

**Tenet Insurance Company Ltd**

50 Raffles Place  
#05-01/06 Singapore Land Tower  
Singapore 048623  
Tel +65 6221 2211  
Fax +65 6221 3302  
[www.tenetinsurance.com](http://www.tenetinsurance.com)  
Company Registration No.: 195700067Z

**About Tenet Insurance**

Tenet Insurance Company Ltd was founded in 1957 and has developed a strong relationship with its customers based on credibility, trust and integrity. We offer a wide range of insurance products and services tailored to meet the ever-changing needs of individuals, families and companies. Tenet Insurance is a member of Sompo Japan Group.

SOMPO JAPAN INSURANCE INC. is one of Japan's leading insurance service providers, with a history stretching back to 1888. Today, Sompo Japan Group has offices and subsidiaries in 29 countries and regions outside Japan and provides a comprehensive range of risk and asset management solutions under a strict customer-first philosophy.

Sompo Japan Group was recognised as one of the "Global 100 Most Sustainable Corporations in the World" by the World Economic Forum in 2009 and 2010.





Take a daily worry free approach towards the uncertainties in life.  
With **Tenet's PASTar Insurance**, you and your loved ones are fully covered everyday, in times of needs due to unforeseen circumstances.

Let **PASTar** give you worldwide 24-hour protection from unexpected occurrences & everyday coverage for you and your loved ones!

## FEATURES AND HIGHLIGHTS

- **Worldwide 24-hour Protection** against sudden, unforeseen and unexpected events with access to **24-hour Emergency Assistance Hotline** for medical and travel assistance
- **Full Terrorism Cover**
- **ID Booster**, an optional extension to provide **Daily Hospitalisation Allowance** for 13 Specified Infectious Diseases
- **Child Cover from 1 month old under Family Plan**
- **Dental Treatment due to an Accident**
- **Food Poisoning**
- **Accidental Miscarriage**
- **Treatment expenses from licensed Chinese Physicians, Acupuncturists, Bonesetters and Chiropractors up to S\$500**
- **Motorcycling**
- **No Claim Bonus up to 25% on sum insured for Accidental Death and Permanent Disablement**
- **Double Indemnity up to S\$1,000,000 per policy** in the event of fatal accident involving both insured self and spouse

ENHANCED!

### Policy Owners' Protection Scheme

This policy is protected under the Policy Owners' Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy is automatic and no further action is required from you. For more information on the types of benefits that are covered under the scheme as well as the limits of coverage, where applicable, please visit [www.tenetinsurance.com/FAQ](http://www.tenetinsurance.com/FAQ) or the GIA / LIA or SDIC websites ([www.gia.ora.sq](http://www.gia.ora.sq) or [www.lia.ora.sq](http://www.lia.ora.sq) or [www.sdic.ora.sq](http://www.sdic.ora.sq))

## QUESTIONS & ANSWERS

1. **Who can enrol in the policy?**  
Singaporeans, Singapore Permanent Residents or Foreigners with valid employment pass, work permit, dependent pass, student pass and long term social visit pass between the age of 16 to 70 years old\* and are domiciled in Singapore can apply. Children from 1 month old up to 20 years old who are dependent, unmarried and unemployed natural children, legal step-children and legally adopted children of the insured self can also be enrolled in the same policy. For those in full-time tertiary institutions, the age limit will be extended to their 25th birthday. However if you need to leave home for temporary residence overseas ranging from a few months to a few years, please contact our office for separate quotation.
2. **Do I need to go for any medical examination?**  
No. You will be accepted based upon your health declarations on the attached Application Form.
3. **What are the main exclusions?**  
All insurance policies have exclusions. Some of the main exclusions under this policy are: war, self destruction, non prescribed use of drugs, intoxication, insanity, venereal disease, AIDS, childbirth, pre-existing defects, professional sports, underwater or other hazardous activities, private aviation and full-time military duty. Cover for infectious diseases are subjected to a Pandemic Alert exclusion.
4. **Is there a waiting period I can make a claim under Medical Expenses due to Infectious Diseases?**  
Yes. There is a fourteen (14) days waiting period applicable from first inception of cover for the insured person.
5. **If I make a claim in one year, what happens to my "No Claim Bonus"?**  
Your existing 'bonus' entitlement which shall be earned within the first 5 years from the inception of the policy will NOT be forfeited. However, there will be no 5% increase in the sum insured on renewal for the year following the claim.
6. **My mobile phone was damaged when I sustained injuries from an accidental fall. Will my phone be covered?**  
This item is not covered under the Personal Effects & Belongings benefits. Other excluded items are jewellery items (but not watches), pagers, portable computers/diaries/PDAs, camera and video equipment.
7. **What happens if I have more than one PASTar policy with Tenet?**  
The policy with the highest limit will respond to any claims made.
8. **Are all Personal Accident plans the same?**  
Most likely not. You will need to look out for differences in Definitions, Extensions, Tables of Benefits for Permanent Disablement and Exclusions. For example, our 'Accident' definition is wider than many other policies as it does not require the accident to be violent, visible or external.
9. **What is this Free Look Benefit? Will I be entitled to premium refund if I need to cancel the policy?**  
Enjoy 14 days 'Free Look'\*\* from the day you receive your insurance policy. If the policy is not suitable for you, you can arrange to cancel your policy within this period and receive a full refund on the payment made, no questions asked! Beyond the 'Free Look' period, we will refund you the balance premium after deducting our customary short-term premium or minimum premium provided no claims has been made under the policy.

