

Simply Life- My Family card

Terms & conditions

Provided by

Abu Dhabi National Insurance Company

In association with

Abu Dhabi Commercial Bank

We welcome you as an ADCB Simply Life- Family Credit Cardholder to enjoy the benefits of this Master Life Insurance Scheme provided by Abu Dhabi National Insurance Company. We request you to go through the Cover details in order to understand thoroughly the extent and terms of the Cover offered.

Scheme Highlights

- 24 hour worldwide cover for Death, Permanent Total Disablement, Critical Illness and only in the UAE in respect of Involuntary Loss of Employment.
- No medical certificate is required
- Although only Primary cardholder is covered for this benefits, credit spend by supplementary cardholders is also covered.

Important Notice

1. **Cover automatically starts from the Commencement Date.**
2. **The scheme is administered to all eligible cardholders on a compulsory adherence basis.**
3. **The cover is applicable only for Primary Cardholders and excludes Corporate Cards.**
4. **At the entry of scheme the Cardholder should be of age between 18 to 69 years in respect of Death (due to any cause), Disablement cover (due to Accident or Sickness), and aged at entry between 18 to 59 years for Critical Illness and Involuntary loss of Employment.**
5. **The Territorial Limit is 'worldwide' in respect of Death, Disability, Critical Illness, and 'UAE' in respect of Involuntary Loss of Employment Cover.**

6. The Cover is subject to the Jurisdiction of the competent courts of Abu Dhabi

7. The Bank reserves the right, at any time, to change the terms, conditions, rates and/or reject, discontinue or cancel the Cover applicable without assigning any reason thereof.

8. Death or Disablement could be due to any cause except those expressly excluded.

9. For Involuntary loss of Employment cover, benefits payable under this scheme shall be adjusted against the Cardholder's total amount outstanding with the Bank on his credit card account.

10. In the event of Involuntary Loss of Employment benefits being provided to the Cardholder, the Cardholder shall notify the Company immediately upon Re-employment but not later than 30 days from the date of Re-employment. Failure to notify the Company shall render the benefits provided under this Cover fully recoverable without contestation.

11. These terms are summary of Master Policy agreed between Bank and the Company, wherein bank being the Policyholder elects to contribute the premium towards this scheme to the Company. In case of any dispute the master policy agreed between the Bank & Company shall prevail.

Definitions

Accident means a sudden, unintended, fortuitous, violent, visible and external event and does not include any naturally occurring condition or degenerative process, which occurs during the period of insurance at an identifiable time and place including exposure resulting from a mishap to a conveyance in which the Insured Member/ Cardholder is travelling.

Agreement means a credit card agreement made on or after the Policy date, between the Bank, as Creditor, and an Insured Credit cardholder under Simply Life My Family Credit Card scheme.

Appropriate Authority means those governmental or regulatory bodies set up by the state or Central Government from time to time

that are solely responsible for registering, permitting and monitoring hospitals and other

similar places where medical treatment is provided.

Bank means Abu Dhabi Commercial Bank, PO box 939, Abu Dhabi, United Arab Emirates.

Benefit means the indemnity payable under the scope of this cover in respect of Death or Permanent Total Disablement or Critical Illness of the Insured Member.

Bodily Injury means bodily injury which:

1. is sustained by an Insured Member during the Period of Insurance.
2. is caused by an accident, and
3. solely and independently of any other cause, except illness directly resulting from, or surgical or medical treatment rendered necessary by, such injury, occasions the disablement of the Insured Credit Cardholder within 120 days from the date of the accident by which such injury is caused.

Company means Abu Dhabi National Insurance Company, PO box 839, Abu Dhabi, United Arab Emirates.

Credit Card means- Simply Life, Family Credit Cards - Family Card and Family Card Premium.

Cardholder means a primary account holder of Simply Life Family card or Family Card Premium issued to the Insured who has not been disqualified by the provisions of this policy to be eligible to receive the benefits under this policy.

Credit Balance means amounts payable by the Cardholder arising from the use of the Card or the Card Number or the PIN or under the Terms and Conditions of the credit card agreement and includes without limitation all Card transactions, fees, finance charges, additional expenses, damages, legal costs, and disbursements, which will be debited to the Card Account and form part of Current Balance.

Commencement Date means the date the Cardholder is enrolled for this Policy by the Bank or the date of commencement of this policy whichever is later.

Credit means the credit card or other form of financial accommodation provided by the Bank to the Insured Member/Cardholder under the credit facility

Credit Card Facility means the Simply Life, Family Card and Family Card Premium facility including the supplementary cards, which have been nominated as the facilities.

Death means death any cause except as stated under the List of Exclusions mentioned under this policy.

Date of Event means any one of the following:

1. In respect of Death, the date of death resulting from any cause except those expressly excluded, happening or manifesting after the Commencement Date and during the Period of Insurance.
2. In respect of Permanent Total Disablement, the date if recognition of Permanent Total Disablement by a Competent Authority results from an accident or sickness happening or manifesting after the Commencement Date and during the Period of Insurance.
3. In respect of Critical Illness, the date of diagnosis of any one of the Critical Illnesses by a Competent Authority ,resulting from an accident or illness happening/ manifesting after the Commencement Date and during the Period of Insurance.
4. In respect of Involuntary Loss of Employment, the date of notice of termination served to the Insured Member/Cardholder after the Commencement Date and during the Period of Insurance, insured subject to the provision of Waiting Period.

Defaulted Cardholders are Cardholders having three or more unpaid instalments.

Enrollment Form shall mean, unless otherwise arranged by mutual agreement between the Bank and Company, the Credit Card application form with the necessary legal Insurance requirements & information included, as to make it valid as a single form for both loan & insurance application.

