

ABOUT AIA

LARGEST INDEPENDENT
PUBLICLY LISTED PAN-ASIAN

LIFE INSURER

PRESENCE IN

18
MARKETS

CHINA 1919

HONG KONG 1931

SINGAPORE 1931

THAILAND 1938

PHILIPPINES 1947

MALAYSIA 1948

BRUNEI 1957

AUSTRALIA 1972

NEW ZEALAND 1981

MACAU **1982**

INDONESIA 1984

KOREA 1987

TAIWAN 1990

VIETNAM 2000

INDIA **2001**

SRI LANKA 2012

MYANMAR 2013

CAMBODIA 2015



LARGEST
LISTED COMPANY
ON HONG KONG
STOCK EXCHANGE

which is incorporated and headquartered in Hong Kong PROVIDES
PROTECTION TO
PEOPLE ACROSS
ASIA WITH TOTAL
SUM ASSURED OF
ALMOST
US\$2 TRILLION

100% FOCUS ON ASIA-PACIFIC

#1 STANDARD OF EXCELLENCE IN THE LIFE INSURANCE BUSINESS

SERVING HOLDERS OF MORE THAN **39** MILLION INDIVIDUAL POLICIES AND OVER **16** MILLION MEMBERS OF GROUP INSURANCE SCHEME

AIA Singapore is part of the AIA Group, which today is the largest life insurance company in the world. As a market leader in employee benefits, with more than 50 years of experience in helping employers meet the expectations of their employees, we offer innovative solutions that can address your employees' needs at any stage of their life journey, while delivering a fulfilling customer experience — enabling them to live Healthier, Longer, Better Lives.

1.3+ MILLION INSURED EMPLOYEES

300+ STAFF
SUPPORT TEAM

4 STARS AND ABOVE CUSTOMER SERVICE RATING

OUR ACCOLADES



HR VENDORS OF THE YEAR 2006 - 2023

Best Employee Insurance Provider (Gold Award) for 18 consecutive years



READER'S DIGEST TRUSTED BRAND 2023

First Insurer to win the Platinum Award for Life Insurance for 4 years consecutively



8TH ASIA TRUSTED LIFE AGENTS AND ADVISERS AWARDS

Employee Benefits Provider of the Year for 2 consecutive years



SBR TECHNOLOGY EXCELLENCE AWARDS 2022

Digital - Life Insurance AIA eBenefits

AIA FLEXI VITAL CARE PLUS

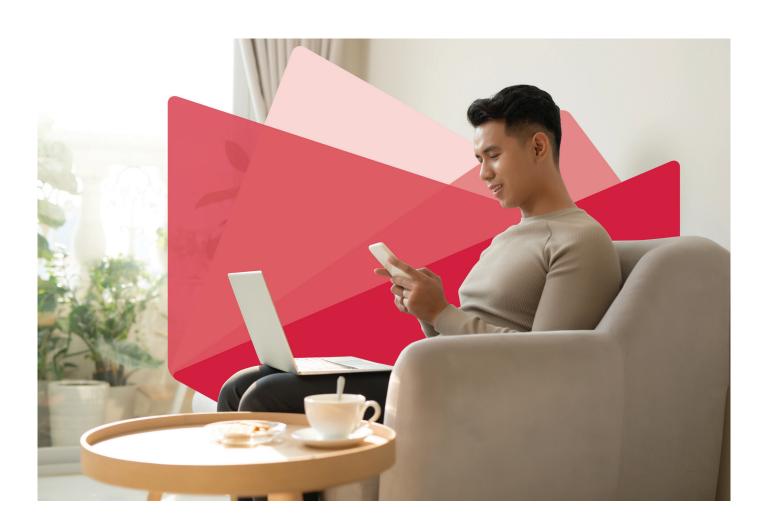
A FLEXIBLE INSURANCE SOLUTION TO ADDRESS THE NEEDS OF SMALL AND MEDIUM ENTERPRISES (SMEs) EMPLOYERS AND EMPLOYEES

Today's employees are looking for more than just a good salary. Having a comprehensive employee benefits program would enable SMEs to attract the right talent to join their companies, or even be a strong retention tool for your good employees.

AIA Flexi Vital Care Plus is specifically designed to cater to the different insurance needs and budgets of SMEs. It offers the flexibility for employees and their dependants to voluntarily top up their insurance coverage. In addition, SMEs that require a flexible benefits enrolment platform can do this via AIA eBenefits. All these can be done without the SMEs incurring extra expenses to maintain a Flex platform with high maintenance and subscription fees.

With AIA eBenefits digital platform and mobile application, employees can submit their medical claims on the go without hardcopies and track the status of their claims anytime, anywhere. This can save the HR time, allowing them to focus more on employee engagement activities.

As part of AIA's purpose to help our customers live healthier, longer, and better lives, employees insured under AIA Flexi Vital Care Plus will be able to have access to AIA's holistic health & wellness activities under the WorkWell with AIA programme.



KEY FEATURES



Minimum Headcount Required

Start a policy with only 31 employees required and a core plan.



Comprehensive, Flexible & Worldwide^a Coverage

Select from a wide range of insurance benefits with comprehensive limits based on the different budgets of SMEs. Insurance coverage is 24/7 and worldwide. Options are available to offer voluntary insurance top up for employees and their dependants.



Cashless Outpatient Services

Enjoy cashless outpatient consultation at AIA's extensive network of panel general practitioner (GP) and specialist (SP) clinics. This cashless service extends to teleconsultation where employees can see a GP remotely via their mobile phone with medication delivered to their doorstep. Simply generate the medical e-Card with AIA eBenefits mobile application to enjoy the cashless experience.



Cashless Inpatient Services with Pre-Authorisation Facility

For hospital admission in Singapore, employees may not need to settle the full hospital bill upon discharge as AIA will settle the hospital bill up to the benefit limit covered under AIA Flexi Vital Care Plus directly with the hospital. Inpatient claims are assessed before the medical bills are incurred so that employees are aware of how much the policy will cover upfront and make the right healthcare choice.



Hassle-free Digital Claims and Policy Administrations with AIA eBenefits

Employees can submit their medical claims and track the status of their claims digitally with AIA eBenefits mobile application. HR can also login to AIA eBenefits online platform to perform member movement declaration, generate claims reports and even submit claims digitally on behalf of their employees.



Portfolio Pricing

Premium rates are determined based on the entire AIA Flexi Vital Care Plus portfolio – claims submissions will not incur a corresponding increase in premiums during policy renewal.



Complimentary Health & Wellness Activities with WorkWell with AIA program^b

AIA offers more than just employee insurance. Get access to a wide variety of Health & Wellness activities to engage employees without additional cost. Some of the complimentary activities (offered either onsite or online) include:

- Basic Health Screening
- Health & Wellness Events
- Mental Wellness Webinars
- Financial Health Talks

FOOTNOTE

¹ Refer to Point 3 under **Eligibility** on page 18 for more information.

^a Excluding Iran, North Korea, Libya, Liberia, Congo, Côte d'Ivoire (Ivory Coast), Sudan, Somalia, Eritrea, Cuba, Belarus, Syria, Lebanon, Iraq, Zimbabwe, Yemen and Western Balkans (Western Balkans include Albania and the former Yugoslavia, which is made up of Bosnia and Herzegovina, Croatia, Macedonia, Montenegro and Serbia). Please note that the list of countries is subject to change. Please contact your AIA Financial Services Consultant or Insurance Representative for the most updated list.

^b Terms and conditions apply. Additional charges might be incurred if add-on services are required.

