Please read this policy and Your Schedule carefully to make sure that You have the cover You need. You should contact Us at 6827 9966 immediately if any details are not correct. The Schedule sets out Your cover. It is proof of Your insurance and You may need it if You want to make a claim.

**The contract of insurance**

This policy is a contract of insurance between You and Us. You should read this policy, the information You have provided and the Schedule together. These documents form the contract of insurance between You and Us. We will provide the cover shown in Your Schedule for any covered event occurring during the period of insurance indicated on it as long as cover has not been terminated or cancelled.

**Governing law**

The law of the Republic of Singapore will apply to this policy.

**Use of language**

Unless otherwise agreed, the contractual terms and conditions and any other information relating to this contract will be in English.

Please make sure that You read Your policy carefully. You may not receive any cover or cover may be reduced if You do not comply with the policy conditions.

**Mode of communication**

We will send any correspondence based on Your latest contact details known to Us and any proof of sending by Us would be deemed as receipt by You.

**Changes we need to know**

Please tell Us immediately if there are any changes to Your circumstances which may affect this insurance including:

- Change in Your country of residence.
- You being refused accident, financial protection, health, life or medical insurance, imposed with special conditions or having your policy cancelled or terminated.

This could result in Your policy being declared void, or further conditions being imposed on Your cover under the policy.

If You fail to do so, Your claim may be affected.

**Cover**

Cover will only apply for Dengue Fever occurring on or after the date as indicated on Your Schedule and before the effective date of cancellation or lapsation of the policy, whichever is earlier.

The cover under this policy ends automatically
- upon death of the policyholder named on Your Schedule.
- for the policyholder on his/her 71st birthday.

**Policy limits**

Each section of Your policy has a maximum amount We will pay under that section.
The words or phrases below have the following meanings wherever they appear in bold font with the first letter capitalised in this policy document in singular, plural or any tense and use of the male gender includes the female gender and vice-versa.

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>Age at the last birthday. The policyholder named in the Schedule must be at least 16 years old at the inception of the policy.</td>
</tr>
<tr>
<td>Dengue Fever</td>
<td>A mosquito-borne tropical disease caused by the dengue virus which comes with a high fever and may also include severe headache, vomiting, muscle and joint pains and skin rash. This must be certified by a Doctor.</td>
</tr>
<tr>
<td>Doctor</td>
<td>A registered practising member of the medical profession with a recognised degree in western medicine who is authorised to practise in his country but who is not related to You. This excludes medical professionals practising complementary or alternative medicines such as Chiropractors, Ayurveda, Homeopathy, Naturopathy and Traditional Chinese practitioners.</td>
</tr>
<tr>
<td>Hospital</td>
<td>An establishment duly licensed and constituted as a medical or surgical hospital for the care and treatment of sick and injured people as bed-paying patients in the geographical area in which it is located and (i) Provides facilities for diagnosis, treatment and surgery; (ii) Provides 24-hour nursing services by registered graduate nurses; (iii) Is supervised by a full-time staff of Doctors at all times; and (iv) Is not primarily a clinic, mental hospital or institution, rehabilitation centre, a place for custodial care, a spa, a facility for alcoholics or drug addicts, a hydroclinic, a nursing or rest or convalescent home, a home for the aged or the like; and (v) Does not include any similar ward or units within a hospital which provide any of the services listed in (iv) above.</td>
</tr>
<tr>
<td>Illness</td>
<td>A physical condition contracted marked by a pathological deviation from the normal healthy state.</td>
</tr>
<tr>
<td>Period of Insurance</td>
<td>The period of time the insurance is provided for under this policy, as set out in Your Schedule.</td>
</tr>
<tr>
<td>Schedule</td>
<td>The document which displays details of the cover You have.</td>
</tr>
<tr>
<td>Waiting Period</td>
<td>This refers to a period of 14 days from date of application to the policy start date as stated on Your Schedule.</td>
</tr>
<tr>
<td>We, Us, Our</td>
<td>Aviva Ltd (unless otherwise shown for any policy section).</td>
</tr>
<tr>
<td>You, Your, Yourself</td>
<td>The person (or people) named in Your Schedule.</td>
</tr>
</tbody>
</table>
## Summary of Cover

