sex of the Life Insured has been misstated, resulting in a shortage of Premium, the Sum Insured for that Life Insured will be reduced based on the amount that corresponds to the correct age and sex.

If the misstatement of age or sex of the Life Insured resulted in an excess of Premium, then We shall refund the excess to the Life Insured.

The adjustment to Sum Insured or the refund will be based on Our Premium rates in effect at the Commencement Date.

In the event that the Life Insured is not eligible for the insurance cover at the correct age and/or sex, the Policy will be voided. We shall refund the total Premiums paid without interest.

Right to waiver and non-waiver of rights	A delay or failure by Us to exercise or enforce any rights under the Policy, shall not be deemed as a waiver of any such rights, or termination of those rights. Waiver of any right by Us shall only be valid when confirmed in writing provided such delay or failure to exercise or enforce is still within the statutory limitation period under any applicable laws.
Right to nominate Insurance Benefit	Where the Policy Owner is the Life Insured, the Policy Owner of the Policy may nominate a person to receive Insurance Benefit payable upon the death of the Life Insured.
	The nomination must be registered with Us, and may be made:
	1) At the time of application; or
	2) By notifying Us in writing, at any time after the issuance of the Policy.
	The Policy Owner may specify the shares to be paid to the Nominee. In the absence of such specified shares by the Policy Owner, We shall pay the Nominee in equal shares.
	A nomination by the Policy Owner under a Trust, regardless of any written law, shall not form part of the estate of the Life Insured, or be subject to his or her debt.
	Upon the payment of Insurance Benefit, We shall be discharged from any further liability under the Policy.
Right to revoke a nomination	A nomination shall be revoked:
	Upon the death of the Nominee or where there is more than one Nominee, upon death of all the Nominees, during Your lifetime;
	2) By a notice in writing from the Policy Owner to Us; or
	3) By any subsequent nomination by the Policy Owner to Us.
	Subject to the above, a nomination shall not be revoked by a will or by any other act, event or means. Revocation of nomination requires the consent from the trustee if there is a Trust policy created.
	Where there is more than one Nominee and one of the Nominees who is nominated as an executor predeceases the Policy Owner, in the absence of any subsequent nomination by the Policy Owner disposing of the share of the deceased Nominee, We shall pay the share to the remaining Nominees in proportion to their respective shares.

INSURANCE BENEFITS

The claim process and how to make a claim	The Claimant must notify Us of a claim for any Insurance Benefit by writing to Our contact address, within the notification timeframe. The claim notification must include the Life Insured's proof of age such as a copy of the identity card, passport, and other required claim documentation. The claim notification period and claim documentation is specific to the type of Insurance Benefit according to the terms and conditions of the Policy.
	Claim notification may be submitted after the notification timeframe, if it can be shown that notice was given as soon as it was reasonably possible.
	Should there be any assistance required when making a claim, the Claimant should contact Etiqa Oneline at 1-300-13-8888.
	Additional documentation may be requested by Us when the Claimant notifies Us of a claim, or following a preliminary assessment by Us of the documentation accompanying the claim form. The Claimant will be notified in writing of any additional documentation requirements.
	Documentation supporting a claim shall be provided at the Claimant's own cost.
	Once all documentation is received by Us, We will admit or reject the claim for Insurance Benefits according to the terms and conditions of the Policy. Our claim decision will be advised to the Claimant in writing. We reserve the right to deduct any related charges and outstanding amounts owing to Us before any claim is payable under this Policy.

(I) DEATH BENEFIT

Insurance Benefits payable on Death	While this Policy is In Force, upon death of the Life Insured, a lump sum of the Sum Insured is payable, subject to restrictions and adjustments applicable to death Benefit.
Restrictions and adjustments to the death Benefit	The restrictions and adjustments applicable to the death Benefit are as follows: 1) On death directly or indirectly due to suicide, while Sane or insane, within one (1) year from the Issue Date of the Policy, We shall refund the total Premiums paid, without interest;



	2) On death due to non-accidental cause within one (1) year from the Issue Date of the Policy, the death Benefit payable is, refund of the total Premiums paid, without interest.
Notification timeframe for death claims	We must be notified of a death claim by the Claimant within thirty (30) days from the date of death. Failure to give notice within such time shall not invalidate any claim if it can be shown not to have been reasonably possible to give such notice and that notice was given as soon as it was reasonably possible.
Documents supporting a death claim	A claim form will be provided to the Claimant when they notify Us of a claim for the death Benefit. The Claimant must complete the claim form, and provide proof of age of the Life Insured such as copy of their identity card or passport, the death certificate, and any additional documentation, within thirty (30) days of notification.
Settlement terms for death Benefit	The death Benefit is paid as a single amount payable according to the shares specified to the nominee or trustee, where they have been nominated to receive the Insurance Benefits.
	On payment of the death Benefit, We are discharged from any further liability in respect of the Life Insured.