Free Cover Limit (FCL) means the maximum amount of insurance cover per Insured Member/Cardholder and as per the defined maximum age of the Insured Member/Cardholder that does not require any evidence of insurability from participating Credit card customer. Free cover limit (FCL) under this scheme is set at AED100,000 per Insured Person.

Indemnity Period means the Indemnity Period specified in the Schedule commencing from the date of actual Involuntary Loss of Employment.

Insured Person/Member- means an eligible primary credit card holder of Simply Life Family Card or Family Card Premium, who has been enrolled by the Bank under this scheme and has not been disqualified by the provisions of this policy to be eligible to receive the benefits under this policy

Involuntary Loss of Employment (ILOE) means unemployment of the Insured Person arising out of the unilateral decision of the employers to terminate his employment contract without citing any reason or for any reason other than those mentioned under exclusions in the policy. Provided the notification is given to the Insured Person at least 90 days after the Policy Effective Date or Date of enrolment to the scheme, whichever is later.

ILOE Waiting Period means the 90 day period following the cover commencement date. No claim for Involuntary Loss of Employment is eligible where the Notification occurs during this period.

Outstanding Credit balance means the total amount outstanding in the Credit Card (that is, the amount outstanding in the primary card account alone or in both the Primary & Supplementary card account, in case a Supplementary Card exists, as on the Date of Event but excluding any Credit facility availed after the Date of Event subject to a maximum of the Cardholder's credit limit).

'Illness' means a disease or sickness first occurring after the Commencement Date.

Permanent Total Disability (PTD) means in the opinion of the Company's medical officer the total and permanent inability of the insured, due to accident or sickness, occurred prior the 70th anniversary, and medically observed to perform any activity or occupation. If at the time of the loss, the Insured Member/Cardholder is unemployed, PTD means the Permanent and Total inability to perform, without assistance of a third person, the Acts of Daily Living:

1. **Washing:** the ability to wash in the bath or in a shower (including getting into and out of the bath or shower) or wash satisfactorily by other means;
2. **Dressing :** the ability to put on, take off, secure and unfasten all garments and as appropriate, any braces, artificial limbs or other surgical appliances;
3. **Transferring:** the ability to move from bed/chair to an upright position or wheelchair and vice versa;
4. **Mobility:** the ability to move indoors from room to room on level surface;
5. **Toileting:** the ability to use the lavatory or otherwise manage bowel and bladder functions so as to maintain a satisfactory level of personal hygiene;
6. **Feeding:** the ability to feed oneself once food has been prepared and made available.

Assessment of PTD and subsequent potential payment of benefit is made after 6 months continuous disability following the event giving rise to the claim. However this time limit shall not apply to cases of physical severance or amputation of limbs. The Company reserves its right to seek a second opinion at own cost to satisfy their decision prior to invoking the appropriate clause.

In the event of disablement either by accident or sickness the 6 months deferred period is waived, if the Company is satisfied based on detailed medical report from a UAE registered and recognized treating physician of a hospital or clinic which clearly and adequately proves beyond doubt that Insured Member will never recover/ recuperate from his/her injuries/sickness and status of insured falls under the scope and definition of the permanent and total disablement benefit.

Policy shall mean this agreement, any supplementary contracts or endorsements herein, amendments signed by the Company and the Bank, which together constitute entire contract between the Company and Bank.

Policy Year means any period of twelve months commencing on any Policy Anniversary Date

Period of Insurance means the period commencing from the Commencement date of insurance for which the Premium is fully paid to the Company.

Re-employment means accepting and starting work for a new employer or the same employer under a new employment contract within the indemnity period from the date of actual unemployment.

Sickness means sickness or disease of the Insured Member/Cardholder which commences and manifests itself after he/she meets the eligibility requirements, the date of endorsement or reinstatement of this benefits whichever is later.

Self-employed means working for one's self. Self-employed people can also be referred to as a person who works for himself instead of an employer, but drawing income from a trade or business that they operate personally.

Terrorism means the use or threatened use of force or violence against person or property, or commission of an act dangerous to human life or property or commission of an act that interferes with or disrupts an electronic communication system, undertaken by any person or group, whether or not acting on behalf of or in any connection with organization, government, power, authority or military force, when the effect is to intimidate, coerce or harm a government, civilian population or any segment of the economy.

Travel means any transport conveyance which is deemed to include private motor vehicle as well as public aircraft, ships, trains and busses licensed by the appropriate governmental authority to carry passengers on a permitted route with scheduled ports, terminals or stations of embarkation and disembarkation.

UAE means United Arab Emirates.

Waiting Period means the 90 day period following the cover commencement date. No claim for Critical Illness is permitted by the Insured Person where the Notification occurs during this period.

War means war, whether declared or not, or any warlike activities, including use of military force by any sovereign nation to achieve economic, geographic, nationalistic, political, racial, religious or other ends.

War like operations means hostilities, mutiny, riot, civil commotion, civil war, rebellion, revolution, insurrection, conspiracy, military or usurped power and martial law or state of siege.

