

# Partner Driver Personal Accident Insurance

## Requirements for Claim

### Required Documents for **Accidental Death Benefit**

- Originally signed claim form
- Duly registered death certificate
- Duly registered birth certificate of the Insured
- Autopsy Report/Medico Legal Statement
- Official Police Report and other related report i.e. interoffice accident report, newspaper clippings, etc.
- Affidavit of witness/es
- Available photos taken at incident scene
- Proof of relationship of the beneficiary (such as marriage contract, birth certificate, baptismal, etc.)

### Required Documents for **Accidental Disability**

- Originally signed claim form
- Certified true copy of admitting history & discharge summary
- Supplementary Medical Report (SMR) indicating physician's prognosis & time of disability
- Original accident report e.g. police report; inter-office; accident report; newspaper clipping (if applicable)
- Picture showing insured dismemberment

		Percentage of Principal Sum
Permanent Total Disablement caused other than by Loss of Limb or Eye which, having lasted for at least 12 consecutive months will, in all probability, entirely prevent the Insured from engaging in gainful employment of any and every kind for the remainder of his or her life.		100%
Loss of sight of one or both eyes		100%
Permanent Total Loss of Hearing in both ears		100%
Permanent Total Loss of the lens of one eye		50%
Permanent Total Loss of Hearing in one ear		50%
Permanent Total Loss of speech		50%
<b>Loss of or permanent total loss of use of:</b>	Right	Left
<ul style="list-style-type: none"> <li>• One Thumb</li> </ul>	20%	15%
<ul style="list-style-type: none"> <li>• Any finger</li> </ul>	10%	6%
<ul style="list-style-type: none"> <li>• Permanent Total Loss of use of Shoulder or Elbow</li> </ul>	25%	20%
<ul style="list-style-type: none"> <li>• Permanent Total Loss of use of Wrist</li> </ul>	20%	15%
<b>Loss of or permanent total loss of use of:</b>		
<ul style="list-style-type: none"> <li>• One or more Limbs</li> </ul>		100%
<ul style="list-style-type: none"> <li>• One big Toe</li> </ul>		10%
<ul style="list-style-type: none"> <li>• Any other Toe</li> </ul>		3%
<ul style="list-style-type: none"> <li>• Permanent Total Loss of use of Hip or Knees or Ankle</li> </ul>		20%
<ul style="list-style-type: none"> <li>• Removal of Lower Jaw by surgical operation</li> </ul>		30%
<ul style="list-style-type: none"> <li>• Shortening of leg by at least 5 cm</li> </ul>		7.5%

**Required Documents for Accident Medical Expense / Daily Hospital Income**

- Originally signed claim form
- Certificate of employment/receipt of membership or Valid ID/Billing Statement
- Original copy of medical bills e.g. itemized charge slips, PF Included
- Original Official Receipts (with TIN number)
- Original accident report e.g. police report; inter-office; accident report; newspaper clipping (if applicable)
- Emergency Room record
- All medical results pertaining to the accident
- Prescription of medicines
- Certified true copy of admitting history & discharge summary
- Bank Account details for Electronic Fund Transfer

### **Policy Features & Extensions**

- Annual Policy Coverage
- Eligibility Age: 18 to 65 years old, renewable up to 70 years old
- Coverage applies WORLDWIDE, 24 HRS/day; 365 days a year
- On & Off the job
- Sabotage and Terrorism
- Suffocation by Smoke, Poisonous Fumes or Gas
- Drowning
- Acts of God/Nature
- Animal Bites, including mosquito bites
- Accidental Food Poisoning
- Motorcycling is covered
- Exposure and Disappearance
- Accidental Death pays on top of any other insurance coverage
- No medical examination needed

## Policy Exclusions

- War, invasion, act of foreign enemy, hostilities (whether war be declared or not). Civil war, mutiny, riot, strike and civil commotion, rebellion, revolution, insurrection or military or usurped power; or any war-like operations.
- Engaging in military duty
- Intentionally self-inflicted injuries, suicide or any attempt thereat, while sane or insane.
- Hazardous sports e.g. scuba diving, climbing or mountaineering, parachuting, hang-gliding, professional sports with the exception of basketball, or racing other than on foot, or participating in any dangerous sports.
- Illegal acts or violations.
- Alcoholism or under the influence of alcohol, drug addiction.
- Engaging in aviation other than as a fare paying passenger.
- Congenital anomalies and conditions
- Pregnancy, childbirth, and miscarriage, and any complications of these.
- Illness, disease, bacterial or viral infection.
- Provoked Murder & Assault
- HIV & AIDS, Sexually transmitted & venereal diseases.