AIA FLEXI VITAL CARE PLUS PLAN OPTIONS

Core Plans and Optional Riders

Select either 1 or both Core Plans and add optional riders

CORE PLANS	OPTIONAL RIDERS TO SELECTED CORE PLANS
Group Term Life (GTL)	Group Accelerated Critical Illness (GACI) Group Accidental Death & Dismemberment (GADD) Group Outpatient Clinical & Group Outpatient Specialist (GP & SP) Group Dental
Group Hospitalization & Surgical with Extended Major Medical (GHS)	Group Accidental Death & Dismemberment (GADD) Group Outpatient Clinical (GP) Group Outpatient Clinical & Group Outpatient Specialist (GP & SP) Group Dental



FOOTNOT

- Refer to Eligibility & Participation and Plan Selection on pages 18 and 19 for more information.
- All rates include the prevailing 9% GST in SGD, with exception to GTL.
- Premium rates are not guaranteed and may be increased at policy renewal at the full discretion of AIA.

CORE PLAN: GROUP TERM LIFE (GTL)

UNDERWRITING

Sum Assured above \$\$180,000 is subjected to underwriting and AIA's approval.

DEATH

Provides coverage against death due to illness or accident and the sum assured is payable in a lump sum.

TOTAL & PERMANENT DISABILITY (TPD)

Provides coverage against TPD as a result of illness or accident prior to the insured's 70th birthday.

- a. The disability must be total and permanent and that there is no work, occupation, or profession that the insured can ever sufficiently do or follow to earn or obtain any wages, compensation, or profit.
- b. the total and irrecoverable loss of sight of both eyes or the loss by severance of 2 or more limbs at or above wrist or ankle.

TERMINAL ILLNESS (TI)

Provides coverage upon the diagnosis of a TI, a condition which is likely to lead to death within 12 months of the diagnosis. The sum assured is payable in a lump sum.

COMPASSIONATE DEATH/TPD ALLOWANCE

Provides an additional coverage of 10% of the amount insured, against death and TPD. The additional coverage is paid together with the Death or TPD benefit.

EXCLUSIONS

Pre-existing conditions that existed 12 months preceding the effective date of coverage (known or unknown) unless the member has been insured continuously for 12 months under the policy.

Suicide, unless the member has been insured continuously for 12 months under the policy.

SUM ASSURED FOR EMPLOYEE (\$\$)								
GROUP TERM LIFE (GTL)	PLAN 1	PLAN 2	PLAN 3	PLAN 4	PLAN 5²	PLAN 6 ²		
Death and Total Permanent Disability (TPD)	50,000	80,000	120,000	180,000	250,000	500,000		

SUM ASSURED FOR DEPENDANT (S\$)								
GROUP TERM LIFE (GTL)	PLAN 1	PLAN 2	PLAN 3	PLAN 4	PLAN 5²	PLAN 6 ²		
Death and Total Permanent Disability (TPD)	25,000	40,000	60,000	90,000	125,000	250,000		

	ANNUAL PREMIUMS FOR EMPLOYEE - GTL (S\$)									
AGE ³ BAND	PLAN 1	PLAN 2	PLAN 3	PLAN 4	PLAN 5	PLAN 6				
Up to 29	51.00	81.50	122.00	183.00	254.50	508.50				
30-34	53.50	85.50	128.00	192.00	266.50	532.50				
35-39	61.00	98.00	146.50	220.00	305.00	610.00				
40-44	94.50	151.00	226.50	339.50	471.50	942.50				
45-49	127.50	204.00	306.00	459.00	637.50	1,275.00				
50-54	196.50	314.50	472.00	707.50	982.50	1,965.00				
55-59	356.50	570.50	856.00	1,283.50	1,782.50	3,565.00				
60-64	622.50	996.00	1,493.50	2,240.50	3,111.50	6,222.50				
65-69	1,057.00	1,691.00	2,536.50	3,804.50	5,284.00	10,567.50				
70-74	2,313.00	3,701.00	5,551.50	8,327.00	11,565.00	23,130.00				

	ANNUAL PREMIUMS FOR DEPENDANT - GTL (S\$)									
AGE ³ BAND	PLAN 1	PLAN 2	PLAN 3	PLAN 4	PLAN 5	PLAN 6				
Up to 29	28.00	45.00	67.50	101.00	140.00	279.50				
30-34	29.50	47.00	70.50	105.50	146.50	292.50				
35-39	33.50	54.00	80.50	121.00	167.50	335.00				
40-44	51.50	82.50	124.00	185.50	257.50	515.00				
45-49	70.00	112.00	167.50	251.50	349.00	697.50				
50-54	107.50	172.00	258.00	387.00	537.50	1,075.00				
55-59	195.00	312.00	468.00	702.00	975.00	1,950.00				
60-64	341.00	545.50	818.00	1,227.00	1,704.00	3,407.50				
65-69	579.00	926.00	1,389.00	2,083.50	2,894.00	5,787.50				
70-74	1,267.00	2,027.00	3,040.50	4,560.50	6,334.00	12,667.50				

FOOTNOTE

² Subjected to underwriting & AIA's approval.

 $^{^{\}rm 3}$ Age Last Birthday. Refer to Point 5 under **Eligibility** on page 18 for more information.

CORE PLAN: GROUP HOSPITALIZATION & SURGICAL (GHS) WITH EXTENDED MAJOR MEDICAL (EMM)

GHS COVERAGE

Covers eligible expenses in connection with a hospital confinement or surgery, which results directly from a sickness or injury.

"Hospital Confinement" shall mean confinement in a Hospital for any duration as long as there is:

- a. A Room and Board charge or
- b. A surgery

EMM COVERAGE

Covers Room and Board expenses incurred subsequent to the maximum number of days covered by the Daily Room and Board Benefit under the basic GHS Plan.

Covers in-hospital expenses which are in excess of the maximum amount payable under the basic GHS plan.

COMMON EXCLUSIONS

Pre-existing conditions which have existed during the 12 months prior to the commencement of insurance coverage in respect of the insured under this Policy, (known or unknown), unless the member has been insured continuously for 12 months under this policy.

For voluntary plan upgrade, pre-existing conditions which have existed during the 12 months prior to the plan upgrade, unless the member has been insured continuously for 12 months under the upgraded plan.

Investigation and treatment of psychological, emotional, mental and behavioral conditions; alcoholism or drug addiction or any abuse of drugs or alcohol; overdose of prescription drugs, whether intentional or accidental or otherwise, intentional self-inflicted injuries while sane or insane; injuries sustained as a result of a criminal act of the insured.

General medical check-up, health screening; immunisation, vaccination, or inoculation; non-prescribed medication, vitamins, and supplements.

Procurement and rental of/or use of special braces, any appliances, any equipment or prosthetic devices, wheelchair, walking aids, hearing aids.

Acquired Immuno-Deficiency Syndrome (AIDS), AIDs related complexes and all illnesses or diseases associated with the Human Immuno-Deficiency Virus (HIV), unless acquired due to Medically Necessary blood transfusions or occupational related infections (where proof of which must be made available).