Definition of Covered Critical Illness

Critical illness condition shall mean the Insured Member/Cardholder having suffered or developed one of the following critical illnesses during the period of cover of this benefit:

Cancer

Cancer is a malignant tumor characterized by the uncontrolled growth and spread of malignant cells with invasion and destruction of normal tissue. The term cancer includes leukemia, lymphoma, sarcoma, and Hodgkin's disease. The cancer must require treatment by surgery, radiotherapy, or chemotherapy. The diagnosis must be confirmed with a valid pathology report and a report from an approved specialist. The following cancers are excluded:

- All tumours which are histologically described as benign, pre-malignant, borderline malignant, low malignant potential, or non-invasive;
- Any lesion described as carcinoma in-situ (Tis) or Ta by the AJCC Seventh Edition TNM Classification;
- All non-melanoma skin cancers;
- All tumors of the prostate unless histologically classified as having a Gleason score greater than 6 or having progressed to at least class T2N0M0 by the AJCC Seventh Edition TNM Classification;
- Any melanoma that is less than or equal to 1.0 mm in thickness and described as T1aN0M0 by the AJCC Seventh Edition TNM Classification;
- Early thyroid cancers that are less than 2 cm in diameter and histologically described as T1N0M0 by the AJCC Seventh Edition TNM Classification;
- Any form of cancer in the presence of HIV infection, including but not limited to, lymphoma or Kaposi's sarcoma.

Stroke

Stroke is defined as a cerebrovascular incident resulting in irreversible death of brain tissue due to intra-cranial hemorrhage or due to embolism or thrombosis in an intra-cranial vessel. This event must result in permanent neurological functional impairment with objective neurological abnormal signs on physical examination by a neurologist at least 3 months after the event. The diagnosis must also be supported by findings on brain imaging and must be consistent with the diagnosis of a new stroke. The following are excluded:

- Transient Ischaemic Attacks (TIA);
- Brain damage due to an accident or injury;
- Disorders of the blood vessels affecting the eye including infarction of the optic nerve or retina;
- Ischaemic disorders of the vestibular system;
- Asymptomatic silent stroke found on imaging.

Heart Attack

Death of a portion of the heart muscle as a result of inadequate blood supply to the relevant area as a consequence of coronary artery disease. The diagnosis must be supported by all three (3) of the following criteria and be diagnostic of a new definite acute myocardial infarction:

- 1) Symptoms clinically accepted as consistent with the diagnosis of an acute myocardial infarction; and
- 2) New characteristic electrocardiographic changes; and
- 3) The characteristic rise above accepted normal values of biochemical cardiac specific markers such as CK-MB or cardiac troponins.

Heart attack occurring during a coronary intervention must have a cardiac troponin level that is at least three (3) times increased above the laboratory reported upper normal value. Angina and all other forms of acute coronary syndromes are not covered.

Coronary Artery Bypass Surgery

The actual undergoing of open-heart surgery with a thoracotomy and sternotomy to correct narrowing or blockage of one or more coronary arteries with insertion of bypass graft(s). Pre-operative angiographic evidence of more than 50% coronary artery obstruction must be provided and the procedure must be considered medically necessary by a consultant cardiologist. Balloon angioplasty (PTCA), heart catheterization, laser relief, rotablator, stenting and all other intra-arterial catheter based techniques are excluded. Key-hole coronary artery bypass surgery is also excluded.

Major Organ Transplant

The actual undergoing, as a recipient of, a transplant of a heart, lung, liver, pancreas, or kidney. Bone marrow transplant is also covered

if the insured has undergone the transplant and a specialist confirms that the bone marrow transplant was medically necessary.

This transplantation must have been deemed medically necessary to treat the irreversible end-stage failure of the relevant organ or bone marrow. Stem cell transplants and islet cell transplants are excluded.

Kidney Failure (End-stage Renal Failure)

The total and irreversible failure of both kidneys. Continuous renal dialysis must be instituted and the dialysis must be deemed medically necessary by a certified nephrologist. Acute reversible kidney failure that only needs temporary renal dialysis is not covered.

Multiple Sclerosis

A definite diagnosis by a Consultant Neurologist of multiple Sclerosis which satisfies all of the following criteria:

1. There must be current impairment of motor or sensory function, which must have persisted for a continuous period of at least six months.
2. The diagnosis must be confirmed diagnostic technique current at the time of the claim

Scope of Cover

Variant 1 (Family Card Premium)

1. **Death (Any Cause), or**
2. **Permanent Total Disablement (Accident or Sickness), or**
3. **Critical Illness, or**
4. **Involuntary Loss of Employment.**

Variant 2 (Family Card)

1. **Death (Any Cause), or**
2. **Permanent Total Disablement (Accident or Sickness).**

1. Death (Any Cause)

In respect of Death of the Insured Member arising out of cause not specifically excluded herein, irrespective of number of Credit cards held by Insured Member, the Company shall indemnify bank a benefit amount of AED 100,000 towards the insurance provided under this scheme. Bank in turn commits to transfer the proceeds of such benefit under this policy

to the legal heirs/appointed beneficiary of the insured member.

2. Permanent Total Disablement (Accident or Sickness)

In respect of Permanent Total Disablement of the Insured Member arising out of arising out of cause not specifically excluded herein, irrespective of number of Credit cards held by Insured Member, the Company shall indemnify bank a benefit of AED 100,000 towards the insurance provided under this scheme. Bank in turn commits to transfer the proceeds of such benefit under this policy to Insured Member.

3. Critical Illness

In the event of the Insured Member being diagnosed with one or more of the Critical Illnesses covered hereunder and arising out of a cause not specifically excluded herein, during the Period of Insurance, irrespective of number of Credit cards held by Insured Member, the Company shall pay to Bank the a benefit amount of AED 50,000 towards the insurance provided under this scheme. Bank in turn commits to transfer the proceeds of such benefit under this policy to Insured Member.

Provided that:

1. The date of event falls after a waiting period of 90 days from date of enrollment of the primary Cardholder.
2. The illness has not been contracted prior to the commencement date of this scheme.
3. The primary Cardholder should survive 30 days from the date of diagnosis for the claim to be paid.
4. Diagnosis must occur within UAE and by a recognized medical authority.
5. The date of recognition /diagnosis of Critical Illness by a competent medical authority resulting from an illness happening/ manifesting after 90 days from the enrollment date of the primary Cardholder and during the Policy Period.