<table>
<thead>
<tr>
<th>Policy feature</th>
<th>Maximum amount payable</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Section 1: Death benefit</strong></td>
<td></td>
</tr>
<tr>
<td>Pays a one-time lump sum benefit if You suffer death solely due to Dengue Fever within 3 months from the confirmed diagnosis of Dengue Fever.</td>
<td>S$20,000</td>
</tr>
<tr>
<td><strong>Section 2: Hospitalisation Benefit</strong></td>
<td></td>
</tr>
<tr>
<td>Pays a one-time lump sum benefit if You are hospitalised for 3 consecutive days in Singapore for the sole purpose of treatment of Dengue Fever.</td>
<td>S$1,000</td>
</tr>
<tr>
<td><strong>Section 3: Daily Hospital Allowance (up to 10 days)</strong></td>
<td></td>
</tr>
<tr>
<td>Pays for each complete 24-hour period that You are confined as an in-patient at a Hospital in Singapore for the sole purpose of treatment of Dengue Fever.</td>
<td>S$150 per day</td>
</tr>
</tbody>
</table>
**Section 1**

**Death Benefit**

If You suffer death solely due to Dengue Fever within 3 months from the confirmed diagnosis of Dengue Fever in Singapore, We will cover You up to the sum insured as stated in the Summary of Cover.

We will not cover any claim if the death is not directly related to Dengue Fever.

**Section 2**

**Hospitalisation Benefit**

We will pay You a one-time lump sum benefit if You are confined as an in-patient in a Hospital for 3 consecutive days in Singapore during the Period of Insurance for the sole purpose of treatment of Dengue Fever. For the avoidance of doubt, 3 consecutive days shall mean 72 consecutive hours in total.

This is provided the hospitalization is considered medically necessary for Your recovery as recommended by Your Doctor.

We will not cover any claim if You are hospitalized less than 3 consecutive days for the sole purpose of treatment of Dengue Fever.

This benefit can only be utilised once under the policy. If We have already paid once for Your claim under the current Period of Insurance, We will not be covering You for the subsequent claim, if any.

**Section 3**

**Daily Hospital Allowance**

We will pay You the applicable amount detailed on the summary of cover for each complete 24-hour period that You are confined as an in-patient at a Hospital in Singapore for the sole purpose of treatment of Dengue Fever, up to a maximum of 10 consecutive days.

This is provided the hospitalization is considered medically necessary for Your recovery as recommended by Your Doctor.

This benefit can only be utilised once under the policy. If We have already paid once for Your claim under the current Period of Insurance, We will not be covering You for the subsequent claim, if any.
General Exceptions

These apply to all sections of the policy unless stipulated otherwise.

This policy does not cover any claim or consequence whatsoever, caused by or in connection with any of the following, or which is the direct or indirect result of any of the following, whether or not such claim or consequence has been contributed to by any other cause or event:

1. War

War, invasion, act of foreign enemy, hostilities or a war-like operation or operations (whether war be declared or not), civil war, mutiny, rebellion, revolution, military rising, insurrection, civil commotion assuming the proportions of or amounting to an uprising, military or usurped power.

2. Other Actions

Any action taken in controlling, preventing, suppressing or in any way relating to (1) War above or **Terrorism**.

3. Radioactivity

Any form of radioactivity including, but not limited to,

- Ionising radiation or radioactive contamination from nuclear fuel or nuclear waste; or
- Radioactive, toxic, explosive or other dangerous properties of explosive nuclear equipment.

4. Waiting period

Any claims if **You** are diagnosed with **Dengue Fever** during the **Waiting Period**.

5. Pre-existing medical conditions

Any allergy, condition, **Illness**, infirmity or injury, diagnosed or undiagnosed, before the start date of the policy, for which **You** have received advice, medication, treatment, been told of, or for which **You** are under investigation, awaiting results, on a waiting list, or are aware of the need for in-patient treatment.

6. Wilful act or omission or gross negligence

**Your** intentional or wilful act or omission, or gross negligence.

7. Sanction limitation and exclusion clause

**We** shall not be deemed to provide cover and **We** shall not be liable to pay any claim or provide any benefit hereunder to the extent that the provision of such cover, payment of such claim or provision of such benefit would expose **Us** to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union or United Kingdom or United States of America.
General Conditions

1. Claims procedure

If You or Your legal representative are making a claim under the policy, You or Your legal representative must submit Our claim form with full particulars as soon as reasonably possible but no later than 30 days after the incident together with full facts of the claim including its occurrence, detailed circumstances and extent of loss. All documents supporting the claim must also be submitted to Us within 90 days of the diagnosis.

All certificates, receipts, information and evidence required by Us shall be supplied free of expense to Us, in the form prescribed by Us.

Failure to comply with the time and procedure stipulated for the making of a claim in this clause shall invalidate the claim and no benefit shall be payable under this policy.

We shall have the right and the opportunity through Our medical representatives to examine You whenever and as often as may be reasonably required within the duration of any claim. In addition, We shall have the right to require an autopsy in the case of death, where this is not forbidden by law or religious beliefs. We will bear the expenses incurred in such examinations, unless the claim is proved to be invalid, in which case We shall be entitled to recover all the expenses so incurred from You.