		BENEFITS AP	PLY ON A PER DISABILTY FOR EACH INS		RWISE STATED,
GRC	OUP HOSPITALIZATION & SURGICAL (GHS)	PLAN 1	PLAN 2	PLAN 3	PLAN 4
			s	\$	
1a	DAILY ROOM & BOARD Actual accommodation charges during a hospital confinement not exceeding the limit (maximum 120 days).	PRIVATE 4 Bed	PRIVATE 2 Bed	PRIVATE 1 Bed	PRIVATE 1 Bed
lb	INTENSIVE CARE UNIT (ICU) ICU charges incurred during a hospital confinement, up to maximum limit as stated in the policy contract or up to 30 days, whichever is earlier.	10,000	10,000	10,000	
2	OTHER HOSPITAL SERVICES Expenses incurred during a hospital confinement excluding accommodation, surgeon's and in-hospital doctor's consultation fees (including implants).				
3	SURGICAL FEE Surgical Schedule of Fees shall be applicable for Surgeon's fees of more than S\$1,500 treated at non-panel Specialist clinics in Private Hospitals.				
4	IN-HOSPITAL DOCTOR'S CONSULTATION In-hospital doctor's visits during a hospital confinement (maximum 120 days).	15,000 Per Disablity	20,000 Per Disablity	25,000 Per Disablity	250,000
5	PRE & POST-HOSPITALIZATION SPECIALIST CONSULTATION, DIAGNOSTIC X-RAY AND LABORATORY TESTS Expenses incurred 90 days prior to admission and 90 days after discharge.				Per Policy Year (for item 1b to 8, 10 & 11)
5	EMERGENCY ACCIDENT OUTPATIENT TREATMENT Expenses incurred within 31 days of accident, provided treatment is sought within 24 hours of accident (including Accidental Dental treatment).				
,	ACCIDENTAL MISCARRIAGE Include ectopic pregnancy.	Up	to Benefit Limit of Item 1	to 6	
3	OVERSEAS HOSPITALIZATION FOR ACCIDENT When the Insured Member or dependant sustains an accidental injury while travelling outside Singapore and requires Hospitalization overseas. This is only applicable for employees residing in Singapore and the overseas trip does not exceed more than 180 days.		150% of Item 1 to 6		
)	NATURAL AND ACCIDENTAL DEATH If the Insured Member passes away due to a natural cause or an accident.	5,000	5,000	5,000	5,000
0	OUTPATIENT KIDNEY DIALYSIS /CANCER TREATMENT Up to maximum limit per Policy Year.	15,000	15,000	15,000	75,000 Per Policy Year (Part of Annual Limi
1	REHABILITATION Up to maximum limit as stated in the policy contract or up to 30 days, whichever is earlier.	5,000	5,000	5,000	5,000 Per Disability (Part of Annual Limit
хт	ENDED MAJOR MEDICAL (EMM) - MAXIMUM LIMIT PER DISABILI	ТҮ			
	IN-HOSPITAL BENEFIT Eligible expenses per basic GHS provided 1) Hospitalization >= 20 days; or 2) Surgical Percentage >= 75% per incision	40,000	60,000	80,000	Not Applicable
2.	Deductible	Up	to Basic GHS Benefit Lim	nits	Not Applicable
3.	Co-insurance		10%		Not Applicable

elf Specialist coverage is not taken up with AIA, Surgical Benefit shall be applicable for Surgeon's fees of more than S\$1,500 treated at all Specialist clinics in private hospital.

ANNUAL PREMIUMS FOR EMPLOYEE - GHS+EMM (\$\$)								
AGE ⁴ BAND	PLAN 1	PLAN 2	PLAN 3	PLAN 4				
Up to 29	331.04	420.87	541.98	1,055.69				
30-34	373.43	475.37	613.63	1,192.95				
35-39	373.43	475.37	613.63	1,192.95				
40-44	412.79	523.81	675.20	1,314.06				
45-49	526.84	670.15	862.92	1,679.41				
50-54	660.06	839.71	1,080.92	2,104.31				
55-59	868.98	1,104.13	1,423.06	2,770.42				
60-64	1,169.74	1,486.64	1,915.58	3,728.21				
65-69	1,620.88	2,059.90	2,654.35	5,168.42				
70-74	2,220.38	2,821.89	3,637.38	7,080.97				

ANN	ANNUAL PREMIUMS FOR DEPENDANT - GHS+EMM (S\$)								
AGE ⁴ BAND	PLAN 1	PLAN 2	PLAN 3	PLAN 4					
Up to 29	362.33	460.23	593.45	1,155.60					
30-34	409.76	520.78	671.16	1,305.99					
35-39	409.76	520.78	671.16	1,305.99					
40-44	451.14	573.26	739.79	1,439.21					
45-49	577.30	733.74	945.68	1,839.88					
50-54	723.64	918.43	1,183.87	2,305.15					
55-59	951.74	1,209.10	1,558.30	3,034.85					
60-64	1,280.75	1,627.94	2,097.25	4,083.47					
65-69	1,774.28	2,255.70	2,907.68	5,660.94					
70-74	2,431.31	3,090.35	3,983.55	7,755.15					

OPTIONAL COVER (FOR GHS): GROUP HOSPITALIZATION & SURGICAL - FOREIGN WORKER (GHS-FW)

GHS COVERAGE

Covers eligible expenses in connection with a hospital confinement or surgery, which results directly from a sickness or injury.

"Hospital Confinement" shall mean confinement in a Hospital for any duration as long as there is:

- a. A Room and Board charge or
- b. A surgery

COMMON EXCLUSIONS

Repeated occurrences of Sickness or Injury while employed by the Policyholder resulting in Investigation and treatment of psychological, emotional, mental conditions and intentional self-inflicted injuries while sane or insane.

Repeated occurrences of Sickness or Injury while employed by the Policyholder arising from drug addiction to prescribed or non-controlled drugs, or while under the influence of alcohol, or alcoholism.

Repeated occurrence while employed by the Policyholder for Injury arising from direct participation in a strike, riot, or civil commotion.

Repeated treatments while employed by the Policyholder for sexually transmitted diseases, Acquired Immuno-Deficiency Syndrome (AIDS), AIDs related complexes and all sicknesses or diseases associated with the Human Immuno-Deficiency Virus (HIV), unless acquired due to Medically Necessary blood transfusions or occupational related infections (where proof of which must be made available to the Company).

Comply with Ministry of Manpower's (MOM) Enhanced Medical Insurance Requirements

- Annual claim limit of at least \$\$60,000, inclusive of a first-dollar cover of \$\$15,000
- For portion of the bill above S\$15,000, employer must co-pay up to 25% (to the hospital)
- Exclusions are in line with MOM's list of allowable exclusions
- Insurers will reimburse portion of the hospital bill to hospitals^d directly upon admissibility of the medical claim
- Age-differentiated premiums are in 2 age bands: (1) <50 years old and (2) >50 years old

FOOTNOTE

d Refer to AIA website for the list of participating hospitals (https://www.aia.com.sg/en/our-products/corporate-medical-insurance/aia-foreign-worker-protector-plus).

^e AIA will be providing age-differentiated premiums in 2 age bands before July 2025.