Critical Illnesses Covered

1. Cancer
2. Stroke
3. Heart Attack (Myocardial Infarction)
4. Coronary Artery Bypass Surgery
5. Major Organ Transplant
6. Kidney Failure (End Stage Renal Disease)
7. Multiple Sclerosis.

4. Involuntary Loss of Employment (ILOE)

In respect of Involuntary Loss of Employment for the Insured Member, the Company would pay 10% of credit card account outstanding balance or credit limit whichever is lower but not exceeding a maximum amount payable of AED 2,500/- for each month of the Primary cardholders unemployment subject to the condition that the maximum indemnity period shall not exceed 6 months from date of actual unemployment. Subject to aggregate limits of this policy as agreed with the Bank.

Provided that:

1. IN THE EVENT OF A CLAIM IT MUST BE NOTIFIED TO THE COMPANY AS SOON AS POSSIBLE BUT IN ANY EVENT **NOT MORE THAN 30 DAYS** AFTER THE OCCURRENCE OF THE INCIDENT GIVING RISE TO THE CLAIM, TOGETHER WITH ANY SUPPORTING EVIDENCE REQUIRED BY THE COMPANY.
2. THE NOTIFICATION FALLS AFTER A WAITING PERIOD OF 90 DAYS FROM THE COVER COMMENCEMENT DATE.
3. THE INSURED MEMBER REMAINS UNEMPLOYED DURING THE PERIOD FOR WHICH THE MONTHLY BENEFIT UNDER THIS POLICY IS PAID.
4. THE INSURED PERSON SHALL INFORM THE COMPANY AS SOON AS HE ACCEPTS AN ALTERNATIVE JOB WITHIN THE INDEMNITY PERIOD BUT NOT LATER THAN 30 DAYS OF THE RE-EMPLOYMENT.
5. IF IT IS FOUND THAT THE INSURED PERSON HAS BEEN RE-EMPLOYED DURING THE PERIOD HE HAS BEEN RECEIVING MONTHLY BENEFIT, THE ENTIRE CLAIM WILL BE VOID AND THE COMPANY RESERVES THE RIGHT TO RECOVER THE FULL AMOUNT PAID TO THE INSURED PERSON AS A MONTHLY BENEFIT SINCE THE BEGINNING OF HIS INVOLUNTARY LOSS OF EMPLOYMENT.
6. THE INSURED MEMBER IS ELIGIBLE AS PER THE ELIGIBILITY CONDITIONS PROVIDED HEREUNDER.
7. THE ILOE MONTHLY BENEFIT PAYMENT WILL START FROM AFTER THE DATE OF EVENT, SUBJECT TO NOT BEING REMUNERATED BY HIS/HER EMPLOYER.
8. IN CASE OF CHANGE IN EMPLOYER /OCCUPATION THE INSURED MEMBER WAITING PERIOD WILL START FROM THE DATE OF SUCH ENDORSEMENT.
9. THE CONTINUANCE OF MONTHLY INDEMNITY PAYABLE UNDER INVOLUNTARY LOSS OF EMPLOYMENT BENEFIT CEASES IN THE EVENT

THAT THE INSURED PERSON NO LONGER HOLDS A VALID UAE EMPLOYEE RESIDENCE VISA (EG: HOLDS A TOURIST VISA, STUDENTS VISA, SPOUSE SPONSORSHIP, PROPERTY OR INVESTOR VISA ETC.)

ELIGIBILITY CONDITIONS FOR ALL BENEFITS:

Eligible Insured Credit Cardholders are individuals who are granted Credit Card facility by the Bank and meet the following criteria

1. The Cardholder must meet the eligibility criteria stipulated by the Bank to become a Cardholder.
 - a. The Gross Salary of the Cardholder should not be less than AED 2,000 per month
 - b. The Cardholder should have been employed with the same employer for at least -12 months, other than those self-employed individuals
 - c. The Cardholder should have a full time permanent employment contract with his employer
 - d. The Cardholder should not be absent from work because of an accident, sickness or disability at time of enrolment
 - e. The Cardholder shall be within the age criteria specified in the schedule of this policy
 - f. Residing in the UAE,

All benefits offered under this cover subject to:

- a. Insured Members being declared to Company; and
- b. the Insured Member maintains an outstanding balance on the covered credit card; and Premiums are received by Company for the applicable period of cover for each eligible Card Holder.

ELIGIBILITY CONDITIONS FOR INVOLUNTARY LOSS OF EMPLOYMENT

1. Cover is provided to an expatriate, primary credit Cardholder only.
2. The Cardholder must meet the eligibility criteria stipulated by the Bank to become a Cardholder.
3. The Cardholder should have been employed with the same employer for at least 12 months

4. The Cardholder should have a full time permanent employment contract with his employer not less than 2 year
5. The Cardholder shall be within the age criteria specified in the schedule of this policy.
6. Resident of UAE under a valid Employment Visa (tourist visa, students visa, spouse sponsorship, investor visa etc. are not eligible under the scope of this cover.)
7. No payment will be done during the notice period
8. Monthly the individual covered has to submit the passport copy showing the visa page along establishing the member is unemployed

TERMINATION OF INDIVIDUAL INSURANCE

Cover in respect of any Insured Member, shall automatically terminate at the earliest of the following events:

1. PREMIUM IS NOT PAID WHEN DUE BY THE BANK TO THE COMPANY.
2. INSURED MEMBER REACHES THE MAX AGE LIMIT SPECIFIED IN THE SCHEDULE OF THIS POLICY
3. TERMINATION OF CREDIT CARD FACILITY
4. PAYMENT OF DEATH/PERMANENT TOTAL DISABILITY/CRITICAL ILLNESS/ ILOE BENEFITS.
5. CANCELLATION OF THE BENEFITS UNDER THIS MASTER POLICY BY THE BANK AT ANY TIME IN ACCORDANCE WITH THE POLICY TERMS & CONDITIONS.
6. CANCELLATION OF THE CARDHOLDER'S CREDIT CARD FACILITY. HOWEVER, THE CANCELLATION OF COVER SHALL BE COMMENCEMENT ONLY FROM THE 90TH DAY OF CANCELLATION OF THE RESPECTIVE CREDIT CARD FACILITY
7. THE CARDHOLDER BECOMES A DEFAULTER FOR A PERIOD OF 90 DAYS. HOWEVER, THIS POLICY WILL BE AUTOMATICALLY REINSTATED ONCE THE CARDHOLDER HAS PAID HIS DUES;
8. THE EXPIRY DATE OF THE POLICY
9. THE DATE THIS POLICY IS TERMINATED/CANCELLED; EITHER BY NON PAYMENT OF PREMIUM TO THE COMPANY OR ANY OTHER REASONS AND THE POLICY IS SUBSEQUENTLY NOT RENEWED WITH THE COMPANY.
10. THE INSURED MEMBER IS UNABLE TO SATISFY ANY OTHER ELIGIBILITY CONDITION(S) RELATIVE TO THIS POLICY.

Notwithstanding anything contained herein to the contrary the ILOE benefit under this policy in respect of the individual covered shall terminate upon the happening of any one or more of the following:

1. THE INSURED PERSON EMPLOYMENT VISA IS CANCELLED ;OR,
2. LOSES HIS UAE RESIDENCY STATUS OR IS NO LONGER RESIDENT IN UAE;
3. THE INSURED PERSON RETURNS TO WORK IN RESPECT TO INVOLUNTARY LOSS OF EMPLOYMENT; (EVEN IF IT IS ONLY A PART-TIME WORK).
4. THE INSURED PERSON BECOMING UNEMPLOYED VOLUNTARILY.
5. 6 MONTHS PRIOR TO THE INSURED PERSON'S NORMAL RETIREMENT DATE DEPENDING UPON THE AGE OF THE INSURED PERSON AND THE LAW OF THE UAE.
6. WHEN THE MAXIMUM BENEFIT HAS BEEN REACHED FOR SEVERAL ILOE CLAIMS DURING THE PERIOD OF COVERAGE.
7. WHEN THE INSURED PERSON IS NOT CONTACTABLE FOR 15 DAYS VERIFICATION IN CASE OF CLAIM.
8. IN CASE OF DEATH/ DISABILITY.
9. WHEN THE INSURED MEMBER HAVING ATTAINED THE MAXIMUM COVERAGE AGE SPECIFIED OF 60 YEARS.

LIST OF EXCLUSIONS

THIS POLICY DOES NOT COVER DEATH OR DISABLEMENT DIRECTLY OR INDIRECTLY RESULTING FROM OR CONSEQUENT UPON:

1. FOR DEATH BENEFIT

- a) DIRECTLY OR INDIRECTLY OCCASIONED THROUGH WAR (ACTIVE OR PASSIVE), INVASION, ACT OF FOREIGN ENEMY, HOSTILITIES (WHETHER WAR BE DECLARED OR NOT), CIVIL WAR, REBELLION, REVOLUTION, INSURRECTION, MILITARY OR USURPED POWER, RIOT OR STRIKE OR MUTINY, MARTIAL LAW, STATE OF SIEGE OR ANY OF THE EVENTS OR CAUSES WHICH DETERMINE THE PROCLAMATION OR MAINTENANCE OF MARTIAL LAW, OR STATE OF SIEGE, VIOLENCE, LOOTING, SACKING OR PILLAGE AND TERRORISM.

- b) DIRECTLY OR INDIRECTLY OCCASIONED THROUGH ACCIDENTAL OR DELIBERATE SPREAD OR USE OF ATOMIC, BIOLOGICAL OR CHEMICAL MATERIAL INCLUDING DEATH DIRECTLY OR INDIRECTLY CAUSED BY, RESULTING FROM, OR IN CONNECTION WITH ANY ACTION TAKEN IN CONTROLLING, PREVENTING, SUPPRESSING OR IN ANY WAY RELATING TO ANY EVENT WHERE ATOMIC, BIOLOGICAL AND CHEMICAL MATERIAL IS INVOLVED.

- c) DIRECTLY OR INDIRECTLY OCCASIONED THROUGH ANY LAWFUL OR CRIMINAL ACT OF THE INSURED PERSON.

- d) SUICIDE WITHIN FIRST 12 MONTHS OF THE COVERAGE UNDER THIS POLICY OR SELF INFLICTED BODILY INJURY REGARDLESS OF ITS DATE OF CAUSE.

- e) A PRE-EXISTING PHYSICAL OR MENTAL DEFECT OR ILLNESS FOR WHICH THE INSURED MEMBER HAS CONSULTED OR RECEIVED TREATMENT WITHIN THE 2 YEARS PRIOR TO THE DATE OF HIS ENROLMENT IN THE POLICY.

