

Master Policy Schedule

Master Policy Number : CP800001
Policyholder : CDG Zig Pte. Ltd.
Address of Policyholder : 205 Braddell Road, Singapore 579701
For The Benefit Of : Insured Person as defined in the Policy
Insurer : HL Assurance Pte Ltd
Address of Insurer : 11 Keppel Road, #11-01 ABI Plaza, Singapore 089057
Period of Insurance of the Master Policy : 30 September 2025 to 29 September 2026

Coverage Outline for Insured Person

The coverage of ComfortProtect Insurance is outlined in the table below for Your easy reference.

Sections	Coverage	Maximum Benefit Payable (\$)
1	Accidental Death & Permanent Disablement	50,000
2	COVID-19 Cash Benefit	500

Please refer to the ComfortProtect Policy for details of the full coverage, terms and conditions and exclusions of this insurance.

Contact Us

HL Prestige Care Team	Mondays to Fridays, 9am to 6pm (Excluding Public Holidays)	(65) 6702 0202	Fax (65) 6922 6002	service@hlas.com.sg
HL Assurance Claims		(65) 6922 6003	Fax (65) 6224 1923	claims@hlas.com.sg

ComfortProtect

POLICY DEFINITIONS

This Policy, the Master Policy Schedule and the Insured Person Policy Schedule shall be read together as one contract and any word or expression to which a specific meaning has been attached in any part of this Policy, the Master Policy Schedule or the Insured Person Policy Schedule shall bear such meaning whenever it may appear.

“Accident/Accidental” means a specific event which is sudden, unforeseen and unexpected, which occurs during the Coverage Period.

“Accidental Death” means Death resulting from the Accident.

“Approved Medical Clinics” means medical clinics duly registered with the Ministry of Health in Singapore that are allowed to conduct the COVID-19 PCR tests.

“Benefit Limit” means the Maximum Benefit Payable as stated in the Coverage Outline of the Master Policy Schedule.

“Coverage Period” means in relation to the Insured Person, the period commencing from the Effective Date and ending on the Expiry Date of the Benefit Cover during the Period of Insurance, which the Policy is effective and has not been cancelled or otherwise terminated. In relation to claims for Accidental Death or Permanent Disablement, the Coverage Period is 24 hours from the Effective Date and in relation to claims for Cash Benefit under Section 2, the Coverage Period is fourteen (14) days from the Date of the Car Ride.

“Car Ride” means a fare paying car ride booked via the ComfortDelGro Booking App.

“Cash Benefit” means the cash benefit of \$500 payable under Section 2.

“COVID-19 PCR Test” means COVID-19 polymerase chain reaction test conducted by Hospitals and Approved Medical Clinics.

“ComfortDelGro Booking App” means the mobile phone booking application designed by ComfortDelGro in collaboration with Us.

“Date of Car Ride” means the date as specified in the Insured Person Policy Schedule, on which the Insured Person rode in the car booked via ComfortDelGro Booking App, which is covered under a ComfortProtect Policy

“Date of Last Car Ride” means the date on which the Insured Person rode in the last car booked via ComfortDelGro Booking App, covered under a ComfortProtect Policy for the purpose of computing the

Insured Person's entitlement to the Cash Benefit under Section 2.

“Death” means the cessation of all the Insured Person's biological functions occurring within twelve (12) calendar months of the date of the Accident.

“Effective Date” means in relation to the Insured Person, the date from which the Coverage Period in this Policy shall become effective and will be with reference to the date and time specified in the Insured Person Policy Schedule.

“Expiry Date of the Benefit Cover” in relation to Accidental Death or Permanent Disablement means twenty-four (24) hours starting from the Effective Date, and in relation to Cash Benefit pay out under Section 2 means fourteen (14) days from the Date of the Car Ride.

“Hospital” means an institution lawfully operated for the care and treatment of injured or sick persons with organized facilities for diagnosis and surgery, having twenty-four (24) hours per day nursing services by legally qualified registered nurses and medical supervision under Registered Medical Practitioners, but not including any institution used primarily as a clinic, a nursing or convalescent home, a place of rest, a geriatric care facility, a mental institution, a rehabilitation, community care facilities, community treatment facilities or such extended care facility as maybe designated for treatment by the Ministry of Health in Singapore from time to time, or a place for the care or treatments of alcoholics or drug addicts.

“Illness” means a physical condition contracted marked by pathological deviation from the normal healthy state.

“Injury” means physical harm to the Insured Person's body caused solely and directly by an Accident resulting in Accidental Death or Permanent Disablement and not by sickness, disease or gradual physical or mental wear and tear.

“Insured Person” means the Insured Person described as such in the Insured Person Policy Schedule.

“Insured Person Policy Schedule” means the Policy Schedule that will be notified to the Insured Person in the manner provided in the ComfortDelgro Booking App, which reflects details of the Insured Person, the Effective Date and/or any terms and conditions that are specific to the Policy, to be read together with and deemed to be incorporated into this Policy as one contract.

“Master Policy Schedule” means the document issued by Us which reflects details of the Policyholder and/or any terms and conditions that are specific to this Policy.

“Period of Insurance” means the period specified in the Master Policy Schedule during which this Policy is effective and has not been cancelled or otherwise terminated.

“Permanent Disablement” means a disability falling under one of the items of disablement listed in the scale of compensation in this Policy under Section 1, which was caused by an Accident, as long as the disability lasts for twelve (12) consecutive months from the date of the Accident and at the expiry of that period Our appointed Registered Medical Practitioner confirms that the disability is not going to improve after twelve (12) months.

“Permanent Total Disablement” means a disability caused by an Accident as long as the disability lasts for twelve (12) consecutive months from the date of the Accident, prevents the Insured Person from engaging in any kind of occupation or employment for remuneration or profit and at the expiry of that period Our appointed Registered Medical Practitioner confirms that the disability is not going to improve after twelve (12) months. We will pay the principal sum insured less any other amount paid or payable under this Policy as the result of the same Accident.

“Policy” means this ComfortProtect Policy, the Insured Person declarations made electronically via the ComfortDelgro Booking App (as is applicable), the Master Policy Schedule and the Insured Person Policy Schedule and any Endorsements We have issued under this Policy.

“Policyholder” means Comfort Transportation Pte Ltd whose registered address is at 383 Sin Ming Drive, Singapore 575717.

