Generali Insurance Malaysia Berhad
Reg No: 197501002042 (23820-W)
Generali Customer Service Centre
Level 1, Menara Generali,
27 Jalan Sultan Ismail, 50250 Kuala Lumpur, Malaysia.
Tel: 1 300 13 2121 or +603 3007 2121 Email: customer.service.gi@generali.com.my
www.generali.com.my

Member of PIDM
The benefit (s) payable under eligible product is protected by PIDM up to limits. Please refer to PIDM's TIPS Brochure or contact Generali Insurance Malaysia Berhad or PIDM (visit www.pidm.gov.my)

Generali Insurance Malaysia Berhad is licensed under the Financial Services Act 2013 and regulated by Bank Negara Malaysia

GEN PA ZENPROTECT

IMPORTANT NOTICE

1. This is Your **Gen PA ZenProtect** Policy ("the Policy"). This Policy is issued by Us in consideration of the premium paid or to be paid to Us as specified in the Policy Schedule and contains the terms and conditions of the contract of insurance as agreed between You and Us. Please read this Policy carefully to ensure that You understand the terms and conditions and that the insurance You require is being provided. If You have any questions after reading this Policy, please contact Us or Your insurance advisor. If there are any changes in Your circumstances which may affect the insurance provided, please notify Us immediately, otherwise You may not receive the full benefits of this Policy.

2. Please keep this Policy in a safe place. In case of renewal and/or Policy condition amendment, We will send You a new Policy Schedule or endorsement only. If at any time You would like a replacement for this Policy or a copy of this Policy in Bahasa Malaysia, please contact Us and We will be happy to provide one.

3. In deciding to issue this Policy, We have relied on the answers and information given when application was made for this Policy. We have also relied on other disclosures, if any, made to Us from the time the application was made up to the time this Policy was issued. Those answers, information and other disclosures, if any, therefore, also form part of the contract of insurance between You and Us.

4. If You had applied for this Policy wholly for purposes unrelated to Your trade, business or profession, You had a duty to take reasonable care not to make a misrepresentation in answering the questions or providing the information requested when You applied for this Policy. You should have answered the questions and provided the information fully and accurately. Failure to have taken reasonable care in answering the questions or providing the information requested may result in avoidance of this Policy, refusal or reduction of any claim made by You under this Policy, change of terms or termination of this Policy in accordance with the relevant law. You were also required to disclose any other matter that You knew to be relevant to Our decision in accepting the risks and determining the rates and terms to be applied.

5. If at any time the law requires Us to collect from You any tax in connection with the insurance provided or the premium You have paid, please note that We will be entitled to recover from You such tax if it has not yet been paid.

6. If, for any reason, You are unhappy with the service You have received from Us, You may take the following steps:

   6.1 In the first instance, please write to Our Customer Service Department at Our current address.

   6.2 Alternatively, You can email Us at: customer.service.gi@generali.com.my.

7. If You are still not satisfied with the way any issue has been handled, You may:

   7.1 Refer matters concerning claims to:

   Financial Markets Ombudsman Service
   (formerly known as Ombudsman for Financial Services)
   Company No: 200401025885
   Level 14, Main Block, Menara Takaful Malaysia,
   No. 4, Jalan Sultan Sulaiman,
   50000 Kuala Lumpur.
   Tel: +603 2272 2811
   Website: www.fmos.org.my

   7.2 Submit Your complaints or feedback:
   BNMLINK
   4th Floor, Podium Bangunan AICB, No. 10, Jalan Dato' Onn, 50480 Kuala Lumpur.
   Tel: 1-300-88-5465
   (Overseas: +603 2174 1717)
   BNMLINK Webpage : bnm.gov.my/BNMLink

8. In respect of any communication between You and Us including, without limitation, the giving of any notice or demand under this Policy:

   a. You are to –
      a) write to Our Customer Service Department at Level 1, Menara Generali, 27 Jalan Sultan Ismail, 50250 Kuala Lumpur, Malaysia; or
      b) e-mail Us at customer.service.gi@generali.com.my; and
      c) call Us at 1 300 13 2121 or +603 3007 2121

PZP/P68/07/2026

b. We will –
   a) write to You at the address given to Us in Your proposal for this Policy or at Your address last notified to Us in writing;
   b) email You at the email address given to Us in Your proposal for this Policy or at Your email address last notified to Us in writing; or
   c) communicate with You by mobile phone or any form of electronic messaging We may consider fit at a contact number or electronic address which You have given to Us;

If sent by post, the notice or demand, if correctly addressed, will be deemed to have been received on the seventh (7th) day after posting. If sent by email, mobile phone or any form of electronic messaging, the notice or demand will be deemed to have been received on the day it was sent.