GRO	OUP HOSPITALIZATION & SURGICAL - (GHS-FW)	BENEFITS APPLY ON A PER POLICY YEAR BASIS FOR EACH INSURED MEMBER (\$\$)				
1a	DAILY ROOM & BOARD (maximum 120 days) ^f	4-Bedded room in a Singapore Government Restructured Hospital				
1b	INTENSIVE CARE UNIT (ICU) (maximum 30 days) ^f					
1c	COMMUNITY HOSPITAL (maximum 60 days) ^f					
2	OTHER HOSPITAL SERVICES (including implants)	60,000 per Policy Year				
3	SURGICAL FEE	(co-insurance of 25% is applicable for claims in excess of 15,000)				
4	IN-HOSPITAL DOCTOR'S CONSULTATION (maximum 120 days) ^f					
5	PRE & POST-HOSPITALIZATION SPECIALIST CONSULTATION, DIAGNOSTIC X-RAY AND LABORATORY TESTS Expenses incurred 90 days prior to admission and 90 days after discharge					
6	EMERGENCY ACCIDENTAL OUTPATIENT TREATMENT (PER POLICY YEAR) Expenses incurred within 31 days of accident, provided treatment is sought within 24 hours of accident (includes Accidental Dental)	500				
7	OUTPATIENT KIDNEY DIALYSIS / CANCER TREATMENT Up to maximum limit per Policy Year	5,000				
8	DEATH	3,000				
ANN	IUAL PREMIUM PER FOREIGN WORKER (S\$)	277.95				

Pro-ration Factor

The pro-ration factor below shall apply if a member is admitted to a higher class of ward, a private or overseas hospital.

TYPE OF WARD / HOSPITAL	PRO-RATION FACTOR
Class A Ward in a Singapore Government Restructured Hospital	65%
Any Private Hospitals in Singapore	50%
Any Overseas Hospitals	50%

 $^{^{\}mbox{\tiny f}}$ 25% co-insurance will apply if the maximum no. of days is exceeded.

OPTIONAL RIDER (FOR GTL): GROUP ACCELERATED CRITICAL ILLNESS (GACI)

UNDERWRITING

Sum Assured above \$\$90,000 is subjected to underwriting and AIA's approval.

ACCELERATED CRITICAL ILLNESS⁵ (ACI)

Upon the diagnosis of a CI, the plan provides:

- a. An advance benefit payment of 10% of the sum assured up to a maximum of S\$25,000 for Angioplasty & other invasive Treatment for Coronary Artery. The advance benefit is payable only once and the sum assured will be reduced accordingly. However, the premium will be charged for the full CI sum assured.
- b. A lump sum payment of the full sum assured for the rest of the 36 critical illnesses.

 Once the full CI sum assured is paid, the CI cover will terminate. The GTL sum assured, and premium will be reduced and adjusted accordingly.

EXCLUSIONS

Critical Illness due to a congenital defect which has manifested or was diagnosed before age 17.

Critical Illness "Coronary Artery Surgery and/or Other Serious Coronary Artery Disease" if diagnosis of "myocardial infarction" was made prior to the effective date of coverage.

Critical Illness which was diagnosed prior to the effective date of coverage.

Critical Illness for which the insured sought advice or treatment for symptoms which had contributed directly or indirectly to the Critical Illness prior to the effective date of coverage.

SUM ASSURED FOR EMPLOYEE (S\$)								
GROUP ACCELERATED CRITICAL ILLNESS (GACI)	PLAN 1	PLAN 2	PLAN 3	PLAN 4	PLAN 5 ⁶	PLAN 6 ⁶		
37 Critical Illnesses ⁷	25,000	40,000	60,000	90,000	125,000	250,000		

SUM ASSURED FOR DEPENDANT (\$\$)							
GROUP ACCELERATED CRITICAL ILLNESS (GACI)	PLAN 1	PLAN 2	PLAN 3	PLAN 4	PLAN 5 ⁶	PLAN 6 ⁶	
37 Critical Illnesses ⁷	12,500	20,000	30,000	45,000	62,500	125,000	

	ANNUAL PREMIUMS FOR EMPLOYEE - GTL + GACI (S\$)					
AGE ⁸ BAND	PLAN 1	PLAN 2	PLAN 3	PLAN 4	PLAN 5	PLAN 6
Up to 29	73.50	117.50	176.00	263.50	366.50	732.00
30-34	97.00	155.00	232.50	348.50	483.50	966.50
35-39	128.00	205.00	306.50	460.00	638.50	1,276.50
40-44	218.50	349.50	524.00	785.50	1,091.00	2,181.50
45-49	341.00	545.00	817.50	1,226.50	1,703.50	3,406.50
50-54	499.00	798.00	1,197.50	1,795.50	2,493.50	4,986.50
55-59	840.50	1,345.00	2,018.00	3,026.00	4,202.50	8,405.00
60-64	1,390.50	2,224.50	3,336.00	5,004.00	6,950.00	13,899.00
65-69 ⁵	2,162.00	3,459.00	5,188.50	7,782.50	10,808.50	21,616.50
70-74			N.	/A		

	ANNUAL PREMIUMS FOR DEPENDANT - GTL + GACI (S\$)						
AGE ⁸ BAND	PLAN 1	PLAN 2	PLAN 3	PLAN 4	PLAN 5	PLAN 6	
Up to 29	40.50	65.00	97.00	145.00	201.50	402.00	
30-34	53.50	85.00	127.50	191.00	265.50	530.00	
35-39	70.00	112.50	168.50	252.50	350.00	700.00	
40-44	119.50	191.00	287.00	429.50	596.50	1,192.50	
45-49	187.00	299.00	448.00	672.00	933.00	1,865.00	
50-54	273.00	437.00	655.50	983.00	1,365.00	2,730.00	
55-59	460.00	736.00	1,104.00	1,656.00	2,300.00	4,600.00	
60-64	761.50	1,218.50	1,827.00	2,740.50	3,806.00	7,611.50	
65-69	1,184.50	1,894.50	2,841.50	4,262.00	5,920.00	11,839.00	
70-74	N/A						

FOOTNOTI

Please refer to the policy contract for the full list of exclusions.

⁵ Refer to Point 7 under **Eligibility** on page 18 for more information.

⁶ Subjected to underwriting & AIA's approval.

⁷ Based on list of 37 critical illnesses. Refer to policy contract for more details.

⁸ Age Last Birthday. Refer to Point 5 under **Eligibility** on page 18 for more information.

OPTIONAL RIDER (FOR GHS): GROUP OUTPATIENT CLINICAL (GP)

COVERAGE	Covers GP consultation, medication, basic x-ray and laboratory tests at AIA Panel and Non-Panel GP clinics (local and overseas), Singapore Government Polyclinics and A&E. Teleconsultation and medication at the GP level are covered only with AIA preferred telemedicine partner.
COMMON EXCLUSIONS	General medical check-up, health screening; immunisation, vaccination, or inoculation; non-prescribed medication, vitamins, and supplements.

				I A PER DISABILTY BASIS, D, FOR EACH INSURED MEMBER	
GRO	UP OUTPATIENT CLINICAL (GP)	FACILITY	NO CO-PAY	WITH CO-PAY	
			s	\$	
1	Visit to AIA panel of GP clinics		As Charged, Unlimited Visits	As Charged, Unlimited Visits	
2	Visit to AIA Panel of Traditional Medicine (TCM) clinics (consultation only)	Panel & Cashless	As Charged, Up to 6 Visits	As Charged, Up to 6 Visits	
3	AIA Panel GP Teleconsultation and Medication		As Charged, Up to 6 Visits	As Charged, Up to 6 Visits	
4	Visit to Singapore Government Polyclinics		As Charged	As Charged	
5	Visit to A&E Department of Singapore Hospitals	No. and S	120 Per Visit	120 Per Visit	
6	Visit to GP clinics not appointed by AIA including non-panel clinics in Johor State	Non-panel & Reimbursement	30 Per Visit	30 Per Visit	
7	Visit to Overseas GP Clinics excluding non-panel clinics in Johor State		100 Per Visit	100 Per Visit	
8	Co-payment per visit (for all items excluding item 2)		0 Per Visit	5 Per Visit	

ANNUAL PREMIUMS FOR EMPLOYEE - GP (S\$)				
AGE BAND°	PLAN 1	PLAN 2		
Up to 69	256.35	250.30		
70 to 74	282.60	275.53		

ANNUAL PREMIUMS FOR DEPENDANT - GP (S\$)				
AGE BAND ⁹	PLAN 1	PLAN 2		
Up to 69	282.60	275.53		
70 to 74	310.85	302.78		

OPTIONAL RIDER (FOR GTL & GHS): GROUP OUTPATIENT CLINICAL & GROUP OUTPATIENT SPECIALIST (GP & SP)

COVERAGE

OUTPATIENT CLINICAL

Covers GP consultation, medication, basic x-ray and laboratory tests at AIA Panel and Non-Panel GP clinics (local and overseas), Singapore Government Polyclinics and A&E. Teleconsultation and medication at the GP level are covered only with AIA preferred telemedicine partner.