“Pre-Existing Conditions” means an Injury or Illness which existed before the Effective Date:

- i. which the Insured Person knew about before the start of this Policy; or
- ii. which the Insured Person have received diagnosis, medical treatment or prescribed drugs before the start of this Policy; or
- iii. for which the Insured Person is under investigation and awaiting result before the start of this Policy; or
- iv. for which the Insured Person have been advised to get medical treatment by a medical practitioner before the Start of this Policy

or should reasonably have been aware, based on normal medically accepted pathological development of the Injury, Illness or Disease.

“Registered Medical Practitioner” means a person qualified by degree in western medicine and duly licensed or registered with the relevant medical board or council to practice medicine and surgery in the geographical area of his/her practice, and who in rendering such services is practicing within the scope of his/her licensing and training. The attending Registered Medical Practitioner shall not be the Insured Person, an employee of the Insured Person, the spouse or relative of the Insured Person.

“We, Our, Us or the Company” means HL Assurance Pte. Ltd.

“You or Your” means the Policyholder.

POLICY COVERAGE

Section 1. Accidental Death & Permanent Disablement

If the Insured Person sustains an Injury, which within twelve (12) months of its happening is the sole cause of the Insured Person's Death or Permanent Disablement, We will pay the relevant percentage as set out in the Scale of Compensation, up to the Benefit Limit.

Scale of Compensation

Covered Event	Percentage of Benefit Limit
1. Accidental Death	100%
2. Permanent Disablement	
(a) Permanent Total Disablement	100%
(b) Loss of sight in both eyes	100%
(c) Loss of:	
(i) one or two Limbs	100%
(ii) one or two hands	100%
(d) Loss by physical severance or Permanent Disablement of one limb and Loss of sight in one eye	100%
(e) Loss of sight in one eye except perception of light	50%
(f) Loss of:	
(i) Hearing and Speech	100%
(ii) Hearing in two ears	75%
(iii) Hearing in one ear	25%
(iv) Speech	50%

We will not pay for any Permanent Disablement that is not listed in the scale of compensation above.

COMPENSATION LIMITS

We shall not pay for:

- a. any specific item of Permanent Disablement where that item is also comprised in any other item of Permanent Disablement for which a greater amount of compensation is payable in the circumstances. If benefit is payable for loss of use of a whole member of the body, the benefit for parts of the member cannot also be claimed.
- b. Death in addition to any Permanent Disablement if caused by the same Accident, except that if a payment has been made under any part of Permanent Disablement and Death occurs subsequently solely caused by and twelve (12) months of the Accident, then We will pay any difference if the Compensation payable for Death is greater than that already paid for Permanent Disablement.
- c. more than 100% of the Benefit Limit in aggregate of all percentages payable under Permanent Disablement in any one Period of Insurance.

Section 2. COVID-19 CASH BENEFIT

- a. We will pay the Insured Person the Cash Benefit if the Insured Person is hospitalized to receive in-patient treatment for a consecutive period of at least three (3) days after being tested positive for COVID-19 pursuant to the COVID-19 PCR Test within fourteen (14) days from the Date of Car Ride as specified in the latest Insured Person Policy Schedule We issued to the Insured Person.
- b. The Effective Date of the above cover shall commence on the Date of Car Ride, but subject to paragraph c below.
- c. In the event that the Insured Person takes multiple Car Rides and the Insured Person is covered multiple times under this Policy for the respective car rides consecutively over a period of time, the Insured Person will be covered up to a period of fourteen (14) days from the Date of the Last Car Ride in the event of overlapping Coverage Period. However, the Insured Person shall be entitled to make only one claim for the Cash Benefit if the Coverage Period overlaps.
- d. The Insured Person shall however be entitled to make a claim for Cash Benefit under Section 2 if the Insured Person is subsequently tested positive for COVID-19 pursuant to the COVID-19 PCR Test after having made an earlier claim for Cash Benefit, so long as the Insured Person is subsequently covered under the ComfortProtect Policy for a Car Ride and the Coverage Period under the latest cover does not overlap with the Coverage Period under the policy which covered the Insured Person for the earlier claim.

The maximum amount that We will pay the Insured Person for this Cash Benefit is \$500 regardless of the number of times We insure the Insured Person under the this Policy, where the Coverage Period overlaps with each other. This paragraph is subject to paragraph above where the Insured Person is subsequently tested positive for COVID-19 covered under this Policy with no overlap in the Coverage Period.

Exclusions Applicable to Section 2

No benefit will be payable under Section 2:

1. If the positive results of the Insured Person's Polymerase Chain Reaction (PCR) test is not submitted with any claims.
2. Any breach or non-adherence to safety measures or guidelines.
3. The Insured Person and/or Immediate Family Member being diagnosed or suspected to be infected with COVID-19 at the time of application for this insurance.
4. If the Insured Person is Hospitalized overseas.
5. If the Insured Person took the Car Ride as part of the requirement for serving Stay-Home Notice (SHN).

6. If the Insured Person is admitted to a community care facilities or community treatment facilities or such extended care facility as maybe designated for treatment by the Ministry of Health in Singapore from time to time.

POLICY EXTENSION

1. Disappearance

Notwithstanding anything contained in this Policy to the contrary, if the Insured Person's body is not found within twelve (12) months after the date of the disappearance following sinking or wrecking or destruction of that aircraft or conveyance in which the Insured Person was travelling during the Coverage Period, We will consider the Insured Person to be dead and this shall be considered as constituting a valid claim under this Policy payable under Section 1 of this Policy.

Any payment under this Policy Extension is made subject to the requirement that the Insured Person and/or the Insured Person's legal personal representatives must provide a signed undertaking to Us to guarantee that if it is subsequently found that the Insured Person is alive, they undertake to and shall on demand, return to Us any sums We have paid under this Policy.

2. Exposure

If following an Accident, the Insured Person is unavoidably exposed to the natural elements and as a direct result of such exposure suffers a Death or Permanent Disablement, We will consider such Death or Permanent Disablement as having been caused by an Injury.

3. Terrorism Cover

This Policy covers losses which may be sustained through acts of terrorism provided that there is no liability when such acts of terrorism involve the use of biological, chemical agents or nuclear devices, provided that the Insured Person did not participate in or provoke such acts of terrorism.