\* Age next birthday

\*\* This is not applicable to renewals

**IMPORTANT NOTE:** This product brochure is not a contract of insurance. The specific terms, conditions and exclusions are set out in the policy. Please refer to our office should you require a specimen copy of the policy wording.

**PAStar**

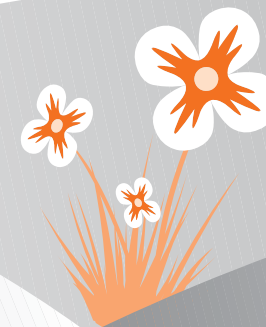
(SGD)

| BASIC COVER<br>BENEFITS per Insured Adult   | STANDARD  | DELUXE  | ELITE     | TOP-UP<br>(applicable to ELITE Plan only)  |                        |
|---|---|---|-----------|--|------------------------|
|   |   |   |           | Per Unit<br>Sum Insured<br>(up to 6 Units) | Maximum<br>Sum Insured |
| <b>A. Accidental Death (AD)</b>   | \$50,000  | \$100,000   | \$200,000 | \$50,000                                   | \$500,000              |
| <b>Double Indemnity</b> in the event of fatal accident involving both Insured Adults (excluding acts of terrorism)        | \$100,000   | \$200,000   | \$400,000 | \$100,000                                  | \$1,000,000 per policy |
| <b>Permanent Disablement (PD)</b>   | \$50,000  | \$100,000   | \$200,000 | \$50,000                                   | \$500,000              |
| <b>B. Medical Expenses</b> per disability incurred In Hospital or Outpatient Clinic                                       |   |   |           |  |                        |
| - due to Accident   | \$2,000   | \$3,000   | \$4,000   | \$500                                      | \$7,000                |
| - due to Infectious Diseases (See list below)   | \$2,000   | \$3,000   | \$4,000   | \$500                                      | \$7,000                |
| <b>List of 13 Specified Infectious Diseases</b>   |   |   |           |  |                        |
| - Severe Acute Respiratory Syndrome (SARS)  |   | - Measles   |           |  |                        |
| - Dengue Fever / Dengue Haemorrhagic Fever  |   | - Rabies  |           |  |                        |
| - Variant Creutzfeldt-Jakob Disease (vCJD) or 'Mad Cow Disease'   |   | - Melioidosis   |           |  |                        |
| - Nipah Virus Encephalitis  |   | - Hand, Foot and Mouth Disease (HFMD)   |           |  |                        |
| - Japanese Viral Encephalitis   |   | - Avian Influenza or 'Bird Flu' due to Influenza A viral strains H5N1, H9N2 or H7N7 |           |  |                        |
| - Malaria   |   | - Chikungunya Fever   |           |  |                        |
| - Pulmonary Tuberculosis  |   |   |           |  |                        |
| <b>C. Daily Hospitalisation Allowance</b> up to 365 days if hospitalised for > 24 hours due to an accident                | \$50  | \$100   | \$150     | \$25                                       | \$300                  |
| <b>D. Weekly Income Benefit</b> for temporary disablement up to 104 weeks (payable for gainfully employed persons only)   | \$50  | \$100   | \$200     | \$75                                       | \$650                  |
| <b>E. Family/Parental Allowance Per Month</b> for 12 months in the event of accidental death                              | \$1,000   | \$2,000   | \$3,000   |  | N.A.                   |
| <b>F. Re-employment Benefit</b> upon ≥ 50% Permanent Disablement payment  | \$500   | \$1,000   | \$2,000   |  | N.A.                   |
| <b>G. Personal Effects &amp; Belongings</b> damaged as a result of an accident payable under the policy (per policy year) | \$200   | \$300   | \$400     |  | N.A.                   |
| <b>H. Emergency Medical Evacuation &amp; Repatriation</b> via 24-hour hotline assistance                                  | \$50,000 (per Insured Person)<br>\$100,000 (in aggregate per policy)                                |   |           |  | N.A.                   |
| <b>I. Tuition Benefit for Insured Child(ren) Per Month</b> for 12 months  | \$100   | \$200   | \$300     |  | N.A.                   |
| <b>EXTENDED BENEFITS</b>  |   |   |           |  |                        |
| <b>Domestic Maid Cover</b> in per policy  | \$5,000 (in aggregate per policy)   |   |           |  | N.A.                   |
| <b>Full Terrorism Cover</b> in aggregate for above sections   | \$50,000  | \$100,000   | \$200,000 | \$50,000                                   | \$500,000              |
| <b>Treatment by Licensed Chinese Physicians and Chiropractors</b>   | \$500 Per Insured Person<br>\$1,000 per policy  |   |           |  | N.A.                   |
| <b>BENEFITS per Insured Child</b>   |   |   |           |  |                        |
| <b>A. Accidental Death</b><br><b>B. Medical Expenses</b><br><b>C. Daily Hospitalisation Allowance</b>                     | 25% of the parent's sum insured (excluding top-up) based on the lower of the parents' selected plan |   |           |  | N.A.                   |