OUTPATIENT SPECIALIST

Covers Specialist consultation & medication at:

- a. AIA Panel Specialist clinics referred by AIA Panel GP
- b. Singapore Government Restructured Hospitals referred by any GP
- c. Paediatricians of AIA Preferred Telemedicine Partner (referral letter is required for dependant more than 7 years old)

Covers basic and specialised tests referred by AIA Panel GP, AIA Panel Specialist, AIA Preferred Telemedicine Partner, Non-Panel GP or Specialist at Singapore Government Restructured Hospitals or Singapore Government Polyclinics.

Covers Physiotherapy, provided it is referred by AIA Panel GP, AIA Panel Specialist, AIA Preferred Telemedicine Partner or Specialist at Singapore Government Restructured Hospitals or Singapore Government Polyclinics.

COMMON EXCLUSIONS

General medical check-up, health screening; immunisation, vaccination, or inoculation; non-prescribed medication, vitamins, and supplements.

Any expenses incurred in relation to any type of therapy including but not limited to occupational therapy, or dialysis, except for physiotherapy (covered under specialist outpatient only).

Cosmetic Treatment.

			BENEFITS APPLY ON A UNLESS OTHERWISE STATED,	PER DISABILTY BASIS, FOR EACH INSURED MEMBER
GROUP OUTPATIENT CLINICAL (GP)		FACILITY	NO CO-PAY	WITH CO-PAY
			S	\$
1	Visit to AIA panel of GP clinics		As Charged, Unlimited Visits	As Charged, Unlimited Visits
2	Visit to AIA Panel of Traditional Medicine (TCM) clinics (consultation only)	Panel & Cashless	As Charged, Up to 6 Visits	As Charged, Up to 6 Visits
3	AIA Panel GP Teleconsultation and Medication		As Charged, Up to 6 Visits	As Charged, Up to 6 Visits
4	Visit to Singapore Government Polyclinics		As Charged	As Charged
5	Visit to A&E Department of Singapore Hospitals	Non-nonal C	120 Per Visit	120 Per Visit
6	Visit to GP clinics not appointed by AIA including non-panel clinics in Johor State	Non-panel & Reimbursement	30 Per Visit	30 Per Visit
7	Visit to Overseas GP Clinics excluding non-panel clinics in Johor State		100 Per Visit	100 Per Visit
8	Co-payment per visit (for all items excluding item 2)		0 Per Visit	5 Per Visit

GROUP OUTPATIENT SPECIALIST (SP)		FACILITY	PLAN 1	PLAN 2	PLAN 3	PLAN 4
			S\$			
1	Visit to AIA Panel of Specialist Clinics					
2	AIA Panel Paediatric Teleconsultation & Medication (capped at 6 visits per policy year; referral letter is required for child aged above 7 years old)	Panel & Cashless	800 Per Policy	1,000 Per Policy	1,500 Per Policy	2,000 Per Policy
3	Visit to Outpatient Specialist clinics at Singapore Government Restructured Hospitals	Non-panel &	Year	Year	Year	Year
4	Physiotherapy Treatment	Reimbursement				
5	AIA Panel Diagnostic X-ray & Laboratory Test	Panel & Cashless				
6	Diagnostic X-ray & Laboratory Test at Singapore Government Restructured Hospitals	Non-panel & Reimbursement	800 Per Policy Year	1,000 Per Policy Year	1,500 Per Policy Year	2,000 Per Policy Year
7	Other Diagnostics Scans (including MRI & CT scans)					

Referral letter is required from any Registered Medical Practitioner for items 1 to 7.

ANNUAL PREMIUMS FOR EMPLOYEE – GP COPAY S\$0 + SP (S\$)					
AGE BAND ¹⁰	PLAN 1	PLAN 2	PLAN 3	PLAN 4	
Up to 69	478.39	518.76	619.68	676.20	
70 to 74	526.84	571.25	683.27	744.84	

ANNUAL PREMIUMS FOR DEPENDANT – GP COPAY S\$0 + SP (S\$)					
AGE BAND ¹⁰	PLAN 1	PLAN 2	PLAN 3	PLAN 4	
Up to 69	526.84	571.25	683.27	744.84	
70 to 74	579.31	628.77	750.89	819.52	

ANNUAL PREMIUMS FOR EMPLOYEE – GP COPAY S\$5 + SP (\$\$)					
AGE BAND ¹⁰	PLAN 1	PLAN 2	PLAN 3	PLAN 4	
Up to 69	472.34	512.71	613.63	670.15	
70 to 74	519.77	564.18	676.21	737.77	

ANNUAL PREMIUMS FOR DEPENDANT – GP COPAY S\$5 + SP (S\$)					
AGE BAND ¹⁰	PLAN 1	PLAN 2	PLAN 3	PLAN 4	
Up to 69	519.77	564.18	676.21	737.77	
70 to 74	571.25	620.70	742.82	811.45	

OPTIONAL RIDER (FOR GTL & GHS): GROUP ACCIDENTAL DEATH & DISMEMBERMENT (GADD)

DEATH

Provides 24-hours worldwide coverage against death due to accident. The sum assured is payable in a lump sum.

TOTAL AND PERMANENT DISABILITY (TPD)

- a. Total & Permanent Disability Benefit Provides coverage against TPD as a result of accident prior to the insured's 65th birthday. TPD shall mean that the disability must be total and permanent and that there is no work, occupation, or profession that the insured can ever sufficiently do or follow to earn or obtain any wages, compensation or profit. The sum assured is payable in a lump sum.
- b. Mobility Aid Extension Benefit In the event of TPD, this benefit provides for the reimbursement of the cost of equipment necessary for mobility (e.g. wheelchair). The amount payable is 95% of the expenses up to a maximum of S\$1,000.

MAJOR BURNS

Provides coverage against 3rd degree burns.

COMPASSIONATE DEATH ALLOWANCE

Pays a benefit of \$\$2,000 in addition to the above-mentioned Death benefit.

CHILDREN EDUCATION FUND

Pays a benefit of \$\$5,000 in addition to above-mentioned Death benefit if as a result of an accident the member leaves behind a dependant child.

Dependant child is an unmarried child below 25 years old and unemployed.

ACCIDENTAL DEATH DUE TO COMMON CARRIER Pays a benefit of 10% of the sum assured up to a maximum of S\$10,000, in addition to the above-mentioned Death benefit, if as a result of an accident, whilst boarding, alighting or travelling in a duly licensed commercial aircraft as a fare-paying passenger, the member dies within 12 months of the date of accident.