Where the Insured Person is insured under more than one Policy with Us covering act of terrorism, Our maximum liability for any and all claims arising directly or indirectly from any act of terrorism will be limited to one Policy only (with the highest limit on act of terrorism where applicable).

4. Suffocation by Smoke, Poisonous Fumes, Gas or Drowning

In the event that the Insured Person sustains Injury caused by suffocation by smoke, poisonous fumes, gas or drowning, We will pay the appropriate amount of Benefit Limit under the Policy.

5. Time Limits

The coverage under this Policy is:

- a. twenty-four (24) hours from the time of the Car Ride, in relation to any claim for Accidental Death or Permanent Disability, within

- Singapore unless otherwise endorsed or amended;
- b. Fourteen (14) days from the Date of the Car Ride in the case of a claim for Cash Benefit under Section 2;
- c. Fourteen (14) days from the Date of the Last Car Ride in the event of multiple car rides with multiple policies covering each Car Ride with overlapping Coverage Period.

GENERAL EXCLUSIONS

(Applicable to the whole Policy)

Unless otherwise expressly stated or extended in the Policy, this Policy does not insure any consequential loss or any legal liability or any Injury, Illness or disease and Death to the Insured Person directly or indirectly caused by, or contributed to, or arising from:

1. Suicide or attempted suicide, self-injury or wilful exposure to peril (other than in an attempt to save human life).
2. Pregnancy, miscarriage, abortion or childbirth.
3. Infectious Disease (except for COVID-19 cover under Section 2), venereal disease, HIV (Human Immuno Deficiency Virus) and/or any HIV related illness including AIDS (Acquired Immune Deficiency Syndrome) and/or any mutant derivatives or variations of this however caused.
4. Mental and nervous or sleep disorders, including but not limited to insanity or any diagnosed psychological or psychiatric disorder, anxiety or depression.
5. Any Pre-Existing Conditions.
6. The Insured Person being under the influence of drugs (other than those prescribed by a Registered Medical Practitioner but not when prescribed for the treatment of drug addiction).
7. The Insured Person being under the influence of alcohol, unless it can be established to Our reasonable satisfaction by any claimant that alcohol was not a factor contributing to the happening of the Injury.
8. Any willful, malicious, criminal or unlawful acts committed by the Insured Person and/or any person acting on the Insured Person's behalf.
9. Congenital anomalies and conditions arising out of or resulting therefrom or physical impairment.
10. Air travel, flying or other aerial activities except travelling as a fare paying passenger in a properly licensed, regular scheduled commercial airline operating between established and licensed commercial airports.
11. Any trade, technical or sporting activity in connection with an aircraft and/or vessel.
12. Rafting or canoeing involving white water rapids, bungee jumping, jet skiing, underwater activities involving artificial breathing apparatus such as compressed air or gas, ski racing, backcountry skiing or off-piste skiing, ski jumping, hang gliding, parasailing, parachuting, the use of bobsleigh or skeleton, hunting, pot-holing, mountaineering or rock climbing (except on man-made walls) that ordinarily requires the use of ropes or guides.
13. Motorcycling (as rider or pillion).
14. The Insured Person participating in any terrorism activities.
15. The Insured Person employed as:
 - (a) professional sportspersons or racer, where the Insured Person would or could earn any remuneration, donation, sponsorship, award or certificate of any kind from engaging in such kind of sport, racing other than on foot or trial of speed or reliability.
 - (b) (while on duty) full time military personnel, law enforcement officer, civil defence officer, navy or fire fighters.
 - (c) air crew or pilot.
 - (d) off-shore occupation such as diver, rig worker fisherman, ship crew.
 - (e) workers engaged in maintenance, cleaning, roofing or repair activities involving scaffolding or gondola
 - (f) construction worker at heights above 30 feet or work underground, in tunnels, demolition and quarry worker
 - (g) in any occupation that requires handling of explosives, ammunitions, firearms, poisonous or hazardous gases or substances.
16. Nuclear weapons material or ionizing radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel. For the purpose of this Exclusions, combustion shall include any self-sustaining process of nuclear fission.
 - (a) War, invasion, acts of foreign enemies, hostilities or warlike operations (whether war be declared or not), civil war, mutiny, rebellion, revolution, insurrection, conspiracy, civil commotion assuming the proportions of or amounting to an uprising, military or usurped power.
 - (b) any Nuclear, Chemical, Biological Terrorism. "Nuclear, Chemical, Biological Terrorism" shall mean the use of any nuclear weapon or device

or the emission, discharge, dispersal, release, or escape of any solid, liquid or gaseous Chemical agent and/or Biological agent during the period of this insurance by any person or group(s) of persons, whether acting alone or on behalf of or in connection with any organisation(s) or government(s), committed for political, religious or ideological purposes or reasons including the intention to influence any government and/or to put the public, or any section of the public, in fear.

This endorsement also excludes loss, damage, cost or expense of whatsoever nature directly or indirectly caused by, resulting from or in connection with any action taken in controlling, preventing, suppressing or in any way relating to 16 (a) and/or 16 (b) above.

17. If We allege that by reason of these Exclusions, any claim is not covered by this insurance, then the burden of proving that the claim is covered shall be upon the Insured Person.

GENERAL CONDITIONS

(Applicable to the whole Policy)

1. Arbitration

If there is any dispute as to the amount to be paid under this Policy (liability being otherwise admitted), the validity of the claim and/or the extent of cover, such dispute shall be first referred for mediation by Financial Industry Disputes Resolution Centre Ltd.

If the parties are unable to reach a settlement, the dispute shall be referred to and finally resolved by arbitration administered by the Singapore International Arbitration Centre ("SIAC") in accordance with the Arbitration Rules of the SIAC for the time being in force, which rules are deemed to be incorporated by reference in this Clause.

The seat of the arbitration shall be Singapore and the tribunal shall consist of one arbitrator.

The language of the arbitration shall be English.

2. Automatic Termination of Coverage

The Insured Person's coverage under this Policy will automatically terminate on the earliest of the following events:

- i. On the date the Insured Person attain sixty-six (66) years of age;
- ii. Upon the Insured Person's Death;
- iii. We have paid 100% of the Benefit Limit for Accidental Death or Permanent Disablement or COVID-19 Cash Benefit;
- iv. The Insured Person ceased to be a Singapore Citizen, Singapore Permanent Resident, or expatriate or foreigner who is holding a valid employment pass, work permit, dependent pass, student pass or long term visit pass and who is ordinarily residing in Singapore.