| OPTIONAL COVERS<br>ENHANCED BENEFITS per Insured Adult  | STANDARD | DELUXE | ELITE | TOP-UP<br>(applicable to ELITE Plan only)                  |                        |
|---|----------|--------|-------|--|------------------------|
|   |          |        |       | Per Unit<br>Sum Insured<br>(up to 6 Units)                 | Maximum<br>Sum Insured |
| <b>J. ID Booster providing Daily Hospitalisation Allowance</b> (up to 60 days)<br>- Due to 13 Specified Infectious Diseases | \$50     | \$100  | \$150 | \$25   | \$300                  |
| <b>K. Education Fund</b> for insured child(ren) upon accidental death of the Insured Self or Insured Spouse                 | \$25,000 |        |       |  |                        |
| <b>L. Parent's Cover</b> up to 4 parents including parents-in-law if both Insured Adults are covered under the same PAStar  |          |        |       | \$25,000<br>(upon accidental death / permanent disability) |                        |

**Notes**

- Top-up is not applicable to unemployed, housewives, full-time student and retirees.
- If enrolled before age 60 years and no lapse in cover,
  - Standard plan is renewable up to age 85 years.
  - Deluxe and Elite plan are renewable under same plan up to age 75 years, thereafter renewable under Standard plan up to age 85 years.
- Person of age 16 to 21 years are limited to Standard plan only.
- For policies issued under corporate / company name to cover a group of individuals or family units, the compensation payable in respect of death or disablement of the insured persons traveling in the same conveyance at the same time shall be further subjected to a conveyance limit.
- If you have more than one Tenet Policies covering Terrorism, the maximum amount payable for acts of Terrorism for all policies will be \$500,000 per person.

