

Loan Shield Insurance

Loan Shield Insurance is an invaluable insurance benefit, covering your Personal Loan outstanding balance for a nominal monthly charge.

In the event of Death due to any cause or Permanent Total Disability (PTD), if opted for (the outstanding balance of your Personal Loan is waived, without causing any inconvenience to your loved ones (subject to the Exclusions stated below),

As a Standard Chartered Bank Personal Loan holder you can enjoy the benefits of Loan Shield Insurance provided by Alico Insurance Company. We request you to go through the Cover details in order to understand thoroughly the extent and terms of the Cover offered.

You can obtain a copy of the Terms and Conditions issued by Alico Insurance Company. The Cover is provided by Alico Insurance and Standard Chartered Bank (the "Bank") has no liability whatsoever to you for Loan Shield Insurance Protection coverage. This booklet is only a summary of the principal provisions of the master policy.

SCHEME HIGHLIGHTS

- 24 hour cover for Loan shield insurance
- Easy enrolment
- No requirement for a medical certificate
- Low one time rate on the total amount of your Personal Loan

SUMMARY OF POLICY CONDITIONS OF MASTER POLICY NO. CL-06

1. A low one time rate will be applied and charged against the total amount of the loan at inception.
2. To qualify for cover under the policy, the Borrower should be older than 18 and younger than 65 years. Coverage under this policy for Death ceases when the Borrower attains the age of 70 years and for PTD ceases when the Borrower attains the age of 65.
3. Death and PTD Benefit cover is applicable worldwide.
4. Death and PTD cover applies to any cause except those expressly excluded in terms of the policy or the Good Health Declaration in the Personal Loan application form.
5. Death and PTD benefit payable under this policy shall be paid against the Insured Borrower's total outstanding balance at the end of the month with the Bank.
6. The Bank shall not at any time be considered as an agent of Alico Insurance Company, the "Insurance Provider". All claims or contestations for insurance coverage shall be negotiated directly with Alico Insurance Company, Dubai.
7. The Bank reserves the right, at any time, to change the terms, conditions, rates and/or reject, discontinue or cancel the applicable Cover without assigning any reason.
8. The Borrower should be a resident in the UAE at the time of sourcing the Policy. Any Insured Borrower shall be covered even in an instance where the Event of Claim occurred outside the UAE.

DEFINITIONS

Accident shall mean a sudden and unexpected event, which results directly or through an unbroken chain of events in the Insured Borrower's Death.

Bank shall mean the Standard Chartered Bank, United Arab Emirates

Borrowers shall mean the person(s) who have been granted a Personal Loan and fulfill the Policyholder's Personal Loan requirements as per loan agreement.

Entry Date shall mean the effective date of coverage of an Insured Borrower hereunder, which shall be the Policy Date or the date of his becoming an Eligible Borrower, whichever is later.

Eligible Borrowers shall mean borrowers who have met the eligibility requirements set forth in this Policy.

Face Amount shall mean the amount of the loan borrowed, net of any interests and prior to any amortisation.

Insured Borrowers shall mean eligible borrowers who, in accordance with the provisions of this Policy, are participating in the insurance plan under this Policy and who have completed the Loan Application Form.

Loan Agreement shall mean an agreement made in writing between the borrower and the Policyholder for a loan which entails repayment in accordance with agreed monthly installments.

Outstanding Balance shall mean the actual outstanding debt including interests or other charges or defaults if any, of the Insured Borrower towards the Policyholder on the claim date, according to the amortisation schedule of the loan. The Outstanding Balance decreases each month, or increases by further borrowing, so does the benefit covered.

Permanent Total Disability (PTD) shall mean disability from bodily injury, sickness or disease so as to prevent the Insured Borrower from performing any kind of work, occupation or profession for compensation, profit or gain for the remainder of his lifetime.

Policy shall mean this agreement, any supplementary contracts or endorsements herein; any amendments hereto signed by the Insurance Company and the Policyholder, Enrollment forms of the insured members and Summaries of cover, which shall together constitute the entire contract between the parties.