COMATOSE STATE DUE TO COMMON CARRIER

Pays a benefit of 20% of the sum assured up to a maximum of \$\$20,000, if as a result of an accident, whilst boarding, alighting or travelling in a duly licensed commercial aircraft as a fare-paying passenger, the member is hospitalized and is in a comatose state within 30 days of the date of accident.

EXCLUSIONS

Self-destruction or any attempt thereat.

War, participation in a riot, violation or attempted violation of the law or resistance to arrest.

Travelling or flying in, ascending or descending from any aerial device or aircraft, unless the insured is travelling as a fare-paying passenger in a duly licensed commercial aircraft and the said aircraft was not engaged in any rescue, instructional or training purposes during such flight.

Racing on horse or wheels.

SUM ASSURED FOR EMPLOYEE (S\$)							
GROUP ACCIDENTAL DEATH & DISMEMBERMENT (GADD)	PLAN 1	PLAN 2	PLAN 3	PLAN 4	PLAN 5	PLAN 6	
Death and Total Permanent Disability (TPD)	50,000	80,000	120,000	180,000	250,000	500,000	

SUM ASSURED FOR DEPENDANT (S\$)						
GROUP ACCIDENTAL DEATH & DISMEMBERMENT (GADD)	PLAN 1	PLAN 2	PLAN 3	PLAN 4	PLAN 5	PLAN 6
Death and Total Permanent Disability (TPD)	25,000	40,000	60,000	90,000	125,000	250,000

	ANNUAL PREMIUMS FOR EMPLOYEE - GADD (S\$)							
CI	LASS ¹¹	PLAN 1	PLAN 2	PLAN 3	PLAN 4	PLAN 5	PLAN 6	
	1	27.25	44.41	66.62	99.92	137.26	275.53	
	2	38.35	62.58	93.87	139.28	193.78	387.56	
	3	52.49	83.77	125.15	188.74	261.40	522.80	

ANNUAL PREMIUMS FOR DEPENDANT - GADD (S\$)						
CLASS ¹¹	PLAN 1	PLAN 2	PLAN 3	PLAN 4	PLAN 5	PLAN 6
1	16.15	25.24	37.35	57.53	79.74	157.45
2	28.26	45.42	68.63	102.95	142.31	285.63
3	30.28	48.45	73.68	110.01	152.40	305.81

FOOTNOTE

Please refer to the policy contract for the full list of exclusions.

¹¹ Refer to Point 8 under **Eligibility** on page 18 for more information.

OPTIONAL RIDER (FOR GTL & GHS): GROUP DENTAL

GROUP DENTAL (DENTAL PPO-PLUS) SCHEDULE OF ALLOWANCES	AIA PANEL OF DENTAL CLINICS	NON-AIA PANEL OF DENTAL CLINICS (S\$)
EXAMINATION Dental Checkup		15
MEDICINE & MISCELLANEOUS TREATMENT Analgesics, antibiotics, sterilisation and disposables		15
X-RAY Intraoral Bitewing Panorex		12 12 32
TEST & LABORATORY Biopsy and examination of tissue		48
PROPHYLAXIS Routine Complex		40 60
FILLING (SILVER) – for posterior teeth only Amalgam – one surface Amalgam – two surfaces Amalgam – three or more surface Reinforced Pin		16 24 32 9
FILLING (TOOTH-COLOURED MATERIAL) – for anterior teeth and buccal (one surface) filling of premolars only One surface Two surfaces Three surfaces		30 40 50
PULPOTOMY Pulpotomy Pulp Cap		40 20
ROOT CANAL TREATMENT Single root canal filling Double root canal filling Three or more root canals (X-ray of the tooth involved with the diagnostic wire or wires in place must accompany claim for payment)	Cashless	150 220 350
EXTRACTIONS Routine (simple) – each tooth		30
SURGICAL EXTRACTIONS Erupted tooth or root Soft tissue impaction Part bony impaction Completely bony impaction		120 160 250 320
ALVEOPLASTY Per quadrant, in connection with extractions Per quadrant, not in connection with extractions For a complete Alveoplasty involving more than one quadrant		30 42 160
EXCISION OF TUMOUR Excision of tumour		76
FRACTURE OF JAW Simple Compound (X-ray of the fracture must accompany claim for payment)		500 600
REPAIR OF PROSTHETIC APPLIANCE Repair of broken, complete or partial denture Repair of denture and replace broken tooth Adding tooth to partial denture to replace extracted tooth Adding tooth to partial denture plus clasp		20 40 27 54
SPACE MAINTAINERS Fixed band type (uni or bilateral) Removal in acrylic (uni or bilateral)		135 67

ANNUAL PREMIUMS FOR EMPLOYEE - DENTAL (S\$)					
AGE BAND ¹²	PLAN 1				
Up to 69	395.63				
70 to 74	395.63				

ANNUAL PREMIUMS FOR DEPENDANT - DENTAL (\$\$)				
AGE BAND ¹²	PLAN 1			
Up to 69	494.54			
70 to 74	494.54			

FOOTNOT

 $^{^{\}rm 12}\,\mathrm{Age}$ Last Birthday. Refer to Point 5 under **Eligibility** on page 18 for more information.

UNDERWRITING GUIDELINES

AGE LAST BIRTHDAY	GROUP ACCELERATED CRITICAL ILLNESS (GACI)	ALL PRODUCTS EXCEPT GACI & DENTAL	DENTAL		
Employees Legal Spouse	16 – 64, renewable to 69	16 – 69, rene	16 – 69, renewable to 74		
Children (unmarried & unemployed)	2 week	3 to 25			

ELIGIBILITY

- 1. All full-time actively at-work employees, directors, partners, and proprietors are eligible, subject to AIA's approval.
- 2. Companies with a minimum of 5 lives (minimum 2 employees & 3 dependants) up to a maximum of 50 lives (inclusive of dependants).
- 3. For companies with only 3 or 4 lives (minimum 2 employees), the following criteria must be fulfilled before an AIA FVC Plus policy ("this Policy") can be incepted:
 - A minimum annual premium requirement of S\$2,500 (excluding GST) and;
 - GTL must be taken up
- 4. Only for companies with a minimum number of 25 Standard Life employees, the pre-existing exclusion will be waived for members who have been insured continuously for 12 months under this Policy or under any GHS issued in Singapore immediately prior to the commencement of insurance coverage under this Policy.
- 5. All benefits (except GACI) are available to eligible employees and spouse of age 16 to 69, and renewal up to age 74 (age last birthday). Eligible employees and spouse of age 64 to 69 (age last birthday), will require underwriting during initial participation. GACI is available to eligible employees and spouse of age 16 to 64 (age last birthday), and renewal up to age 69. All benefits are also available to child(ren) aged from 2 weeks old to 25 years old, unmarried and unemployed. For Group Dental, it is available to child(ren) aged from 3 years old to 25 years old, unmarried and unemployed.
- 6. GHS-FW is only available to employees holding Singapore's Ministry of Manpower S-Pass or Work Permit. GHS-FW can only be taken up if there is at least 2 employees from GHS Plans 1 to 4.
- 7. All conditions covered under the GACI benefit are subject to a waiting period. The waiting period refers to the period whereby no benefit will be payable under the plan if the date of diagnosis of an illness or condition leading to the performance of the surgical procedure was made within 30 days from the date of issue or date of reinstatement, whichever is later. However, the following critical illnesses are subject to a 90-day waiting period:
 - · Major Cancers;
 - · Coronary Artery By-pass Surgery or Other Coronary Artery Disease;
 - Heart Attack and;
 - Angioplasty & Other Invasive Treatment for Coronary Artery
- 8. Occupational risks: Class 1 to 3
 - Class 1: Clerical, administrative or other similar non-hazardous occupations.
 - **Class 2**: Occupations where some degree of risk is involved, e.g. supervision of manual workers, totally administrative job in an industrial environment.
 - **Class 3**: Occupations involving regular light to medium manual work but no substantial hazard which may increase the risk of sickness or accident.