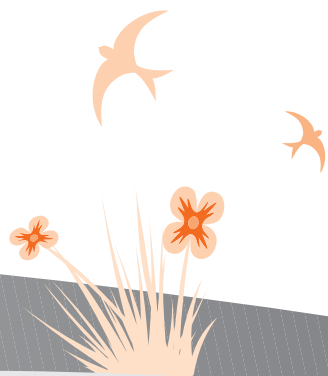


**BONUS!**

(SGD)

| PREMIUM TABLE  | ANNUAL PREMIUM (before GST)           |                  |                  |                 |
|--|---------------------------------------|------------------|------------------|-----------------|
|  | STANDARD                              | DELUXE           | ELITE            | TOP-UP          |
| <b>BASIC COVER</b><br>Section A to I including EXTENDED BENEFITS |                                       |                  |                  |                 |
| <b>Per Insured Adult</b>   |                                       |                  |                  |                 |
| CLASS 1  | \$95                                  | \$158            | \$263            | \$50 per unit   |
| CLASS 2  | \$126                                 | \$221            | \$368            | \$70 per unit   |
| CLASS 3  | \$242                                 | \$420            | N.A.             | N.A.            |
| <b>Per Insured Child</b>   |                                       |                  |                  |                 |
| If BOTH parents are covered under the same PASTar                | FREE for Unlimited Number of Children |                  |                  | N.A.            |
| If only ONE parent is covered under the same PASTar              | \$25 per child                        | \$44 per child   | \$74 per child   | N.A.            |
| <b>OPTIONAL COVERS</b>   |                                       |                  |                  |                 |
| <b>Per Insured Adult</b>   |                                       |                  |                  |                 |
| J. ID Booster according to plan selected                         | \$14                                  | \$18             | \$22             | \$2.50 per unit |
| K. Education Fund Per unit of S\$25,000                          | \$25                                  |                  |                  |                 |
| L. Parent's Cover Per Parent                                     | \$30 per parent                       |                  |                  |                 |
| <b>Per Insured Child</b>   |                                       |                  |                  |                 |
| J. ID Booster  | FREE for Unlimited Number of Children |                  |                  | N.A.            |
| - If BOTH parents are covered for ID Booster                     | FREE for Unlimited Number of Children |                  |                  | N.A.            |
| - If only ONE parent is covered for ID Booster                   | \$3.50 per child                      | \$4.50 per child | \$5.50 per child | N.A.            |

N.A.: Not Applicable



**IMPORTANT NOTE:** This product brochure is not a contract of insurance, we encourage you to discuss your insurance requirements with us or your insurance advisor, before effecting a new personal accident coverage or switching from another personal accident policy.

## PERMANENT DISABLEMENT TABLE OF BENEFITS

| Description of Permanent Disablement (PD)<br>(Please refer to our office or website for full PD Table of Benefits)  | % of Capital Sum Insured Payable |
|---|----------------------------------|
| 1 Total paralysis of all limbs  | 150%                             |
| 2 Total and permanent loss of all sight of<br>- both eyes<br>- one eye  | 150%<br>100%                     |
| 3 Total loss of speech  | 50%                              |
| 4 Total loss of speech and hearing in both ears   | 150%                             |
| 5 Total loss by physical severance or total and permanent loss of use of<br>- two whole limbs or two feet/hands<br>- one leg at hip or between hip and ankle<br>- loss of one arm at shoulder or between shoulder and wrist<br>- one hand or one foot | 150%<br>100%<br>100%<br>100%     |
| 6 Total loss by physical severance or total and permanent loss of use of both thumbs and all fingers  | 100%                             |
| 7 Total loss by physical severance or total and permanent loss of use of index finger   | from 5% to 15%                   |
| 8 Total loss by physical severance or total and permanent loss of use of little finger  | from 3% to 10%                   |
| 9 Total loss by physical severance or total and permanent loss of use of toes   | from 3% to 18%                   |
| 10 Fractured leg or patella with established non-union of leg or shortening of leg by at least five centimetres   | 10%                              |
| 11 Third Degree Burns   | from 50% to 100%                 |

Where the injury is not specified, the Company will adopt a percentage of disablement, which in its opinion is not inconsistent with the provisions of the Table of Benefits.