Policy Year shall mean a period of twelve (12) consecutive months beginning with the Policy Date and subsequent Policy Anniversary.

Pre-existing Condition shall mean illness, disease or sickness occurring or manifesting prior to the Commencement Date, for which advice or treatment was sought or obtained from a medical practitioner, chiropractor, naturopath, or any other practitioner of a similar kind within twelve months immediately prior to the Commencement Date.

Pronouns: Masculine pronouns used in this Policy shall include both masculine and feminine gender unless the context indicates otherwise. Sickness shall mean any pathological state or state of abnormal function of bodily organs of the Insured, not caused by an accident, and objectively diagnosable.

Summary of cover shall mean the accurate information about the Policy that must be provided by the Policyholder to every Insured Borrower. This information shall describe thoroughly the provisions, terms and conditions of the Policy as to be well understood by the Insured Borrowers. The wording of the Summary of cover is prepared by the Insurance Company.

SCOPE OF COVER

Death Benefit

If an Insured Borrower dies due to sickness or an accident, the Insurance Company will, upon receipt of due proof in writing of the death of the Borrower, pay the amount of the Covered Life Benefit to the Policyholder.

The covered Life Benefit, at any time before the maturity date of the loan, shall be equal to **100 % of the Outstanding Balance** of the loan as at the date of death, according to the amortization schedule set in force on the Entry date.

If the date of death corresponds to the due date of one instalment, it is considered that this instalment is not yet paid.

The Insurance Company cannot be liable for more than the outstanding balance of the loan defined in the loan agreement in force when the loan was granted, irrespective of possible changes brought to the installments later.

Permanent Total Disability Benefit

If an Insured Borrower becomes Permanently and Totally Disabled as defined in this policy, the Insurance Company will terminate the insurance on the life of such Insured Borrower and in lieu of all other benefits, will pay to the Policyholder in one lump sum 100 % of the Outstanding Balance of the loan as at the date of recognition of the state of PTD, according to the amortization schedule set in force on the Entry date.

Payments in arrears and interests give no right to any benefit.

If the date of recognition of the state of PTD corresponds to the due date of one installment, it is considered that this installment is not yet paid.

The Insurance Company cannot be liable for more than the Outstanding Balance of the loan defined in the loan agreement in force when the loan was granted, irrespective of possible changes brought to the installments later.

Such state of PTD shall be exclusively recognized by a physician specially authorized by the Insurance Company according to the definitions and provisions of this Policy.

There must be at least 12 continuous months elapsed from the commencement of Total Disability before it can be recognized as being Permanent. However, in case of the total and irrevocable loss of sight of both eyes, or of the loss by severance of two or more limbs (at or above wrist or ankle), the waiting period of 12 months can be waived and the state of PTD be recognized immediately.

Additionally, the Insured Borrower shall have to provide the Insurance Company with the evidence that he was carrying an officially registered occupation on the commencement of his Total Disability.

PTD Benefit is subject to a deferral of coverage period of 90 days from the date of Good Health Declaration sign off date for PTD Coverage. A PTD claim shall be automatically turned down if the PTD occurs within these 90 days.

SUMMARY OF POLICY EXCLUSIONS

Any Death caused by or resulting, directly or indirectly, wholly or partly, from any of the following factors will not be covered by this insurance:

- The condition of Acquired Immune Deficiency Syndrome (AIDS), as defined below, or any AIDS Related Illness or virus HIV; or
- Flight of the Insured Borrower in any kind of aircraft except as a fare-paying passenger or pilot or crew in an aircraft operated on a regular schedule by an incorporated common carrier for passenger service over its established air route, or he is transported as a patient or injured or attendant or hostess with an ambulance or rescue-aircraft or helicopter.
- Suicide while sane or insane; for the first 12 months from Initial Loan inception date
- Civil war, war, invasion or warlike operations, act of a foreign enemy, hostilities, revolt, mutiny, riots, strike, civil commotion, rebellion, revolution, insurrection, acts of terrorism to such a degree and extent of the involvement or engagement of the Insured in these conditions without any cause; or
- Military Service in the Armed Forces or Security Forces of any country or any authority; or
- The commission of or attempted commission of an assault or any unlawful act, or being engaged in any illegal activity or felony.