PART A - ELIGIBILITY AND SCOPE

1. Eligibility

1.1 To be a Policyholder or an Insured Person under this Policy, one must be:

(a) a Malaysian citizen;

(b) a Permanent Resident of Malaysia

(c) a holder of a work permit, employment pass, dependent pass, long-term social visit pass, or student pass issued by the relevant authorities in Malaysia which is valid throughout the Period of Insurance and who is legally residing in Malaysia

1.2 In addition to the requirements in Paragraph 1.1 above, one must also satisfy the following age requirements:

(a) to be a Policyholder, You must be at least eighteen (18) years old;

(b) to be an Insured Person, one must be at least eighteen (18) years old and at most sixty-five (65) years old at the time of First Inception and Cover for an Insured Person is renewable up to age seventy (70);

(c) Your children must be at least thirty (30) days old and, at most eighteen (18) years old, or if pursuing full time education in a recognized educational institution of higher learning, at most twenty-three (23) years old.

2. Coverage & Termination

2.1. The insurance provided under this Policy in respect of an Insured Person begins on the Effective Date of the Policy and ends at the end of the Period of Insurance in respect of that Insured Person.
2.2. The insurance provided under this Policy in respect of an Insured Person shall automatically terminate on the earliest of the following dates:

(a) upon that Insured Person's death;

(b) upon expiry of the Period of Insurance in respect of that Insured Person; or

(c) on the renewal date after the date on which the Insured Person ceases to be eligible in accordance with Paragraph 1 above.

3. Area and Duration of Coverage

3.1. Geographical Coverage under this Policy is worldwide, **subject to the exclusions, conditions, and territorial limits specified in this Policy**.

3.2 An Insured Person Travelling Overseas will be fully covered under this Policy provided that the trip is wholly within the Period of Insurance and does not exceed ninety-five (95) consecutive days from the commencement date of the trip.

PART B - DEFINITIONS

Unless expressly stated otherwise, the following words and terms have the following meanings in this Policy:

TERMS		MEANING
1	**Accident / Accidental**	A sudden, unintentional, unexpected, unforeseen and fortuitous event caused by external, violent and visible means that occurs at an identifiable time and place and is, independently of any other cause, the sole cause of Injury.
2	**Accidental Death**	Death by reason of Accident.
3	**Accidental Permanent Disablement**	Permanent Disablement by reason of Accident.
4	**Child / Children**	Children must be at least thirty (30) days old and, at most eighteen (18) years old, or if pursuing full-time education in a recognized educational institution of higher learning, at most twenty-three (23) years old.
5	**Complete Fracture**	A fracture in which the bone is broken completely across and no connection is left between the pieces.
6	**Effective Date**	The effective date stated in the Policy Schedule and means the first day of the Period of Insurance.
7	**Endorsement**	An endorsement, if any, annexed to this Policy modifying, varying or adding any terms or conditions contained in this Policy.