PARTICIPATION AND PLAN SELECTION

- 1. The company must choose either a GTL Core Plan, a GHS Core Plan or both. Company can further select any of the optional riders:
 - a) GTL: GACI, GADD, GP & SP, and/or Group Dental
 - b) GHS: GADD, GP, GP & SP, and/or Group Dental
- 2. Dependants' coverage must follow the same employee's core plan, plan selection and classification, either for basic or upgraded coverage.
- 3. Voluntary Dependants are subject to underwriting for selection of the following plans:
 - a) GHS Plan 4 During the process of underwriting assessment, no cover will be provided.
 - b) GTL/ GACI Plan 5 & Plan 6 During the process of underwriting assessment, accidental death coverage will be provided.
- 4. Any upgrade in plan selection and voluntary dependants' coverage will be subjected to the following enrolment period:
 - a) Existing employees once a year and the request must be submitted to us within 1 month from the policy renewal anniversary date.
 - b) New employees within 1 month from the day following the completion of the required waiting period.
- 5. If GACI is taken up as a rider, its plan selection must align to the plan selection for GTL.
- 6. Dependants will be insured for 50% of the sum assured for GTL or GACI and GADD.
- 7. If Group Dental is taken up as a rider, the participation must be on a compulsory basis for all employees, subjected to a minimum of 5 lives. Further coverage may be extended to spouse and child(ren) of employees.

IMPORTANT NOTES

This insurance plan is underwritten by AIA Singapore Private Limited (Reg. No. 201106386R) ("AIA"). All insurance applications are subject to AIA's underwriting and acceptance. This brochure is not a contract of insurance. The precise terms and conditions of this plan, including exclusions whereby the benefits under your policy may not be paid out, are specified in the policy contract. You are advised to read the policy contract.

Buying health insurance products that are not suitable for you may impact your ability to finance your future healthcare needs. You are discouraged from switching from an existing accident and/or health insurance policy to a new one without considering whether the switch is detrimental, as there may be potential disadvantages with switching. A penalty may be imposed for early policy termination and the new policy may cost more or have fewer benefits at the same cost.

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 information on the types of benefits that are covered under the scheme as well as the limits of coverage, where applicable, please contact your insurer or visit the GIA/LIA or SDIC websites (www.gia.org.sg or www.sdic.org.sg).

This advertisement has not been reviewed by the Monetary Authority of Singapore. Information is correct as of 31 October 2023.



(Group Size: 5 - 50 Lives)

AIA SINGAPORE PRIVATE LIMITED (REG. NO. 201106386R) AIA FLEXI VITAL CARE PLUS APPLICATION FORM

WARNING: In accordance with Section 25(5) of the Insurance Act, as may be amended from time to time, you are to fully and faithfully disclose in this Application Form all facts which you know, or ought to know, failing which you may receive nothing from the policy and/or the policy issued may be void.

Please type/write clearly in CAPITAL letters and indicate Do refer to the policy contract for more information.	the Plan Number.
COMPANY PARTICULARS	
Name of Company (herein the policyholder):	Company Registration No. / Unique Entity No. (UEN):
Nature of Business:	
Mailing Address:	Postal Code:
Total Number of Employees to be insured:	Total Number of Dependants to be insured:
COMMENCEMENT OF INSURANCE COVERAGE	
Effective Date:	
DD/MM/YYYY (Commencement Date)	
CONTACT DETAILS OF AUTHORISED PERSON-II	N-CHARGE
Name:	Identification Number:
	(NRIC/FIN No.)
Email Address:	
Office No.:	Mobile No.:
OTHER SUBMISSION DOCUMENTS REQUIRED	
Accounting and Corporate Regulatory Authority (ACl (Latest copy of not more than 12 months)	RA Bizfile)
MAS 314 (Form) List of Authorised Signatories and I	Beneficial Owners*
Excel Template for Members Census Reporting*	

USEFUL INFORMATION



- * Forms can be downloaded from https://eben.aia.com.sg/en/my-aia/login/information-library.html
 OR you can scan the QR code to get to the URL
- MAS 314 Form: Click on Administration >> MAS 314 List of Authorised Signatory and Beneficial Owners
- Excel Template for Members Census Reporting: Click on Administration>> Excel Template for Member Census Reporting
- HR AIA eBenefits User ID Request Form: Click on Administration >> eBenefits UserID and Password Application

BASIS OF COVERAGE

	Please indicate Plan (i.e 1, 2, 3, 4, 5 or 6) for each Type of Benefit										
Employee Category (Management, Executive, Clerical, etc.)	t, Executive, Core Plan		Optional Riders to Selected Core Plans						Dependant(s) Cover [Yes/ No] (On compulsory/		
otorioat, etc.)			GHS-FW	GHS-FW GACI	GADD	No Co	o-pay	With \$5	Co-pay		voluntary basis)
	GTL	GHS	(Only for GHS cover)	(Only for GTL cover)	(Pls indicate Occupational Class)	GP (Only for GHS cover)	GP & SP	GP (Only for GHS cover)	GP & SP	Group Dental	
			Yes/ No							Yes/ No	
			Yes/ No							Yes/ No	
			Yes/ No							Yes/ No	
			Yes/ No							Yes/ No	
			Yes/ No							Yes/ No	
			Yes/ No							Yes/ No	

Note: 1. Optional Riders can only be taken up with Core Plans. Please refer to the Participation and Plan Selection criterias on page 19.

2. Dependants' coverage must be of the same plan as employee.

Cardholder's Signature (as per Credit Card)

- 3. Dependants will be insured for 50% of the sum assured for GTL or GACI and GADD.
- 4. Refer to Page 18, Point 8 for details on Occupational Class for GADD.

	PAYMEN	IT METHOD			
☐ Bank Transfer	Bank details of Al	A Singapore Private Limited			
	Payable to:	AIA SINGAPORE PRIVATE LIMITED			
	Currency:	SGD			
	Bank Name:	Standard Chartered Bank			
	Bank Address:	6 Battery Road			
	Bank Code:	9496			
	Branch Code:	001			
	Account Name:	AIA SG Pte Ltd - Npar (SGD)			
	Account No.:	01-022-8773-2			
	Swift Code:	SCBLSG22XXX			
☐ Credit Card	Type of Card:	VISA MASTERCARD AMEX			
Name of Cardholder (as printed on card):					
Credit Card Number:		Card Expiry Date: MM YY			
Note: 1. For VISA or MASTERCARD, the Cardholder must be a "Director" stated in the company's ACRA. 2. For AMEX card, only corporate cards starting with "37622", "37695", "3798" and "3773" are allowed. 3. No third party credit card is allowed.					
CARDHOLDER'S AUTHORISATION					
		gapore Private Limited ("AIA Singapore") to charge the aforesaid card and lication, including any additional premiums payable after the submission			
this form or otherwise obtained) to its assoc with regard to any matters pertaining to this	iated individuals /org form /aforesaid Polic uals/organisations ar	d/or disclose any information collected and /or held (whether contained in anisations and/or independent third parties, within or outside Singapore, sies. I hereby specifically waive any right to bring a claim of any nature nd/or independent third parties, within or outside Singapore, in respect of sure described above.			
, ,	•	horisation for any reason, AIA Singapore shall under no circumstances any subsequent expiry of the policies due to late or non-payment of			
		ding death of the Cardholder, irrespective whether or not this form/this authorisation shall be effective and valid as original.			