2. FOR PERMANENT TOTAL DISABLEMENT RIDER & CRITICAL ILLNESS, IN ADDITION TO THE ABOVE, SHALL BE EXCLUDED THE CONSEQUENCES OF:

- a) INSANITY, INTOXICATION, ALCOHOL OR DRUGS NOT PRESCRIBED BY A LICENSED MEDICAL PRACTITIONER, CHILDBIRTH, PREGNANCY, MENTAL/OR NERVOUS DISORDERS
- b) PHYSICAL DEFECT IN SIGHT OR HEARING OR ANY OTHER INFIRMITY RENDERING THE INSURED PERSON MORE THAN USUALLY LIABLE TO ACCIDENTS.
- c) HUMAN IMMUNE VIRUS (HIV)INFECTION, ACQUIRED IMMUNE DEFICIENCY SYNDROME (AIDS) OR AN AIDS RELATED CONDITION;
- d) KIDNAP OR HIJACK
- e) ANY ADVENTURE, DANGEROUS OR HAZARDOUS SPORTS OR ACTIVITIES SUCH AS PARACHUTING, POTHOLING, WINTER SPORTS (OTHER THAN CURLING OR SKATING), BUNGEE JUMPING, DIVING WITH SCUBA APPARATUS, WATER SKIING, HUNTING, SHOW-JUMPING, STEEPLE CHASING; THE PROFESSIONAL PRACTICE OR PARTICIPATION IN ANY SPORT; RIDING OR DRIVING IN ANY KIND OF RACE OR ENDURANCE TEST;
- f) AVIATION, GLIDING OR ANY FORM OF AERIAL FLIGHT OTHER THAN AS A

PASSENGER IN A FULLY LICENSED PASSENGER CARRYING AIRCRAFT, PROVIDED THAT THE TERM "PASSENGER", FOR THE PURPOSE OF THIS POLICY, SHALL NOT INCLUDE ANY PERSON WHO IS A MEMBER OF THE CREW OF THE AIRCRAFT OR WHO IS IN SUCH AIRCRAFT FOR THE PURPOSE OF UNDERTAKING ANY TECHNICAL OPERATION THEREIN.

- g) THE INSURED IS MEMBER OF THE ARMY, NAVY, AIR FORCE, POLICE FORCE, OR ANY OTHER SECURITY FORCE OF ANY STATE, COUNTRY OR NATION.
- h) DELIBERATE EXPOSURE TO EXCEPTIONAL DANGER (EXCEPT IN AN ATTEMPT TO SAVE HUMAN LIFE),
- i) CRITICAL ILLNESS HAS NOT BEEN CONTRACTED OR DIAGNOSED PRIOR TO THE ENROLMENT OF THE PRIMARY CARDHOLDER UNDER THE SCHEME.
- j) CONGENITAL OR HEREDITARY CONDITIONS FOR CRITICAL ILLNESS
- k) FOR CRITICAL ILLNESS, EPIDEMICS, DEFINED AS THE WIDESPREAD OCCURRENCE OF AN INFECTIOUS DISEASE IN A COMMUNITY OR REGION WHICH IS IN EXCESS OF THE NUMBER OF INSTANCES NORMALLY EXPECTED IN THAT COMMUNITY OR REGION AND CLASSIFIED AS AN EPIDEMIC BY THE WORLD HEALTH ORGANIZATION.

3. INVOLUNTARY LOSS OF EMPLOYMENT

- i. INVOLUNTARY LOSS OF EMPLOYMENT WHICH STARTS WITHIN 90 DAYS OF THE COMMENCEMENT DATE.
- ii. EMPLOYEES OF FIRMS NOT APPROVED BY THE BANK FOR ISSUANCE A PERSONAL LOAN.
- iii. INSURED PERSON'S WHO HAVE NOT BEEN CONTINUOUSLY EMPLOYED WITH THE SAME EMPLOYER FOR MINIMUM 12 MONTHS.
- iv. INSURED PERSON'S WHO ARE ON PROBATION.
- v. EMPLOYMENT ON A FIXED TERM CONTRACT OR PART TIME OR TEMPORARY, CASUAL OR CONTINGENT EMPLOYMENT.
- vi. RESIGNATION OR LEAVING BY MUTUAL AGREEMENT OR VOLUNTARY UNEMPLOYMENT OR REDUNDANCY AFTER VOLUNTARY BREAKS FROM JOB.
- vii. DISABILITY, SICKNESS OR ACCIDENT OR ANY OTHER MEDICAL REASONS (MENTAL AND/OR PHYSICAL).
- viii. WHERE THE INSURED PERSON WAS AWARE OF PENDING UNEMPLOYMENT ON OR BEFORE THE COMMENCEMENT DATE.