8	**Extreme Sports or Activity**	Any sport or activity involving a high degree of danger or risk of Injury; Extreme Sports or Activities include, but are not limited to, big wave surfing, canoeing down rapids, cliff-jumping, horse- jumping, Ultramarathons, stunt-riding and other activities where a high level of physical exertion and/or highly specialised gear is required; Extreme Sports or Activities excludes tourist activities accessible to the general public and conducted under the supervision of qualified licensed personnel of a registered tour operator.
9	**First Inception**	The first day of the first Policy Year of this Policy or Cover in respect of a specific Insured Person.
10	**Hairline Fracture**	A mere cracks in the bone.
11	**Hospital**	Any premises and/or institution lawfully operating twenty-four (24) hours a day, used or intended to be used for the reception, lodging, treatment, medical supervision, diagnosis, surgery, nursing service and care of persons who require medical attention or suffer from any disease that requires hospitalization, but excluding any premises and/or institution used or intended to be used solely for healthcare facility on an outpatient basis, nursing care centre, convalescent, geriatric care, mental care, rehabilitation or extended care, and/or the care or treatment of alcoholics or drug addicts.
12	**Hospitalised / Hospitalisation**	Admission into and confinement at a Hospital as a registered inpatient as a result of an Accident; such confinement must have been upon the recommendation and under the care of a Physician.
13	**Hospital Patient**	A person who is Hospitalised and is necessarily and continuously confined to a Hospital for more than six (6) hours.
14	**Immediate Family**	In respect of an Insured Person, means that Insured Person’s spouse, children and parents.
15	**Injury**	Bodily injury caused solely and directly by an Accident, independent of all other causes, and excludes any illness, disease or medical disorder.
16	**Insured Person**	Any person named as an Insured Person in the Policy Schedule, including the Policyholder if so named.
17	**Limb**	Hand at or above the wrist, or foot at or above the ankle, and if Loss of Limb includes total and Permanent Loss of use of the hand, arm or leg.
18	**Loss**	In terms of the Scale of Compensation under Benefit 2, “Loss” means: (a) physical separation of that body part and includes total and Permanent loss of use of that body part; or (b) total and irrecoverable loss of a specified ability which cannot be resolved or remedied by surgery or other treatment due to Injury. In other terms, “Loss” refers to any unrecoverable, unanticipated and non-recurring removal of, or decrease in the value of, property or belongings.
19	**Loss of Sight**	Total and irrecoverable Loss of eyesight rendering the Insured Person absolutely blind and beyond remedy by surgical or other treatment.
20	**Medically Necessary**	A Treatment or medical service is Medically Necessary if it is: (a) consistent with the diagnosis and customary medical Treatment for an Injury; (b) in accordance with standards of good medical practice, consistent with current standard of professional medical care, and of proven medical benefits; (c) not for the convenience of the Insured or the Physician, and unable to be reasonably rendered out of Hospital (if admitted as an inpatient); and (d) not of an experimental, investigational or research nature, preventive or screening nature.
21	**Other Fracture**	Referred to any fracture other than a Simple Fracture.
22	**Period of Insurance**	The period specified on the Policy Schedule or in any Endorsement.
23	**Permanent**	Lasting a period of twelve (12) consecutive months or more from the date of the Accident.
24	**Permanent Disablement**	A Permanent Injury which entirely prevents an Insured Person from engaging in gainful employment of any and every kind and for which there is no hope of recovery.
25	**Physician**	A medical practitioner (other than the Insured Person and a member of his/her Immediate Family or relatives) qualified by a medical degree and duly licensed and registered to practice western medicine and who, in rendering treatment, is practising within the scope of his/her licensing and training in the geographical area of practice.
26	**Policy**	The following documents: (a) this Policy document, (b) Schedule of Benefits, and (c) Any Endorsements