3. Cancellation of the Policy

- (a) We may cancel this Policy by sending seven (7) days' notice by registered letter to You at Your last known address.
- (b) You may cancel the Policy by giving fourteen (14) days' notification in writing to Us provided no claims has been made under the Policy.

4. Contract (Rights of Third Parties) Act 2001

A person who is not a party to this Policy shall have no right under the Contracts (Rights of Third Parties) Act 2001 to enforce any of its terms.

5. Currency

All amounts shown are in Singapore dollars. All claims will be paid in Singapore dollars.

6. Data Privacy

It is hereby declared that as a condition precedent to the liability of Us, You and the Insured Person have agreed that any personal information in relation to You and/or the Insured Person provided by or on behalf of You and/or the Insured Person to Us may be held, used and disclosed to enable Us or individuals/organisations associated with Us or any independent third party (within or outside of Singapore) to:

- (a) process and assess the Insurer's application or any matter arising from the Master Policy Schedule and/or Insured Person and any other application for insurance cover and/or;
- (b) provide all services related to this Policy.

7. Due Observance

The conditions that appear in the Policy or in any Endorsement are part of the contract and must be complied with. The due observance and compliance of these conditions by You, the Insured Person or the claimant and the truth of the statements and answers in the proposal shall be conditions precedent to any liability of Us to make any payment under this Policy.

8. Eligibility

The Insured Person is eligible for cover under this Policy if:

- (a) The Insured Person is between the age of eighteen (18) to sixty-five (65) years old.
- (b) The Insured Person must be a Singapore Citizen, Singapore Permanent Resident, or expatriate or foreigner who is holding a valid employment pass, work permit, dependent pass, student pass or long term visit pass and who is ordinarily residing in Singapore, if the Insured Person is away from Singapore for no more than 183 days during the Period of Insurance.

9. Fraud, Misstatement or Concealment

Any fraud, misstatement or concealment in respect of this insurance or of any claim hereunder shall render this Policy null and void and any benefit due hereunder shall be or become forfeited.

10. Governing Law

Any interpretation of this Policy relating to its construction, validity or operation shall be made in accordance with the Laws of Singapore.

11. Jurisdiction

Notwithstanding anything stated herein to the contrary, the indemnity provided by this Policy shall not apply in respect of judgments which are not in the first instance delivered by or obtained from a court of competent jurisdiction within the Republic of Singapore nor to orders obtained in the said court for the enforcement of judgments made outside the Republic of Singapore whether by way of reciprocal agreements or otherwise.

12. Legal Personal Representative

The terms exceptions and conditions of this Policy, so far as applicable and with any necessary modifications, shall apply to the Insured Person's and/or the legal personal representative of the Insured Person.

13. Non-Assignment and Discharge

We will not recognize or be affected by any notice of trust, charge or assignment relating to this Policy. The receipt of the Insured Person, or his legal personal representatives or of any person(s) to whom any benefit is expressed to be payable shall in all cases effectively discharge Our liability.

14. Payment of Benefits

All benefits payable under this Policy shall be paid to the Insured Person or the Insured Person's legal representative or the Insured Person's beneficiary (if any), or otherwise to the Insured Person's estate in the event of Death. Any payment made by Us in accordance with this condition shall in all cases be deemed final and a complete discharge of all Our liability.

15. Sanction Limitation and Exclusion Clause

Notwithstanding any provision to the contrary within this Policy or any endorsement thereto, this insurance shall, in no case, be deemed to provide cover and 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 the Company 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.

16. Subrogation

The Insured Person shall at Our expense do and concur in doing and permit to be done all such acts and things as may be necessary or reasonably required by Us for the purpose of enforcing any rights and remedies or of obtaining relief or indemnity from other parties to which We shall be or would become entitled to or subrogated upon its paying for or making good any loss destruction or damage under this Policy whether such acts and things shall be or become necessary or required

before or after their indemnification by Us.

CLAIMS PROCEDURE

- (a) Notice shall be given to Us as soon as possible but in any case within fourteen (14) days of the happening of any Injury in respect of which a claim is to be made.
- (b) The Insured Person or other claimant shall at their or other claimant's own expense furnish to Us such certificates information, blood tests, medical reports and evidence as We may reasonably require.
- (c) The Insured Person shall as soon as possible after the happening of any Injury in respect of which a claim is to be made procure and follow medical advice from a duly Registered Medical Practitioner.
- (d) The Insured Person or other claimant shall at their or other claimant's own expense furnish to Us such certificates information, blood tests, medical reports and evidence as We may reasonably require.
- (e) The Insured Person as often as required shall submit to medical examination on behalf of Us at Our own expense.
- (f) We shall in the case of the Insured Person's Death be entitled to have a post mortem examination at Our own expense.

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 this Policy is automatic and no further action is required from You or the Insured Person. 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 HL Assurance Pte. Ltd. or visit the GIA or SDIC websites (www.gia.org.sg or www.sdic.org.sg).

CARING FOR OUR CUSTOMERS

HL Assurance Pte. Ltd. will make every effort to provide a high level of service expected by all Our policyholders. If on any occasion Our service falls below the standard of Your expectation, the procedure below explains what You can do:

Your first point of contact should always be Your insurance agent or broker. Alternatively, You may submit Your feedback to the manager in charge of the matter You are raising.

We will acknowledge receipt of Your feedback within seven (7) working days whilst We look into the matter You have raised. We will contact You for further

information if required within seven (7) working days and provide You with a full reply within fourteen (14) working days.

If the outcome of Your complaint is not handled to Your satisfaction, You can write to:

Chief Executive Officer
HL Assurance Pte. Ltd.
11 Keppel Road #11-01
ABI Plaza
Singapore 089057

We will respond to Your appeal within fourteen (14) working days. If you are dissatisfied with the CEO's respond, We will refer You to a dispute resolution organization, Financial Industry Disputes Resolution Centre Ltd (FIDReC) which is an independent organization. FIDReC's contact details are:
Financial Industry Disputes Resolution Centre Ltd
36 Robinson Road #15-01
City House
Singapore 068877

Telephone : (65) 6327 8878
Fax : (65) 6327 8488
Email : info@fidrec.com.sg
Website : www.fidrec.com.sg

Important – Please remember to quote Your Policy number / reference in Your communication.