- ix. WHERE THE UNEMPLOYMENT IS A NORMAL SEASONAL PART OF THE EMPLOYMENT OR DUE TO NON-RENEWAL OF EMPLOYMENT.
- x. WHERE THE INSURED PERSON HAS LEFT UAE.
- xi. WHERE THE INSURED PERSON HAS NEITHER BEEN TERMINATED NOR BECOME REDUNDANT BUT HIS/HER SALARY OR ALLOWANCES ARE BEING WITHHELD IN PART OR IN FULL FOR ANY REASON OF THE EMPLOYMENT CONTRACT.
- xii. UNEMPLOYMENT DUE TO ANY OF THE FOLLOWING.
 - a. MISCONDUCT
 - b. REFUSAL TO ACCEPT ORDERS FROM SUPERIORS
 - c. CRIMINAL CONVICTION
 - d. DISHONESTY OR FRAUDULENT ACT
 - e. NON PERFORMANCE OR UNDERPERFORMANCE
 - f. THE EMPLOYERS RIGHTS TO DO SO UNDER ARTICLE 120 OF THE UAE LABOR LAW.
- xiii. PAYMENT AFTER THE INSURED PERSON REACHES THE MAXIMUM COVERAGE AGE SPECIFIED IN THE SCHEDULE OF THIS POLICY.
- xiv. TERMINATION DUE TO VOLUNTARY RETIREMENT BY THE INSURED PERSON.
- xv. TERMINATION OF EMPLOYMENT DURING PROBATIONARY PERIOD.
- xvi. THE PERIOD FOR WHICH PAYMENT FROM THE EMPLOYER IS RECEIVED INSTEAD OF WORKING NOTICE.
- xvii. COMPANY FAILURE WHERE A CONTRIBUTING CAUSE WAS A NATURAL CATASTROPHIC PERIL, WAR OR WARLIKE EVENT; NUCLEAR RADIATION.
- xviii. THE NATURAL EXPIRY OF FIXED TERM CONTRACT OF EMPLOYMENT OR OF AN INTERIM CONTRACT;
- xix. NON RENEWAL OF EMPLOYMENT CONTRACT DUE TO CESSATION OR EXPIRY OF VISA;
- xx. RETIREMENT INCLUDING VOLUNTARY, EARLY, TEMPORARY OR PERMANENT RETIREMENT;
- xxi. INVOLUNTARY LOSS OF EMPLOYMENT DUE TO BREACH OF EMPLOYMENT CONTRACT OR TERMS;
- xxii. THE INVOLUNTARY LOSS OF EMPLOYMENT IS IN ANY WAY VOLUNTARY OR RESULTS DIRECTLY OR INDIRECTLY FROM THE INSURED
- xxiii. INSURED PERSON WAS EITHER WORKING OR EMPLOYED OR RESIDING OR IS OUTSIDE UAE. ANY INVOLUNTARY LOSS OF

- xxiv. EMPLOYMENT WHERE THE INSURED PERSON CANNOT PROVE IT WAS INVOLUNTARY. DISMISSAL OR REDUNDANCY WHEN THE INSURED WAS EMPLOYED BY A COMPANY OF WHICH HE OR HIS SPOUSE, PARTNER, PARENT, CHILD, BROTHER OR SISTER WERE A DIRECTOR, SHAREHOLDER OR AN EMPLOYER (OTHER THAN BY WAY OF BONA FIDE INVESTMENT IN A COMPANY).
- xxv. SELF EMPLOYMENT.
- xxvi. INSURED PERSONS EMPLOYED BY THE BANK
- xxvii. RESULTING DIRECTLY OR INDIRECTLY FROM A STRIKE, LOCKOUT, OR OTHER ORGANIZED LABOR DISPUTES OR ANY UNLAWFUL ACT.
- xxviii. ANY DRIVE AS PER THE UAE GOVERNMENT TOWARDS EMIRATIZATION (LOCALISATION)
- xxix. IF INSURED PERSON DOES NOT HAVE A VALID RESIDENT OR EMPLOYMENT VISA AT THE TIME OF CLAIM.(APPLICABLE FOR EXPATS)
- xxx. IF THE INSURED PERSON REFUSES ANY OTHER REASONABLE/ALTERNATE EMPLOYMENT OFFERED BY HIS EMPLOYER
- xxxi. IF ANY MISREPRESENTATION OR CONCEALMENT IS MADE BY OR ON BEHALF OF THE INSURED PERSON TO OBTAIN COVER IN SUPPORT OF ANY CLAIM HEREUNDER.
- xxxi. IF THE INSURED PERSON IS AN EXPATRIATE, ANY UAE RESIDENT VISA OBTAINED THROUGH THE SPONSORSHIP OF A FAMILY MEMBER
- xxxi. IF THE INSURED PERSON IS AN EXPATRIATE, ANY UAE RESIDENCY VISA OBTAINED OR MAINTAINED BY WHAT SO EVER MEANS WHILE THE INSURED PERSON IS NOT BEING TREATED OR BEING RECOGNIZED AS A FULL TIME EMPLOYEE BY HIS EMPLOYER INCLUDING FOR END OF SERVICE BENEFIT CALCULATION AS PER UAE LABOUR LAW.

How to Claim

1. Upon happening of an event giving rise to a claim under this Policy, the Insured shall give written notice to the Bank, but not later than 90 days from the Date of Event. Bank agrees to notify the claims to the company on immediate basis. For Involuntary loss of Employment benefit such written notification should reach Company not later than 30days from Date of Event.
2. Any and all communications related to a claim should be addressed by Bank to the following address, marked to the attention of the Company's Claims Department:

Abu Dhabi National Insurance Company

P. O. Box: 839, Abu Dhabi, United Arab Emirates.

Telephone : 02 4080100

Fax No : 02 6268600

You may contact Abu Dhabi National Insurance Company (ADNIC) at the toll free no. 8008040 Or;

Send an email to:

ConsumerLinesClaims@adnic.ae

General Claims Procedure

The claims handling procedure for this Policy are as below:

1. Written notice of accident/ death/ injury/illness which could result in a claim being made under the Policy must be given to the Bank immediately. Bank agrees to notify the claims to the company on immediate basis.
2. Such notification, apart from stating name of the Insured Member in respect of whom the claim is reported, should provide basic details including date of death/ accident/sickness and the type of benefit claimed.
3. Upon receipt of Claim Notification, the Company shall:
 - a. Register the claim and allocate a claim number, to be quoted in all subsequent communications relating to that claim.
 - b. Advise the claim number to the bank and request documentation considered necessary and reasonable for processing of the claim.
 - c. Upon receipt of the above, the corresponding claim form complete in all respects shall be submitted to the Company together with all supporting documents requested.
 - d. Upon receipt of the documented claim from the Insured, the Company shall advise any further documentation required to substantiate the claim or process the claim for settlement.

- e. For all valid claims payable in accordance with the terms and conditions of this Policy, the full and final discharge receipt would be issued by the Company to the Bank.