We shall have full discretion in the conduct of any proceedings or the settlement of any claim.

Any person who is seeking indemnity under this policy shall give Us all the information, documents and assistance We require to enable any claim to be validated for Us to achieve a settlement.

If, at the correct Age, You would not have been eligible for cover under this policy, no benefit shall be payable.

2. Misstatement of Age

We may also take proceedings at Our own expense and for Our own benefit, in Your name, to recover any payment We have made under this policy to anyone else.

You must at all times take reasonable precautions to prevent and minimise claims under the policy. You need to take reasonable care to protect Yourself as You would if You were not insured.

Where We have accepted a claim and there is disagreement over the amount to be paid or if there is any dispute between Us arising out of this policy, the dispute must be referred to an arbitrator in Singapore to be agreed between You and Us in accordance with the Rules of the Singapore International Arbitration Centre (“SIAC Rules”) at the time in force in English. When this happens, a decision must be made by the arbitrator before You can take any legal action against Us.

Our provision of insurance under this policy is conditional upon You observing and fulfilling the terms, provisions, conditions and clauses of this policy.

3. Our rights

If You did not declare truthfully upon taking up this policy, all benefits under this policy shall be forfeited.

4. Your duty to take precautions

If You, or anyone acting for You, make(s) a claim under this policy knowing the claim to be dishonest or intentionally inflated, exaggerated or fraudulent in any way, or give(s) any false declaration, statement or document to support the claim, We will not pay any claim and all cover under the policy and all premiums paid will be forfeited without recourse.

5. Arbitration

6. Your duty to comply with policy conditions

7. False declaration

8. Fraud
If You have more than one policy with Us that covers the same benefit, We will only pay from one policy. If the benefit amounts are different under Your different policies, We will pay the highest benefit amount.

To assess whether the cover applies, You may be asked to supply the name and contact details of Your registered medical practitioners or Doctors to enable Us to access Your medical records. If You do not agree to allow Us access to Your medical records or provide Us with any details required to do so, We may not deal with Your claim.

Any amount payable under this policy will be paid to the policyholder or as may be permissible under the Insurance Act.

The burden of proving the validity of any claim is upon You. If We deny any claim by reason of any exclusion listed in the section of General Exceptions, the burden of proving that We are legally responsible for the claim is upon You.

This policy is not assignable. No assignment of interest under this policy will be binding upon Us. We do not assume validity of any assignment.

Our failure to enforce any provision of Your policy; or Our acceptance of any premium with actual or implied knowledge of any non-disclosure, misrepresentation, fraud and/or breach of Your policy or of the law, does not amount to a waiver of Our rights under Your policy or at law. We will still have the right to enforce each and every provision of Your policy even if We have not done so in the past.

Anyone not a party to Your policy cannot enforce it under the Contracts (Rights of Third Parties) Act (Cap. 53B).

How to make a claim

To make a claim, please call Our claims assistance helpline at 6827 9966 or visit Our website at www.aviva.com.sg to access Our personal accident claims form.

Our Promise of Service

If You have any comments or suggestions about Our cover, services or any other feedback, please write to:

The Head of General Insurance.
Aviva Ltd., 4 Shenton Way #01- 01 SGX Centre 2 Singapore 068807
We always welcome feedback so We can improve Our products and services.
Customer Care Policy

At Aviva, We will make every effort to provide the high level of service expected by all Our policyholders. If on any occasion Our service falls below the standard of Your expectation, the procedure detailed below explains what You can do:

Your first point of contact should always be to Our Customer Services Department. You can email Us at personal_insurance@aviva.com.sg. We will acknowledge receipt of Your feedback withing 3 working days whilst We look into the matter You raised. We will contact You for further information if required within 7 working days and provide You with a full reply within 14 working days.

If You are dissatisfied with Our response, We will refer You to an independent dispute resolution organization: the Financial Industry Disputes Resolution Centre Ltd (FIDReC).

FIDReC’s contact details are:
Financial Industry Disputes Resolution Centre Ltd.
36 Robinson Road #15-01. City House Singapore 068877
Telephone: 6327 8878 Fax: 6327 8488 Email: info@fidrec.com.sg
Website: www.fidrec.com.sg

Important - Please remember to quote Your policy reference in Your communication.

Policy Owners' Protection Scheme (PPF)

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 contact Us or visit the GIA or SDIC websites (www.gia.org.sg or www.sdic.org.sg).

Learn more about our other products and services at www.aviva.com.sg

Feb 2021