Master Policy Schedule

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“Accidental Death” means Death resulting from the Accident.

“Approved Medical Clinics” means medical clinics duly registered with the Ministry of Health in Singapore that are allowed to conduct the COVID-19 PCR tests.

“Benefit Limit” means the Maximum Benefit Payable as stated in the Coverage Outline of the Master Policy Schedule.

“Coverage Period” means in relation to the Insured Person, the period commencing from the Effective Date and ending on the Expiry Date of the Benefit Cover during the Period of Insurance, which the Policy is effective and has not been cancelled or otherwise terminated. In relation to claims for Accidental Death or Permanent Disablement, the Coverage Period is 24 hours from the Effective Date and in relation to claims for Cash Benefit under Section 2, the Coverage Period is fourteen (14) days from the Date of the Car Ride.

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Insured Person's entitlement to the Cash Benefit under Section 2.

“Death” means the cessation of all the Insured Person's biological functions occurring within twelve (12) calendar months of the date of the Accident.

“Effective Date” means in relation to the Insured Person, the date from which the Coverage Period in this Policy shall become effective and will be with reference to the date and time specified in the Insured Person Policy Schedule.

“Expiry Date of the Benefit Cover” in relation to Accidental Death or Permanent Disablement means twenty-four (24) hours starting from the Effective Date, and in relation to Cash Benefit pay out under Section 2 means fourteen (14) days from the Date of the Car Ride.

“Hospital” means an institution lawfully operated for the care and treatment of injured or sick persons with organized facilities for diagnosis and surgery, having twenty-four (24) hours per day nursing services by legally qualified registered nurses and medical supervision under Registered Medical Practitioners, but not including any institution used primarily as a clinic, a nursing or convalescent home, a place of rest, a geriatric care facility, a mental institution, a rehabilitation, community care facilities, community treatment facilities or such extended care facility as maybe designated for treatment by the Ministry of Health in Singapore from time to time, or a place for the care or treatments of alcoholics or drug addicts.

“Illness” means a physical condition contracted marked by pathological deviation from the normal healthy state.

“Injury” means physical harm to the Insured Person's body caused solely and directly by an Accident resulting in Accidental Death or Permanent Disablement and not by sickness, disease or gradual physical or mental wear and tear.

“Insured Person” means the Insured Person described as such in the Insured Person Policy Schedule.

“Insured Person Policy Schedule” means the Policy Schedule that will be notified to the Insured Person in the manner provided in the ComfortDelGro Booking App, which reflects details of the Insured Person, the Effective Date and/or any terms and conditions that are specific to the Policy, to be read together with and deemed to be incorporated into this Policy as one contract.

“Master Policy Schedule” means the document issued by Us which reflects details of the Policyholder and/or any terms and conditions that are specific to this Policy.

“Period of Insurance” means the period specified in the Master Policy Schedule during which this Policy is effective and has not been cancelled or otherwise terminated.

“Permanent Disablement” means a disability falling under one of the items of disablement listed in the scale of compensation in this Policy under Section 1, which was caused by an Accident, as long as the disability lasts for twelve (12) consecutive months from the date of the Accident and at the expiry of that period Our appointed Registered Medical Practitioner confirms that the disability is not going to improve after twelve (12) months.

“Permanent Total Disablement” means a disability caused by an Accident as long as the disability lasts for twelve (12) consecutive months from the date of the Accident, prevents the Insured Person from engaging in any kind of occupation or employment for remuneration or profit and at the expiry of that period Our appointed Registered Medical Practitioner confirms that the disability is not going to improve after twelve (12) months. We will pay the principal sum insured less any other amount paid or payable under this Policy as the result of the same Accident.

“Policy” means this ComfortProtect Policy, the Insured Person declarations made electronically via the ComfortDelgro Booking App (as is applicable), the Master Policy Schedule and the Insured Person Policy Schedule and any Endorsements We have issued under this Policy.

“Policyholder” means Comfort Transportation Pte Ltd whose registered address is at 383 Sin Ming Drive, Singapore 575717.

“Pre-Existing Conditions” means an Injury or Illness which existed before the Effective Date:

- i. which the Insured Person knew about before the start of this Policy; or
- ii. which the Insured Person have received diagnosis, medical treatment or prescribed drugs before the start of this Policy; or
- iii. for which the Insured Person is under investigation and awaiting result before the start of this Policy; or
- iv. for which the Insured Person have been advised to get medical treatment by a medical practitioner before the Start of this Policy

or should reasonably have been aware, based on normal medically accepted pathological development of the Injury, Illness or Disease.

“Registered Medical Practitioner” means a person qualified by degree in western medicine and duly licensed or registered with the relevant medical board or council to practice medicine and surgery in the geographical area of his/her practice, and who in rendering such services is practicing within the scope of his/her licensing and training. The attending Registered Medical Practitioner shall not be the Insured Person, an employee of the Insured Person, the spouse or relative of the Insured Person.

“We, Our, Us or the Company” means HL Assurance Pte. Ltd.

“You or Your” means the Policyholder.

POLICY COVERAGE

Section 1. Accidental Death & Permanent Disablement

If the Insured Person sustains an Injury, which within twelve (12) months of its happening is the sole cause of the Insured Person’s Death or Permanent Disablement, We will pay the relevant percentage as set out in the Scale of Compensation, up to the Benefit Limit.

Scale of Compensation

Covered Event	Percentage of Benefit Limit
1. Accidental Death	100%
2. Permanent Disablement	
(a) Permanent Total Disablement	100%
(b) Loss of sight in both eyes	100%
(c) Loss of:	
(i) one or two Limbs	100%
(ii) one or two hands	100%
(d) Loss by physical severance or Permanent Disablement of one limb and Loss of sight in one eye	100%
(e) Loss of sight in one eye except perception of light	50%
(f) Loss of:	
(i) Hearing and Speech	100%
(ii) Hearing in two ears	75%
(iii) Hearing in one ear	25%
(iv) Speech	50%

We will not pay for any Permanent Disablement that is not listed in the scale of compensation above.