## CLASSIFICATION OF OCCUPATION

| CLASS 1<br>Persons engaged in indoor & non-manual work in non-hazardous places  | CLASS 2<br>Persons engaged in work of an outdoor or supervisory nature or involve occasional manual work whose duties do not involve the use of tools or machinery or exposure to any special hazard  | CLASS 3<br>Persons engaged in manual work not of particularly hazardous nature but involving the use of tools or machinery  |
|---|---|---|
| <b>Examples - CLASS 1</b> <ul style="list-style-type: none"> <li>Barber / Hairdresser</li> <li>Beautician</li> <li>Tailor</li> <li>Nurse</li> <li>Dentist / Doctor / Surgeon (Non-veterinary)</li> <li>Indoor sales / Marketing (More than 50% in office)</li> <li>Software Engineer</li> <li>Management (Director, Manager, etc) with overseas travel less than 12 times a year</li> <li>MINDEF Administrative Staff (No field training)</li> <li>Home-maker</li> <li>Retiree (More than 62 years old)</li> <li>Full-Time Students (More than 16 years old)</li> </ul> | <b>Examples - CLASS 2</b> <ul style="list-style-type: none"> <li>Chauffeur</li> <li>Decorator (Managing)</li> <li>Engineer (Excluding Software Engineer)</li> <li>Foreman (Non-Construction)</li> <li>Outdoor Sales / Marketing</li> <li>Surveyor</li> <li>Insurance Agent / Property Agent</li> <li>Assembly Line Production Worker (Not using tools &amp; machinery)</li> <li>Unarmed Security Guard</li> <li>Laboratory Assistant (In schools and colleges)</li> <li>Management (Director, Manager, etc) with overseas travel 12 or more times a year</li> <li>Fitness / Gym Instructor</li> </ul> | <b>Examples - CLASS 3</b> <ul style="list-style-type: none"> <li>Baker / Chef</li> <li>Carpenter (Not using woodworking machinery)</li> <li>Contractor</li> <li>Courier</li> <li>Driver</li> <li>Hawker / Market Stallholder</li> <li>Motor Repairer</li> <li>Painter (Not involving work at heights)</li> <li>Plumber</li> <li>Technician</li> <li>Veterinary Surgeon</li> </ul> |

**REFERRED OCCUPATIONS FOR COVER DURING OFF-DUTY HOURS** (Please refer to our office for approval)  
Commercial air crew and pilot, military personnel (excluding MINDEF administrative staff)

**DECLINED OCCUPATIONS:** Industrial workers using heavy machinery / woodworking related; any occupation involving aviation activities; police force personnel, fire fighters; construction / unskilled workers; ship crew or workers on board vessels, stevedores, shipbreakers; occupations involving diving, platforms, oil & gas rig and/or offshore work; occupation involving work at heights / underground &/or handling of hazardous chemical / electricity; professional sports teams; professional divers and jockeys; welders and the like.

# Application Form

## Intermediary's Name & Code

### Important Notice

- Statement Pursuant to Section 25(5) of the Insurance Act, You are to disclose on this Proposal Form fully and faithfully all the facts which you know or ought to know, otherwise the policy issued hereunder may be void.
- Please note that this insurance is subject to the premium being paid and received in full by the Company (a) before the inception date where the Policy is issued to an Individual; or (b) within the period specified in the Premium Payment Warranty applied to the Policy in all other instances, failing which there will be no liability under this cover.
- The liability of the Company does not commence until this Application is accepted and the premium is paid in accordance with clause 2 above.

### APPLICANT'S PARTICULARS

NAME:

ADDRESS:

NRIC / PASSPORT NO.:

NATIONALITY:

TEL NO.: (HP) (H) (O)

MARITAL STATUS: EMAIL:

### PARTICULARS OF PERSON(S) TO BE INSURED & COVERAGE SELECTION

Details of spouse, child(ren) and parent(s) are required only if they are included in this cover

SELF: ..... SEX: M / F CLASS: 1 / 2 / 3

DATE OF BIRTH: ..... NRIC / FIN: ..... OCCUPATION: .....

BASIC WEEKLY SALARY: S\$ ..... PLAN: ..... TOP-UP: ..... units PREMIUM: S\$ .....

SPOUSE: ..... SEX: M / F CLASS: 1 / 2 / 3

DATE OF BIRTH: ..... NRIC / FIN: ..... OCCUPATION: .....

BASIC WEEKLY SALARY: S\$ ..... PLAN: ..... TOP-UP: ..... units PREMIUM: S\$ .....

CHILD'S NAME: ..... SEX: M / F

DATE OF BIRTH: ..... NRIC / PASSPORT NO.: ..... PREMIUM(S\$): .....

CHILD'S NAME: ..... SEX: M / F

DATE OF BIRTH: ..... NRIC / PASSPORT NO.: ..... PREMIUM(S\$): .....