(II) TOTAL AND PERMANENT DISABILITY (TPD) BENEFIT

Benefit payable on TPD	While this Policy is In Force, upon TPD of the Life Insured, a lump sum of the Sum Insured is payable, subject to the restrictions and adjustments applicable to the TPD Benefit.
Restrictions and adjustments to the Benefit payable on TPD	The restrictions and adjustments applicable to the TPD Benefits are as follows: 1) The injury or sickness causing TPD and the TPD date must have occurred whilst the Policy is In Force; 2) No Benefit is paid on TPD directly or indirectly due to a TPD Benefit exclusion; and
	 On TPD due to non-accidental cause within one (1) year from the Issue Date of the Policy, the TPD Benefit payable is, refund of the total Premiums paid, without interest.
TPD Benefit exclusions	 No Benefit is paid on TPD occurring due to the following direct or indirect events or conditions: 1) Intentional self-inflicted injury or attempted suicide, whilst Sane or insane; 2) Participation in any criminal or illegal act, strike, riot, terrorism or civil commotion; 3) Participation in dangerous or hazardous sports or activities, flying or taking part in any form of aerial activities (except as a fare-paying passenger or crew member on a regular route operated by a commercial airline); 4) Consumption of alcohol, or non-prescribed or illegal drugs or narcotics; or 5) Human Immunodeficiency Virus (HIV) or Acquired Immune Deficiency Syndrome (AIDS).
Notification timeframe for TPD claims	We must be notified of a TPD claim by the Claimant within: 1) Thirty (30) days of TPD Date for Presumptive TPD; or 2) Six (6) months from TPD Date. Failure to give notice within such time shall not invalidate any claim if it can be shown not to have been reasonably possible to give such notice and that notice was given as soon as it was reasonably possible.
Documents supporting a TPD claim	A claim form will be provided when the Claimant notifies Us of a claim for the TPD Benefit. The Claimant must complete the claim form, and provide proof of age of the Life Insured such as a copy of their identity card or passport, a report on the medical assessment and any additional documentation, within thirty (30) days of the later of notifying the claim or fulfilling the definition of TPD. The medical assessment must be conducted by a medical doctor licensed to practise in Malaysia, within thirty (30) days after first fulfilling the definition of TPD.
Settlement terms for TPD Benefit	The payment of a TPD benefit will be a single amount to the Policy Owner. On payment of the TPD benefit, We are discharged from any further liability in respect of that Life Insured.

(III) ACCIDENTAL BENEFIT

Benefit payable for	Accidental Death:
accidental Benefit	 While this Policy is In Force, upon death of the Life Insured due to accidental cause, an additional one hundred percent (100%) of the Sum Insured will be payable, on top of the death Benefit. However, upon death of the Life Insured due to an accidental cause in Overseas, within ninety (90) consecutive days from the date of departure from Malaysia as the origin country of departure, an additional two hundred percent (200%) of the Sum Insured is payable, on top of the death Benefit.



	Accidental TPD:
	While this Policy is In Force, upon TPD of the Life Insured due to accidental cause, an additional one hundred percent (100%) of the Sum Insured will be payable, on top of the TPD Benefit.
	The Accidental Benefit payable is subject to the restrictions and adjustments applicable to the Accidental Benefit.
Restrictions and adjustments to the	The restrictions and adjustments applicable to the Accidental Benefit are as follows:
	Accidental Benefit must have occurred whilst the Policy is In Force;
accidental Benefit	2) In the event of death due to accidental cause in Overseas, occurs after ninety (90) consecutive days
	from the date of departure from Malaysia as the origin country of departure, then the Accidental
	Benefit shall be limited to one hundred percent (100%) of the Sum Insured.
Accidental Benefit exclusions	No Benefit is payable on Accidental Death occurring due to the following direct or indirect events or conditions:
	1) Intentional self-inflicted injury, death, suicide or attempted suicide, while Sane or insane;
	2) Participation in any criminal or illegal act, strike, riot, terrorism or civil commotion;
	 Participation in dangerous or hazardous sports or activities, flying or taking part in any form of aerial activities (except as a fare-paying passenger or crew member on a regular route operated by a commercial airline);
	4) Consumption of alcohol, or non-prescribed or illegal drugs or narcotics; or
	5) Human Immunodeficiency Virus (HIV) or Acquired Immune Deficiency Syndrome (AIDS).