COMPENSATION LIMITS

We shall not pay for:

- a. any specific item of Permanent Disablement where that item is also comprised in any other item of Permanent Disablement for which a greater amount of compensation is payable in the circumstances. If benefit is payable for loss of use of a whole member of the body, the benefit for parts of the member cannot also be claimed.
- b. Death in addition to any Permanent Disablement if caused by the same Accident, except that if a payment has been made under any part of Permanent Disablement and Death occurs subsequently solely caused by and twelve (12) months of the Accident, then We will pay any difference if the Compensation payable for Death is greater than that already paid for Permanent Disablement.
- c. more than 100% of the Benefit Limit in aggregate of all percentages payable under Permanent Disablement in any one Period of Insurance.

Section 2. COVID-19 CASH BENEFIT

- a. We will pay the Insured Person the Cash Benefit if the Insured Person is hospitalized to receive in-patient treatment for a consecutive period of at least three (3) days after being tested positive for COVID-19 pursuant to the COVID-19 PCR Test within fourteen (14) days from the Date of Car Ride as specified in the latest Insured Person Policy Schedule We issued to the Insured Person.
- b. The Effective Date of the above cover shall commence on the Date of Car Ride, but subject to paragraph c below.
- c. In the event that the Insured Person takes multiple Car Rides and the Insured Person is covered multiple times under this Policy for the respective car rides consecutively over a period of time, the Insured Person will be covered up to a period of fourteen (14) days from the Date of the Last Car Ride in the event of overlapping Coverage Period. However, the Insured Person shall be entitled to make only one claim for the Cash Benefit if the Coverage Period overlaps.
- d. The Insured Person shall however be entitled to make a claim for Cash Benefit under Section 2 if the Insured Person is subsequently tested positive for COVID-19 pursuant to the COVID-19 PCR Test after having made an earlier claim for Cash Benefit, so long as the Insured Person is subsequently covered under the ComfortProtect Policy for a Car Ride and the Coverage Period under the latest cover does not overlap with the Coverage Period under the policy which covered the Insured Person for the earlier claim.

The maximum amount that We will pay the Insured Person for this Cash Benefit is \$500 regardless of the number of times We insure the Insured Person under the this Policy, where the Coverage Period overlaps with each other. This paragraph is subject to paragraph above where the Insured Person is subsequently tested positive for COVID-19 covered under this Policy with no overlap in the Coverage Period.

Exclusions Applicable to Section 2

No benefit will be payable under Section 2:

1. If the positive results of the Insured Person's Polymerase Chain Reaction (PCR) test is not submitted with any claims.
2. Any breach or non-adherence to safety measures or guidelines.
3. The Insured Person and/or Immediate Family Member being diagnosed or suspected to be infected with COVID-19 at the time of application for this insurance.
4. If the Insured Person is Hospitalized overseas.
5. If the Insured Person took the Car Ride as part of the requirement for serving Stay-Home Notice (SHN).

6. If the Insured Person is admitted to a community care facilities or community treatment facilities or such extended care facility as maybe designated for treatment by the Ministry of Health in Singapore from time to time.

POLICY EXTENSION

1. Disappearance

Notwithstanding anything contained in this Policy to the contrary, if the Insured Person's body is not found within twelve (12) months after the date of the disappearance following sinking or wrecking or destruction of that aircraft or conveyance in which the Insured Person was travelling during the Coverage Period, We will consider the Insured Person to be dead and this shall be considered as constituting a valid claim under this Policy payable under Section 1 of this Policy.

Any payment under this Policy Extension is made subject to the requirement that the Insured Person and/or the Insured Person's legal personal representatives must provide a signed undertaking to Us to guarantee that if it is subsequently found that the Insured Person is alive, they undertake to and shall on demand, return to Us any sums We have paid under this Policy.

2. Exposure

If following an Accident, the Insured Person is unavoidably exposed to the natural elements and as a direct result of such exposure suffers a Death or Permanent Disablement, We will consider such Death or Permanent Disablement as having been caused by an Injury.

3. Terrorism Cover

This Policy covers losses which may be sustained through acts of terrorism provided that there is no liability when such acts of terrorism involve the use of biological, chemical agents or nuclear devices, provided that the Insured Person did not participate in or provoke such acts of terrorism.

Where the Insured Person is insured under more than one Policy with Us covering act of terrorism, Our maximum liability for any and all claims arising directly or indirectly from any act of terrorism will be limited to one Policy only (with the highest limit on act of terrorism where applicable).

4. Suffocation by Smoke, Poisonous Fumes, Gas or Drowning

In the event that the Insured Person sustains Injury caused by suffocation by smoke, poisonous fumes, gas or drowning, We will pay the appropriate amount of Benefit Limit under the Policy.

5. Time Limits

The coverage under this Policy is:

- a. twenty-four (24) hours from the time of the Car Ride, in relation to any claim for Accidental Death or Permanent Disability, within

Singapore unless otherwise endorsed or amended;

- b. Fourteen (14) days from the Date of the Car Ride in the case of a claim for Cash Benefit under Section 2;
- c. Fourteen (14) days from the Date of the Last Car Ride in the event of multiple car rides with multiple policies covering each Car Ride with overlapping Coverage Period.

GENERAL EXCLUSIONS

(Applicable to the whole Policy)

Unless otherwise expressly stated or extended in the Policy, this Policy does not insure any consequential loss or any legal liability or any Injury, Illness or disease and Death to the Insured Person directly or indirectly caused by, or contributed to, or arising from:

- 1. Suicide or attempted suicide, self-injury or wilful exposure to peril (other than in an attempt to save human life).
- 2. Pregnancy, miscarriage, abortion or childbirth.
- 3. Infectious Disease (except for COVID-19 cover under Section 2), venereal disease, HIV (Human Immuno Deficiency Virus) and/or any HIV related illness including AIDS (Acquired Immune Deficiency Syndrome) and/or any mutant derivatives or variations of this however caused.
- 4. Mental and nervous or sleep disorders, including but not limited to insanity or any diagnosed psychological or psychiatric disorder, anxiety or depression.
- 5. Any Pre-Existing Conditions.
- 6. The Insured Person being under the influence of drugs (other than those prescribed by a Registered Medical Practitioner but not when prescribed for the treatment of drug addiction).
- 7. The Insured Person being under the influence of alcohol, unless it can be established to Our reasonable satisfaction by any claimant that alcohol was not a factor contributing to the happening of the Injury.
- 8. Any willful, malicious, criminal or unlawful acts committed by the Insured Person and/or any person acting on the Insured Person's behalf.
- 9. Congenital anomalies and conditions arising out of or resulting therefrom or physical impairment.
- 10. Air travel, flying or other aerial activities except travelling as a fare paying passenger in a properly licensed, regular scheduled commercial airline operating between established and licensed commercial airports.
- 11. Any trade, technical or sporting activity in connection with an aircraft and/or vessel.
- 12. Rafting or canoeing involving white water rapids, bungee jumping, jet skiing, underwater activities involving artificial breathing apparatus such as compressed air or gas, ski racing, backcountry skiing or off-piste skiing, ski jumping, hang gliding, parasailing, parachuting, the use of bobsleigh or skeleton, hunting, pot-holing, mountaineering or rock climbing (except on man-made walls) that ordinarily requires the use of ropes or guides.
- 13. Motorcycling (as rider or pillion).
- 14. The Insured Person participating in any terrorism activities.
- 15. The Insured Person employed as:
 - (a) professional sportspersons or racer, where the Insured Person would or could earn any remuneration, donation, sponsorship, award or certificate of any kind from engaging in such kind of sport, racing other than on foot or trial of speed or reliability.
 - (b) (while on duty) full time military personnel, law enforcement officer, civil defence officer, navy or fire fighters.
 - (c) air crew or pilot.
 - (d) off-shore occupation such as diver, rig worker fisherman, ship crew.
 - (e) workers engaged in maintenance, cleaning, roofing or repair activities involving scaffolding or gondola
 - (f) construction worker at heights above 30 feet or work underground, in tunnels, demolition and quarry worker
 - (g) in any occupation that requires handling of explosives, ammunitions, firearms, poisonous or hazardous gases or substances.
- 16. Nuclear weapons material or ionizing radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel. For the purpose of this Exclusions, combustion shall include any self-sustaining process of nuclear fission.
 - (a) War, invasion, acts of foreign enemies, hostilities or warlike operations (whether war be declared or not), civil war, mutiny, rebellion, revolution, insurrection, conspiracy, civil commotion assuming the proportions of or amounting to an uprising, military or usurped power.

- (b) any Nuclear, Chemical, Biological Terrorism. "Nuclear, Chemical, Biological Terrorism" shall mean the use of any nuclear weapon or device or the emission, discharge, dispersal, release, or escape of any solid, liquid or gaseous Chemical agent and/or Biological agent during the period of this insurance by any person or group(s) of persons, whether acting alone or on behalf of or in connection with any organisation(s) or government(s), committed for political, religious or ideological purposes or reasons including the intention to influence any government and/or to put the public, or any section of the public, in fear.

This endorsement also excludes loss, damage, cost or expense of whatsoever nature directly or indirectly caused by, resulting from or in connection with any action taken in controlling, preventing, suppressing or in any way relating to 16 (a) and/or 16 (b) above.

17. If We allege that by reason of these Exclusions any claim is not covered by this insurance, then the burden of proving that the claim is covered shall be upon the Insured Person.

GENERAL CONDITIONS

(Applicable to the whole Policy)

1. Arbitration

If there is any dispute as to the amount to be paid under this Policy (liability being otherwise admitted), the validity of the claim and/or the extent of cover, such dispute shall be first referred for mediation by Financial Industry Disputes Resolution Centre Ltd.

If the parties are unable to reach a settlement, the dispute shall be referred to and finally resolved by arbitration administered by the Singapore International Arbitration Centre ("SIAC") in accordance with the Arbitration Rules of the SIAC for the time being in force, which rules are deemed to be incorporated by reference in this Clause.

The seat of the arbitration shall be Singapore and the tribunal shall consist of one arbitrator.

The language of the arbitration shall be English.

2. Automatic Termination of Coverage

The Insured Person's coverage under this Policy will automatically terminate on the earliest of the following events:

- i. On the date the Insured Person attain sixty-six (66) years of age;
- ii. Upon the Insured Person's Death;
- iii. We have paid 100% of the Benefit Limit for Accidental Death or Permanent Disablement or COVID-19 Cash Benefit;
- iv. The Insured Person ceased to be a Singapore Citizen, Singapore Permanent Resident, or expatriate or foreigner who is holding a valid

employment pass, work permit, dependent pass, student pass or long term visit pass and who is ordinarily residing in Singapore.

3. Cancellation of the Policy

- (a) We may cancel this Policy by sending seven (7) days' notice by registered letter to You at Your last known address and there will be no premium refund upon the cancellation.
- (b) You may cancel the Policy by giving fourteen (14) days' notification in writing to Us provided no claims has been made under the Policy. The Policy will terminate at the end of the period for which You have paid Your Premium.
- (c) Notwithstanding the issuance of the Insured Person Policy Schedule to the Insured Person in the manner provided under the ComfortDelgro Booking App, We shall be entitled to subsequently cancel this Policy due to insufficient funds in the Insured Person's selected payment mode with the ComfortDelgro Booking App for payment of the Car Ride fare and Insured Person's insurance premium payable for the Car Ride, in which event there will be no coverage under this Policy.

4. Contract (Rights of Third Parties) Act 2001

A person who is not a party to this Policy shall have no right under the Contracts (Rights of Third Parties) Act 2001 to enforce any of its terms.

5. Currency

All amount shown are in Singapore dollars. All claims will be paid in Singapore dollars.

6. Data Privacy

It is hereby declared that as a condition precedent to the liability of Us, You and the Insured Person have agreed that any personal information in relation to You and/or the Insured Person provided by or on behalf of You and/or the Insured Person to Us may be held, used and disclosed to enable Us or individuals / organisations associated with Us or any independent third party (within or outside of Singapore) to:

- (a) process and assess the Insurer's application or any matter arising from the Master Policy Schedule and/or Insured Person and any other application for insurance cover and/or;
- (b) provide all services related to this Policy.

7. Declaration

The validity of this Policy is subject to the condition precedent that:

- (a) for the risk insured, You have never had any insurance terminated in the last twelve (12) months due solely or in part to a breach of any premium payment condition; or
- (b) if You have declared that You have breached any premium payment condition in respect of a previous policy taken up with another insurer in

the last twelve (12) months:

- i. You have fully paid all outstanding premium for time on risk calculated by the previous insurer based on the customary short period rate in respect of the previous policy; and
- ii. a copy of the written confirmation from the previous insurer to this effect is first provided by You to Us before cover incept.