Date (DD/MM/YYYY)

DECLARATION & AUTHORISATION

The Applicant hereby agrees and declares, on behalf of itself and any other person or persons, firm or corporation, who may have or claim any interest in any insurance on this Application:

- 1. No statement, information or agreement made by/to or given by/to the person soliciting/taking this Application or any other persons, shall be binding on AIA Singapore Private Limited ("AIA"), unless presented to AIA in writing and approved by an authorised officer of AIA.
- 2. The statements and answers contained in this Application, together with those contained in any required form including enrolment form, questionnaire or amendment of the Applicant, the statements and answers of the Applicant's employees and their dependants contained in any required form, or medical report, and any required supporting documents (collectively the "Information") are full, complete, true and correct and that no Information has been withheld. The Applicant further agrees that the Information shall form the basis of the contract between the parties hereto, and that the Information together with the group policy (including without limitation its riders, endorsements and any amendments thereto) shall constitute the entire contract between the parties. The Applicant understands that if any of the Information is not full or complete or true or correct, the group policy issued hereunder may be void and the Applicant/policyholder/employee/dependant as the case may be, may receive nothing from the group policy.
- 3. AIA shall assume no liability whatsoever and the group policy will only be effective after this Application and required forms, questionnaires or amendments have been completed by the Applicant, and its employees and their dependants, with the Application being accepted by AIA and the first premium fully paid for.
- 4. I/We hereby authorise, agree and consent to:
 - a) persons and organisations, whether within or outside Singapore, including but not limited to medical sources, hospitals, doctors, other healthcare professionals, laboratories, regulator, dispute resolution centres and insurers, their associated persons/organisations, my/our or the insured person's employers or financial service providers, or their third party service providers or representatives (collectively "Third Parties") disclosing and releasing to AIA, its associated persons/organisations, its and their third party service providers and its and their representatives, whether within or outside Singapore (collectively "AIA Persons"), any information concerning the policy owner and the insured person(s) at any time, including all personal data and information, medical information, medical history, consultation history and notes, prescriptions, treatments, descriptions of medical services rendered, and any employment and financial information, including the taking of copies of such records (collectively "Personal Data"), relevant for the Purpose (defined below);
 - b) the AIA Persons sharing the scope of sub-clause (a) above, along with any of the Personal Data, with any relevant Third Parties to procure their disclosure and release of additional relevant Personal Data for the Purpose;
 - c) the AIA Persons, including their approved medical examiners or laboratories, performing any necessary medical assessments and examinations and tests to determine, assess and evaluate the health of the insured person(s);
 - d) the AIA Persons collecting, using, disclosing, storing, retaining and/or processing (collectively, "Using"/"Use") the Personal Data for the Purpose; and
 - e) waive any right (on my own behalf and on behalf of the insured person(s) where applicable, in respect of which I/we represent and warrant that the insured person(s) have granted me/us authority to so waive) to bring a claim of any nature against any of the AIA Persons in respect of any above-mentioned Use and/or any Use of any Personal Data for the Purpose.

Where I/we are not the insured person, I/we represent and warrant that I/we have obtained the consent of the insured person(s), except to the extent such consent is not required under relevant laws: (i) to collect their Personal Data; (ii) to disclose their Personal Data to the AIA Persons; and (iii) for the AIA Persons and Third Parties to Use any of their Personal Data in the manner and for the purposes described in this Clause. I/ We hereby agree to indemnify AIA Persons for all losses and damages that AIA Persons may suffer in the event that I/we are in breach of any representation and warranty provided by me/us herein. In this Clause, "Purpose" means any of the purposes described in the AIA Personal Data Policy, including but not limited to processing of this form, to provide subsequent advice or services to me/us or the insured person in relation to any existing or future policy/policies/programmes that I/we may hold/participate with AIA. This authorisation shall bind my/our successors and assignees, and remains valid, notwithstanding death, irrespective of whether or not my/our Application/form is accepted by AIA. A photocopy of this authorisation shall be valid and effective as the original.

- 5. The Applicant is not insolvent or is unable to pay its debts as they become due, or making any assignment or arrangement for the benefit of its creditors, or is ceasing or threatening to cease to carry on its business.
- 6. Should a Relevant Person be found at any time to be a Prohibited Person, AIA Singapore is entitled, at its absolute discretion and without any liability to me/us, to (i) decline, block, suspend or cancel this application or any request, instruction, or transaction including any payment, transfer or receipt of money; (ii) decline to provide cover or to pay any claim or benefit under the Policy; and (iii) immediately terminate or void the Policy. AIA Singapore's decision in exercising this right shall be final. This right may only be waived in writing; no delay or failure in exercising this right shall be deemed as a waiver of the same. "Relevant Person" includes (a) persons and entities who are the policy holders, insured persons, beneficiaries, trustees, payees, or assigns; (b) their beneficial owners or affiliates; (c) (in the case of an entity) their directors, partners, or direct / indirect shareholders or persons having executive authority, or (d) natural persons appointed to act on their behalf. "Prohibited Person" includes a person or entity that is subject to any sanction, prohibition or restriction administered by any regulatory authorities in any country or jurisdiction, such that the provision of such cover, payment of such claim or provision of such benefit may in AIA Singapore's opinion expose it to any, or any risk of, sanction, prohibition or restriction. As an ongoing obligation, I/we will immediately inform AIA Singapore if there are any changes to the identities, status, constitution, establishment, particulars and identification documents of these Relevant Persons. I/we will indemnify AIA Singapore and hold it harmless from and against any and all related losses, damages, costs and/or expenses suffered and/or incurred, including but not limited to legal costs.
- 7. By signing this Application, the Applicant confirms that the AIA Financial Services Consultant / Insurance Representative has solicited insurance business from the Applicant in the Republic of Singapore and that the signing of this Application has taken place in the Republic of Singapore.

WARNING: If a material fact is not disclosed in this Application, any insurance coverage issued to you may not be valid. If you are in doubt as to whether a fact is material, you are advised to disclose it. This includes any information that you may have provided to the AIA Financial Services Consultant(s)/Insurance Representative(s) but was not included in this Application. Please check to ensure you are fully satisfied with the information declared in this Application. Additionally and without prejudice to the parties' rights and obligations whether under law or otherwise, following the submission of this Application, you must continue to disclose any and all material facts that may arise or which have changed from the information you had provided.





AIA CONSULTANT'S / INSURANCE REPRESENTATIVE'S DETAILS

AIA Consultant's Details Name of Consultant (1): Contact No.: Commission Share (%): AIA Consultant Code: Name of Agency:	Insurance Representative's (Broker/Financial Advisor's) Details Name of Broker/Financial Advisor (FA): Financial Institution:
Signature of AIA Consultant:	Contact No.: Signature of Broker/FA: Date:
Name of Consultant (2) (if applicable): Contact No.: Commission Share (%): AIA Consultant Code: Name of Agency:	
Signature of AIA Consultant: Date: AIA Consultant (1) Supervisor's Details Name of Supervisor: Name of Agency:	
Supervisor Code:	



AIA Singapore Private Limited (Reg. No. 201106386R)

CORPORATE SOLUTIONS

3 Tampines Grande, AIA Tampines, #07-00 Singapore 528799 aia.com.sg