Any Permanent Total Disability caused by or resulting, directly or indirectly, wholly or partly, from any of the following factors will not be covered by this insurance:

- Pre-existing conditions,
- Self-inflicted bodily injury while sane or insane,
- A sickness directly or indirectly attributed to HIV and/or any related illness including AIDS,
- Abuse of alcohol or drugs,
- War, or riot or civil commotion, acts of terrorism,
- Radioactive contamination,
- Service in armed forces, whether in peace or in war,
- Illegal act/ criminal activity,
- Flight in a non-scheduled aircraft,
- Participation in any sport involving a motor engine (including rallies), professional sports, boxing, scuba / skin diving, parachuting or hang-gliding, horse racing and mountain climbing
- Psychiatric illness or any mental or nervous disorder,
- Disability attributed by the Insured to subjective complaints not detectable with laboratory measurement, microbiological, biochemical means and/ or imaging,
- The failure of the insured to undergo medical treatment recommended by a legally qualified medical practitioner.

TERMINATION OF INSURANCE

The insurance of an individual shall automatically terminate upon the happening of any of the events mentioned below, whichever takes place earlier:

- 1) The Insured Borrower attains age 70 for Death and age 65 for PTD;
- 2) Upon notification of a Death claim or payment of a PTD claim;
- 3) Upon settlement by the Insured Borrower of the amount of the loan; or
- 4) Upon cancellation by the Policyholder of the loan agreement of the Insured Borrower, regardless of the reason.

CLAIMS PROCEDURE

1. Upon happening of an event giving rise to a claim under the policy, the Insured Borrower's Legal Representatives shall follow the following procedure:
 - (i) Give immediate written notice to the Company but not later than 270 days from the Date of Event;
 - (ii) The Insured Borrower's legal representative shall complete the standard claim form issued by the Company and submit the same with such evidence to substantiate the claim to the satisfaction of the Company as the Company may reasonably require;
 - (iii) The Insured Borrower's legal representative shall submit the following documents (and any additional documentation that may be requested by the Claims Department of the Insurance Company).

For Death Claims

- Death Certificate.
- Post Mortem Report (wherever legally required).
- Police Report (in case of accidental death).
- Medical Report from an authorized medical practitioner along with detailed diagnosis and cause of death if required by the Company, when the actual cause of death is not clearly mentioned in the Death Certificate.
- Copy of Passport with Visa page.

In respect of any of the above claims, Alico insurance company reserves the right to request any additional documents which may be reasonably required.

For PTD Claims

- Evidence that the insured borrower was carrying a registered occupation on the 1st day of the continuous period of disability,
- Medical certificate delivered by a registered physician establishing the state of permanent and total disability, according to the definition given by the insurance policy,
- Evidences of entitlement to payment of permanent disability allowances by the National Insurance, an official personal identity data of the Insured Borrower and any other additional document that may be asked by the Claims Department of the Insurance Company.

The Insurance Company reserves the right to require additional proof or documents in support of the claim. Expenses for supplying all supporting documents will be borne by the claimant.

In the event of any difference of opinions relating to reasonable and customary confinement or standards of medical service and treatment, and their manifestation, the opinion of the Company's Medical Director or Doctors appointed or accepted by the Insurance Company shall prevail. The Insurance Company reserves the right to request medical tests on and medical examination of the Insured by Examiners / laboratories appointed or accepted by the Company.

GOVERNING LAW

The provisions and terms of this policy shall be construed in accordance with the laws applicable in the United Arab Emirates and the UAE courts shall have the sole jurisdiction in respect of any controversy / dispute arising there from.

CONTACT INFORMATION

For any queries please call Standard Chartered Bank Phone banking at 600522288.