8. Due Observance

The conditions that appear in the Policy or in any Endorsement are part of the contract and must be complied with. The due observance and compliance of these conditions by You, the Insured Person or the claimant and the truth of the statements and answers in the proposal shall be conditions precedent to any liability of Us to make any payment under this Policy.

9. Eligibility

The Insured Person is eligible for cover under this Policy if:

- (a) The Insured Person is between the age of eighteen (18) to sixty-five (65) years old.
- (b) The Insured Person must be a Singapore Citizen, Singapore Permanent Resident, or expatriate or foreigner who is holding a valid employment pass, work permit, dependent pass, student pass or long term visit pass and who is ordinarily residing in Singapore, if the Insured Person is away from Singapore for no more than 183 days during the Period of Insurance.

10. Fraud, Misstatement or Concealment

Any fraud, misstatement or concealment in respect of this insurance or of any claim hereunder shall render this Policy null and void and any benefit due hereunder shall be or become forfeited.

11. Governing Law

Any interpretation of this Policy relating to its construction, validity or operation shall be made in accordance with the Laws of Singapore.

12. Jurisdiction

Notwithstanding anything stated herein to the contrary, the indemnity provided by this Policy shall not apply in respect of judgments which are not in the first instance delivered by or obtained from a court of competent jurisdiction within the Republic of Singapore nor to orders obtained in the said court for the enforcement of judgments made outside the Republic of Singapore whether by way of reciprocal agreements or otherwise.

13. Legal Personal Representative

The terms exceptions and conditions of this Policy, so far as applicable and with any necessary modifications, shall apply to the Insured Person's and/or the legal personal representative of the Insured Person.

14. Non-Assignment and Discharge

We will not recognize or be affected by any notice of trust, charge or assignment relating to this Policy. The receipt of the Insured Person, or his legal personal representatives or of any person(s) to whom any benefit is expressed to be payable shall in all cases effectively discharge Our liability.

15. Payment of Benefits

All benefits payable under this Policy shall be paid to the Insured Person or the Insured Person's legal representative or the Insured Person's beneficiary (if any), or otherwise to the Insured Person's estate in the event of Death. Any payment made by Us in accordance with this condition shall in all cases be deemed final and a complete discharge of all Our liability.

16. Premium Before Cover Warranty

- a. The premium due must be paid to the Us (or the intermediary through whom this Policy or Bond was effected) on or before the effective date ("the effective date") or the renewal date of the coverage. Payment shall be deemed to have been effected to Us or the intermediary when one of the following acts takes place:
 - i. Cash or honoured cheque for the premium is handed over to Us or the intermediary;
 - ii. A credit or debit card transaction for the premium is approved by the issuing bank;
 - iii. A payment through an electronic medium including the internet is approved by the relevant party;
 - iv. A credit in favour of Us or the intermediary is made through an electronic medium including the internet.
- b. In the event that the total premium due is not paid to the Us (or the intermediary through whom this Policy or Bond was effected) on or before the inception date or the renewal date, then the insurance shall not attach and no benefits whatsoever shall be payable by Us. Any payment received thereafter shall be of no effect whatsoever as cover has not attached.
- c. Premium Payment
 - i. The payment of the premium when it is due will ensure the continuance of the Policy in force until the next premium is due;
 - ii. This Policy will be renewed upon the payment of the premium when it is due either on a monthly or annual basis as applicable and stated in the Policy Schedule unless prior written notice of cancellation has been given in accordance with General Condition 3 or the Policy has otherwise been terminated.

17. Sanction Limitation and Exclusion Clause

Notwithstanding any provision to the contrary within this Policy or any endorsement thereto, this insurance shall, in no case, be deemed to provide cover and 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 the Company 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.

18. Subrogation

The Insured Person shall at Our expense do and concur in doing and permit to be done all such acts and things as may be necessary or reasonably required by Us for the purpose of enforcing any rights and remedies or of obtaining relief or indemnity from other parties to which We shall be or would become entitled to or subrogated upon its paying for or making good any loss destruction or damage under this Policy whether such acts and things shall be or become necessary or required before or after their indemnification by Us.

CLAIMS PROCEDURE

- (a) Notice shall be given to Us as soon as possible but in any case within fourteen (14) days of the happening of any Injury in respect of which a claim is to be made.
- (b) The Insured Person or other claimant shall at their or other claimant's own expense furnish to Us such certificates information, blood tests, medical reports and evidence as We may reasonably require.
- (c) The Insured Person shall as soon as possible after the happening of any Injury in respect of which a claim is to be made procure and follow medical advice from a duly Registered Medical Practitioner.
- (d) The Insured Person or other claimant shall at their or other claimant's own expense furnish to Us such certificates information, blood tests, medical reports and evidence as We may reasonably require.
- (e) The Insured Person as often as required shall submit to medical examination on behalf of Us at Our own expense.
- (f) We shall in the case of the Insured Person's Death be entitled to have a post mortem examination at Our own expense.

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 this Policy is automatic and no further action is required from You or the Insured Person. 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 HL Assurance Pte. Ltd. or visit the GIA or SDIC websites (www.gia.org.sg or www.sdic.org.sg).

CARING FOR OUR CUSTOMERS

HL Assurance Pte. Ltd. will make every effort to provide a high level of service expected by all Our policyholders. If on any occasion Our service falls below the standard of Your expectation, the procedure below explains what You can do:

Your first point of contact should always be Your insurance agent or broker. Alternatively, You may submit Your feedback to the manager in charge of the matter You are raising.

We will acknowledge receipt of Your feedback within seven (7) working days whilst We look into the matter You have raised. We will contact You for further information if required within seven (7) working days and provide You with a full reply within fourteen (14) working days.

If the outcome of Your complaint is not handled to Your satisfaction, You can write to:

Chief Executive Officer
HL Assurance Pte. Ltd.
11 Keppel Road #11-01
ABI Plaza
Singapore 089057

We will respond to Your appeal within fourteen (14) working days. If you are dissatisfied with the CEO's respond, We will refer You to a dispute resolution organization, Financial Industry Disputes Resolution Centre Ltd (FIDReC) which is an independent organization. FIDReC's contact details are:
Financial Industry Disputes Resolution Centre Ltd
36 Robinson Road #15-01
City House
Singapore 068877

Telephone : (65) 6327 8878
Fax : (65) 6327 8488
Email : info@fidrec.com.sg
Website : www.fidrec.com.sg

Important – Please remember to quote Your Policy number / reference in Your communication.