Documentation Checklist

1. Death Claims:

- a. Claim Form duly completed and signed by authorized signatory
- b. Accident Report (in case of Accident)
- c. Death Certificate (in original). In case of death taking place outside U.A.E., such original Death certificate issued abroad should be attested by U.A.E Embassy
- d. Post Mortem Report (wherever required)
- e. Police Report – if death due to accident/Road Traffic Accident
- f. Medical Report from a hospital with a detailed diagnosis, history of illness (if natural death) and cause of death, if the same is not clearly mentioned in death certificate.
- g. Copy of Passport including visa page (for expatriates)
- h. Credit Card Application Form
- i. Credit Card Statement for the last three months
- j. Any other document found necessary
- k. Copy of Emirates ID

2. Disability Claims

- a. Claim Form duly completed and signed by authorized signatory
- b. Accident Report (in case of Accident)
- c. Medical Report (in original) confirming exact degree of permanent disability issued by the Medical Board
- d. Police Report – if disability is as a result of accident/Road Traffic Accident
- e. Medical Report from a Hospital with a detailed diagnosis, history of illness (if disability due to sickness) and cause of disability
- f. Copy of Passport including visa page. (for expatriates)
- g. Copy of Emirates ID.
- h. Credit Card Application Form
- i. Credit Card Statement for the last 3 months

- j. Any other document found necessary

3. Critical Illness Benefit /Male & Female Cancer

- a. Claim Form duly completed and signed by authorized signatory
- b. Medical Report confirming the disease and detailed Medical Reports.
- c. Credit Card Application Form
- d. Credit Card Statement for the last 3 months
- e. Copy of Passport of the employee including visa page
- f. Copy of Emirates ID.
- g. Any other document found necessary

Claims Procedure -ILOE

Upon happening of an event giving rise to a claim under this Policy, the Insured Member /members Representatives/Insured shall follow the following procedure:

If the Involuntary Loss of Employment claim is accepted the Insured Member shall report in person to any branch of the Bank each month as a pre-condition of future to confirm whilst the Monthly Benefit in respect of the Involuntary Loss of Employment.

1. Give immediate written notice to the Company but not later than 30 days from the Date of an Event.
2. The Insured Member or Insured Member's representative shall complete the standard claim form issued by the Company and produced at no cost to the Company with such evidence to substantiate the claim to the satisfaction of the Company as the Company may reasonably require;
3. The Insured Member or the Insured Member's representative shall submit the following documents within 30 days from the Date of Event.
 - a. Letter of termination confirming that employee's (individual covered) contract was terminated indicating clearly the reason of termination
 - b. Letter from the bank stating the outstanding amount on individual covered's finance account at the time of termination.
 - c. Copy of employment contract and passport copy showing visa page.

- d. Copies of statement / history showing transactions, amount of instalments, instalment in arrears and the outstanding amount
- e. Copy of the credit card application
- f. Salary slips for the 3 months preceding date of notice of termination
- g. The Company may also request for a copy of the labor contract from the employer if it is required to verify the period of employment contract
- h. Monthly submission of passport copy showing visa page along with bank's stamp and date.
- i. Any other documents as may be required as per the prevailing Company policies.
- j. Proof of fulltime employment on the employer's letterhead paper, including copy of the employment agreement between employer and employee, clearly stating that the employee was employed on a fulltime basis

All papers as indicated above may be required to be produced in original (other than those surrendered to the authorities or Employer) for verification before the final settlement of claim.

The Company reserves the right to request for additional and/or detailed documents, beyond as stated above, which may additionally be necessary

1. to establish circumstances surrounding the Involuntary Loss of Employment of the Insured Member should the said circumstances warrant it;
2. to investigate any suspected fraud or misuse of Policy including when
 - a. the Indebtedness as on the date of event is not within the average preceding 6 months Indebtedness history of the Insured Person from the date of event,
 - b. there is a sudden increased Indebtedness within last 2 month preceding the date of event,
 - c. there are any additional circumstances in sole discretion of the Company which may lead the Company to suspect fraud or misuse of the Policy,

If the claim is accepted the Insured Member shall report in person to any branch of the Bank each month as a pre-condition of future to

confirm whilst the Monthly Benefit in respect of the Involuntary Loss of Employment.

If any claim under this Policy is in any way fraudulent or unfounded, the Benefit under this Policy shall be forfeited in respect of the particular Scheme Member.

Internal Investigation Stage:

On receipt of all the documents, if the documents are in order, the Company will forward the file for internal investigation or else the Insured Member will be requested for additional documents as may be required. At all times the Insured Member is required to cooperate with the Company where ever necessary to substantiate and justify their claim.

If the claim is not admissible then the Insured Member will be notified accordingly.

Based on the internal investigation report, the company will process the claim in accordance with the terms and conditions of the policy, and communicate the decision to the Insured Member.

First Settlement

1. If the claim is valid, a Monthly Benefit will be paid to the Bank.
2. Settlement for all claims submitted on or before 15th of the previous month, and once validated, will be made on 1st of the following month and settlement for all claims submitted on or after 16th of the previous month, once validated, will be made on 16th of the following month.

Subsequent settlement

1. The Company will conduct the internal investigation every month and the subsequent Monthly Benefit will be settled based on the internal investigation report. In case the Insured Member is not eligible for the next Monthly Benefit, the Company will advise the Insured Member accordingly.
2. The Insured Member has to visit any branch of the Bank every month with his original Passport and declare his employment status. Subsequently the Monthly Benefit will be paid to the Bank. The verification/attestation of documents will be done by the Bank Authority no less than the Branch Manager / Customer Relationship Manager (CRM).