PREMIUMS, LAPSE AND TERMINATION PROVISIONS

Premium amount and due date	The Premium amount, the Commencement Date, and the mode of Premium are shown in the Policy Information Page. The Life Insured must be alive when the first Premium is paid.
	All Premiums are payable in advance and due on the Commencement Date and subsequently according to the mode of Premium.
	Should there be any excess of Premiums, We may either:
	1) Refund to You once the said excess of Premium is determined by Us; or
	2) Carry forward the excess payment to the following month(s) in such manner as We deem appropriate.
	Premium rates are not guaranteed and We reserve the right to revise the Premium rate by giving three (3) months prior notice. These terms are as agreed between the Policy Owner and Us.
Premium payment and Grace Period	Premiums are paid yearly anniversary of the Commencement Date, as set out in the Policy Information Page.
	If Premium is not paid within the Grace Period, the Policy shall Lapse thereafter. Upon lapsation of the Policy, We shall be discharged from any further liability under the Policy.
Termination	Under circumstances where no Benefit claim and/or the expiry of the Policy has not been reached, this Policy shall:
	 remain In Force until the end of the prevailing Policy Year in the event of termination of the Principal Life Insured's policy due to full payment of his/her policy's benefit; or terminate upon the expiry of the Principal Life Insured's policy.
	Upon termination of the Policy, We shall be discharged from any further liability under the Policy.

COMPLAINTS AND DISPUTE RESOLUTION



How to complain to If a Claimant or Policy Owner is not satisfied with Our service under the Policy, please write to Our postal address: Complaint Management Unit, Etiqa Life Insurance Berhad, Level 6, Tower B, Dataran Maybank, No 1, Jalan Maarof, 59000 Kuala Lumpur; or by facsimile to 03-2297 1919, or e-mail at complaint cmu@etiga.com.my. Our telephone number is 1-300-13-8888 (for overseas callers, the number is +603-2780 4500). How to complain to If a Claimant or Policy Owner is not satisfied with Our conduct, please write to the BNM, including details the government of the conduct, nature of their dispute, Our name, Policy number, and any correspondence between the regulator Claimant or Policy Owner and Us. The postal address for writing to BNM is: Director, Jabatan LINK dan Pejabat Wilayah, Bank Negara Malaysia, P.O. Box 10922, 50929 Kuala Lumpur; or by facsimile to 03-2174 1515; or e-mail at bnmlink@bnm.gov.my. The BNM telephone number is 1-300-88-5465. The Ombudsman for Financial Services (OFS) may be contacted by the Claimant or Policy Owner, in the How to settle a dispute through event that the Claimant or Policy Owner is dissatisfied with the decision of Etiga Life Insurance Berhad to mediation a dispute, or Etiqa Life Insurance Berhad's failure to respond to a complaint within sixty (60) days. The OFS contact details are as follows: Email : enquiry@ofs.org.my or Fax : 603-2272 1577 or Postal address: Chief Executive Officer, Ombudsman for Financial Services Level 14, Main Block, Menara Takaful Malaysia, No.4, Jalan Sultan Sulaiman, 50000, Kuala Lumpur. Alternatively, the Claimant or Policy Owner may file the dispute in person at the OFS office. The OFS must be contacted within six (6) months from the date of the final decision from Etiga Life

Insurance Berhad to the dispute of the Claimant or Policy Owner.

For further details on the OFS, please obtain the information pamphlets from Etiqa Life Insurance Berhad or visit the OFS website at www.ofs.org.my.

Engagement of the OFS is subject to the terms of reference pursuant to section 126 of the Financial Services Act 2013. Contacting the OFS does not affect the Claimant's or Policy Owner's right to take legal action against Etiga Life Insurance Berhad should they be dissatisfied with the outcome by the OFS.

How to settle a dispute through arbitration

If a Claimant or Policy Owner disputes a decision We have made relating to the Policy, and does not wish to mediate the dispute, nor accepts the OFS's decision following mediation, the Claimant or Policy Owner may refer to arbitration. Request for referral must be made within twelve (12) months from notification of

The Claimant or Policy Owner and We shall mutually agree to appoint a single Arbitrator. If the Claimant or Policy Owner and We cannot agree upon a single Arbitrator within one (1) month of the notice of arbitration, then the Claimant or Policy Owner and We shall each appoint an Arbitrator, and the two Arbitrators will appoint an umpire. The umpire shall sit with the Arbitrators and preside at their meetings. All appointments must be in writing by the respective parties making the appointment.

The single Arbitrator (in the case where the Claimant or Policy Owner and Us agree to a single Arbitrator), or the Arbitrators and umpire (in the case where the Claimant or Policy Owner and Us do not agree on a single Arbitrator), shall review the dispute and make a decision. The arbitration decision will cover the settlement of the dispute and the costs of arbitration. The decision of arbitration is not contestable and is binding on the Claimant or Policy Owner and Us.