CHILD'S NAME: ..... SEX: M / F

DATE OF BIRTH: ..... NRIC / PASSPORT NO.: ..... PREMIUM(S\$): .....

PARENT'S NAME: ..... SEX: M / F CLASS: 1 / 2 / 3

DATE OF BIRTH: ..... NRIC / PASSPORT NO.: ..... PREMIUM(S\$): ..... Refer to Optional Covers Section

PARENT'S NAME: ..... SEX: M / F CLASS: 1 / 2 / 3

DATE OF BIRTH: ..... NRIC / PASSPORT NO.: ..... PREMIUM(S\$): ..... Refer to Optional Covers Section

\* Please provide details on the nature / scope of work for general descriptions, e.g civil servant, self-employed, etc. to determine the classifications of occupation.

# Application Form

## OPTIONAL COVERS (please tick) Premium (SGD) Total (SGD)

- ID Booster** (\*Top-Up Units must be equivalent to Elite Plan Top-Up)
  - Self Basic S\$ \_\_\_\_\_ + TOP-UP\* S\$ \_\_\_\_\_ S\$ \_\_\_\_\_
  - Spouse Basic S\$ \_\_\_\_\_ + TOP-UP\* S\$ \_\_\_\_\_ S\$ \_\_\_\_\_
  - Child(ren) (if only one parent covered) No. of Children \_\_\_\_\_ x S\$ per Child \_\_\_\_\_ S\$ \_\_\_\_\_
- Education Fund** (per unit of S\$25,000)
  - Maximum number of units up to the number of children insured \_\_\_\_\_ x S\$25 \_\_\_\_\_ S\$ \_\_\_\_\_
  - (No. of unit)
- Parent's Cover**
  - (No. of parent) \_\_\_\_\_ x S\$30 \_\_\_\_\_ S\$ \_\_\_\_\_

### PREMIUM CALCULATION

Total Premium for Basic Plan + Top-Up for Insured/ Spouse / Child(ren) S\$ \_\_\_\_\_  
 Total Premium for Optional Cover S\$ \_\_\_\_\_  
 Plus GST for above S\$ \_\_\_\_\_  
**Total Premium Payable S\$ \_\_\_\_\_**

### PERIOD OF INSURANCE

From \_\_\_\_\_ to \_\_\_\_\_

### DECLARATION

- I/We declare that I/we
- am/are in good health and free from physical impairment and am/are residing in Singapore.
  - do not participate in any hazardous hobbies or activities.
  - have neither made any claims against any insurer for bodily injury nor had any life or accident insurance applications/policies that are declined, cancelled, refused renewal or imposed with special terms.
  - will give notice to Tenet Insurance Company Ltd of any change in occupation, activities or country of residence.
  - understand and agree that benefits under this policy will only be payable upon an accident occurring with the exception of coverage provided for Specified Infectious Diseases.
  - am/are aware that for Infectious Diseases, there is a waiting period of 14 days from cover inception and cover is subject to Pandemic Alert Exclusion.
  - am/are aware that I/we can seek advice from a qualified advisor to ensure that this product is appropriate for my/our financial needs and insurance objectives before this application is submitted.
  - confirm that the information given in this application is true and complete and shall be the basis of contract between me/us and Tenet Insurance Company Ltd.
  - am/are not undischarged bankrupt(s).

I/We further declare details relating to Item(s) no. \_\_\_\_\_ : \_\_\_\_\_

- PLEASE CHARGE S\$ \_\_\_\_\_ (Including GST) TO MY VISA / MASTERCARD\*** (\*Delete As Appropriate)  
 Where a third party credit card is used, I/We declare that the cardholder has authorised and consented to such use.

CARD NO.: \_\_\_\_\_

EXPIRY DATE: \_\_\_\_\_

- I ENCLOSE A CHEQUE FOR S\$ \_\_\_\_\_ (Including GST) PAYABLE TO TENET INSURANCE COMPANY LTD**  
 BANK / CHEQUE NO.: \_\_\_\_\_



SIGNATURE OF APPLICANT on behalf of person(s) to be insured \_\_\_\_\_ DATE \_\_\_\_\_

### FOR OFFICIAL USE

We confirm acceptance of this application in accordance to our policy terms, conditions and exceptions, effective \_\_\_\_\_

Name & Signature of Approving Officer / Date