



Note: This English Translation is strictly for information without any legal authority. Only the original Thai Language Conditions are valid for reference.

**Coverage Agreement
 Personal Accident Policy PA.2**

If anything specified in this clause is contrary to the policy, this clause shall prevail.

All other term and conditions of this Policy remain unaltered.

The Company will pay for the Covered Person as per the following conditions.

DEFINITIONS

Any Loss or Injury	refers to bodily injury suffered by the Covered Person as a result of an Accident and causes death, dismemberment, loss of sight, disability, or requires the Covered Person to be medically treated.
Loss of sight	refers to complete blindness, which is permanently incurable.
Total Permanent Disability	refers to disability to the extent of being unable to perform the normal duty in the covered person's regular occupation or any other occupation totally and permanently.
Partial Permanent Disability	refers to disability to the extent of being unable to perform the normal duty in the Insured's regular occupation permanently but being able to perform other work for remuneration.

COVERAGE:

This insurance covers any losses or injuries to the Insured arising from bodily injury, which is caused by an accident, resulting to loss of life, dismemberment, loss of sight or permanent disability within 180 days from the date of the accident or the injury causes the Insured to receive continuous medical treatment as an in-patient in hospital and loss of life occurs later because of such injury, the Company will pay compensation in accordance with the sum insured stated in the Schedule as follows:

1	100% of sum insured	for loss of life
2	100% of sum insured	for permanent disability which continues not less than 12 months after the accident or if there is any medical indication that the Insured suffers a permanent disability.
3	100% of sum insured	for loss of both hands from the wrist joint or both feet from the ankle joint, or loss of sight for both eyes.
4	100% of sum insured	for loss of one hand from the wrist joint and one foot from the ankle joint.
5	100% of sum insured	for loss of one hand from the wrist joint and loss of sight in one eye.
6	100% of sum insured	for loss of one foot from the ankle joint and loss of sight for in eye.
7	60% of sum insured	for loss of one hand from the wrist joint.
8	60% of sum insured	for loss of one foot from the ankle joint.
9	60% of sum insured	for loss of sight in one eye.
10	50% of sum insured	for permanent loss of hearing or speech.
11	15% of sum insured	for permanent loss of hearing in one ear.
12	25% of sum insured	for loss of a thumb (two joints).
13	10% of sum insured	for loss of a thumb (one joint)
14	10% of sum insured	for loss of an index finger (three joints)
15	8% of sum insured	for loss of an index finger (two joints)
16	4% of sum insured	for loss of an index finger (one joint)
17	5% of sum insured	for loss of each finger (not less than two joints) other than a thumb and an index finger
18	5% of sum insured	for loss of a big toe
19	1% of sum insured	for loss of each toe (not less than one joint) other than a big toe

For any one event, the Company shall compensate only one item under the Schedule, being that item has the highest limit except in the case of loss of fingers or toes according to items No. 12 to 19 and where the Insured cannot claim on items 1 to 9. In any event or policy period, all items combined cannot exceed the limit of liability stated in the Schedule.

In case a **Partial Permanent Disability** is incurred by the Insured which could not be compensated under item no.2 to 19, and it is not either Loss of Taste or Loss of Smell, the Company will compensate in accordance with the opinion of the Company's appointed doctor and in no case will compensation exceed 50% of the sum insured specified in the Schedule.

In the aggregate, the total compensation for this insuring agreement cannot exceed the maximum sum insured stated on the policy schedule. If the Company has not paid up to such maximum amount of sum insured, the remaining benefit is still valid until the expiry of the policy period.



CLAIMING FOR DEATH BENEFIT

The beneficiary must submit the following documents at their own expense within 30 days of the date of loss.

1. Completed claim form.
2. Death Certificate
3. A copy of the autopsy report, certified by authorized personnel
4. A copy of the police report, certified by authorized officer.
5. A copy of the Identity Card and the House Registration of the Insured stating the Insured is "deceased".
6. A copy of the Identity Card and the House Registration of the beneficiary.

CLAIMING FOR PERMANENT DISABILITY OR PERMANENT DISMEMBERMENT

The Insured must submit the following documents at their own expense within 30 days of diagnosis by a physician that the insured suffers from total permanent disability or permanent dismemberment.

1. Completed claim form
2. Attending Physician's Summary certifying the Insured has suffered from permanent disability or permanent dismemberment.

Nevertheless, non-compliance within the specified time shall not jeopardize the right to claim if it can be proved that there is reasonable explanation why a claim could not be made in a timely manner and that the claim was filed as soon as possible.

EXCLUSIONS

This insurance does not cover

1.1 Any Loss or Injury arising from/ or in consequence of the following causes:

- 1.1.1 Action of the Insured while under the influence of alcohol, addictive drugs, narcotic drugs to the extent of being unable to control one's mind. The term "under the influence of alcohol" in case of having a blood test refers to a blood/alcohol level of 150mg percent and over.
- 1.1.2 Suicide or attempted suicide or self-inflicted injury.
- 1.1.3 Infections except pyogenic infections, tetanus, or rabies from a wound or cut suffered as a result of an accident.
- 1.1.4 Medical or surgical treatment, except the necessary treatment resulting from injuries covered under this Insurance Policy and performed within the period that is specified in the policy schedule.
- 1.1.5 Miscarriage and abortion.
- 1.1.6 Dental or root canal treatment except the necessary treatment resulting from accidents covered under this Insurance Policy performed within 7 days from the first accident date.
- 1.1.7 Implementation or chances of dentures, crowns and prosthodontics.
- 1.1.8 Food Poisoning.
- 1.1.9 Back pain resulting from disc herniation, spondylolisthesis, degenerative disc disease, spondylosis and disc defects or pars interarticularis (spondylosis), except fracture or dislocation of spine resulting from accident.
- 1.1.10 War (whether declared or not), invasion, act of foreign enemies, civil war, revolution, insurrection, civil commotion, popular rising against the government, riot, strike.
- 1.1.11 Terrorism.
- 1.1.12 Ionizing radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel.
- 1.1.13 Radioactive toxic explosives or other hazardous property of any explosive nuclear assembly or nuclear component thereof.

1.2 Loss or Injury which occurs :

- 1.2.1 While the Insured is racing of all kinds of car or boat, horse racing, ski racing including jet-ski, skate racing, boxing, parachute jumping (except for the purpose of life saving), boarding or traveling in a hot-air balloon, gliding, bungee jumping, or diving with oxygen tank and breathing equipment under water.
- 1.2.2 While the Insured is riding or traveling on a motorcycle.
- 1.2.3 While the Insured is boarding or traveling in an aircraft which has no license for carrying passengers or does not operate as a commercial aircraft.
- 1.2.4 While the Insured pilots or works as a crew in any aircraft.
- 1.2.5 While the Insured is taking part in a brawl or taking part in inciting a brawl.
- 1.2.6 While the Insured is committing a felony or while the Insured is being arrested, under arrest, or escaping the arrest.
- 1.2.7 While the Insured serves as a soldier, police, or a volunteer and participates in war or crime suppression. If the time served is more than 30 days, the Company shall refund the premium from the date of service until such service is ended. After such time, the Insurance shall become effective again until the expiry date on the Schedule.

In case the wordings in this section contradict the general policy wordings, the wordings in this section will be valid.

All other term and conditions of this Policy remain unaltered.



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Remark The English language used in this policy is merely a translation of Thai Version.