27	**Pre-existing Condition**	Any physical or mental defect or infirmity, illness, disease, bacterial or viral infections even if contracted by accident that the Insured Person has reasonable knowledge of; an Insured Person may be considered to have reasonable knowledge of a Pre-existing Condition where the condition is one for which: (a) the Insured Person has received or is receiving treatment; (b) medical advice, diagnosis, care or treatment has been recommended; (c) clear and distinct symptoms are or were evident; or (d) its existence would have been apparent to a reasonable person in the circumstances.
28	**Premium**	The specified amount of payment required to be paid to Us to provide Cover under this Policy for the Benefits specified in the Schedule of Benefits.
29	**Public Transport**	Transport services such as a licensed bus, taxi, or other legal, licensed and scheduled ride-hailing services available for use by the general public as fare-paying passengers at recognized public stops/stations, and which services are not obtained through a private arrangement basis; this excludes all modes of transportation which are privately arranged, chartered or arranged as part of a tour, even if the services are regularly scheduled.
30	**Reasonable and Customary Charges**	Any charge for Medically Necessary medical care and/or Treatment which: (a) is considered reasonable and customary to the extent that it does not exceed the general level of charges made by others of similar standing in the locality where the charge is incurred when furnishing like or comparable Treatment, services or supplies to an individual of the same sex and of comparable age for a similar Injury; (b) is in accordance with accepted medical standards and practice; and (c) could not have been omitted without adversely affecting the Insured Person's medical condition. In Malaysia, Reasonable and Customary Charges shall be deemed to be those laid down in the Malaysian Medical Association's prevailing Schedule of Fees.
31	**Reimbursement Basis**	Payment by Us only after a particular expense has first been paid for by You and duly proved to Us.
32	**Robbery**	The act or attempt of taking something of value from an Insured Person illegally by force, threat of force, intimidation or fear, and with the intent to permanently deprive the Insured Person of that something of value.
33	**Schedule**	The document which provides details of: (a) Yourself, and (b) any terms and conditions that are specific to your contract
34	**Simple Fracture**	A fracture in which there is a basic and uncomplicated break in the bone and which in the opinion of a Physician requires minimal and uncomplicated medical treatment.
35	**Snatch Theft**	The act of taking Personal Effects from an Insured Person illegally by abrupt force and fleeing from the scene with the intention of permanently depriving the Insured Person of that Personal Effects; such act must have happened to the Insured Person on a public walkway, on Public Transport or at a public place outside the Insured Person's place of residence or work.
36	**Sum Insured**	The sum specified for each Benefit stipulated in the Schedule of Benefits which is the maximum amount We will pay for any approved claim.
37	**Surgery / Surgical Procedure**	Any of the following medical procedures: (a) incision, excision or electrocauterisation into or of any organ or body part, except for dental services; (b) repair, revision or reconstruction of any organ or body part; (c) reduction by manipulation of a fracture or dislocation; (d) use of endoscopy to remove a stone or object from the larynx, bronchus, trachea, esophagus, stomach, intestine, urinary bladder, or urethra.
38	**Travelling Overseas**	A round-trip not exceeding ninety-five (95) consecutive days to any destination outside Malaysia for leisure or business purposes provided that the entire trip takes place within the Period of Insurance.
39	**Treatment**	Surgery or medical procedures (other than for diagnostic purposes) carried out by a Specialist strictly for Injury and excludes any treatment for illness or disease.
40	**Ultramarathon**	Any footrace longer than the traditional marathon length of 42.195 kilometres.

41	**Unlawful Act**	Any act which is an offence or prohibited by the law or rules of the geographical area in which the act is committed this includes but is not limited to: driving motorised vehicles without appropriate and valid license, exceeding any stipulated speed limit, driving whilst under the influence of alcohol, generally any non-conformance or breach of the Road Traffic Act or any applicable laws and regulations, and participation in or acting as an accessory to any crime or attempted crime or offence.
42	**We/Us/Insurer/ Generali**	Generali Insurance Malaysia Berhad.
43	**You/Your/Yourself/Policyholder**	The person(s) named as the Policyholder in the Policy Schedule and/or to whom this Policy is issued.

PART C - BENEFITS

Gen PA ZenProtect - Main Cover

Benefit 1 – Accidental Death

1. We will pay the amount shown in the Policy Schedule for Accidental Death if, during the Period of Insurance, an Insured Person sustains Injury which results in the death of that Insured Person within 365 days of the Injury.

2. If the Accident resulting in the Accidental Death of an Insured Person satisfies the criteria in Benefit 9, in respect of that Accidental Death, this Benefit 1 will not be available and only Benefit 9 will be available

Benefit 2 – Accidental Permanent Disablement

1. We will pay the percentage of the Sum Insured shown in the Scale of Compensation for Accidental Permanent Disablement Benefits corresponding to any Permanent Disablement sustained by an Insured Person if, during the Period of Insurance, that Insured Person sustains Injury which results in the Permanent Disablement (total or partial) of that Insured Person within 365 days of the Injury.

2. If the Accident resulting in any Accidental Permanent Disablement for which 100% of the Sum Insured is payable satisfies the criteria in Benefit 9, in respect of that Accidental Permanent Disablement, this Benefit 2 will not be available and only Benefit 9 will be available.

SCALE OF COMPENSATION

SCALE OF COMPENSATION FOR ACCIDENTAL PERMANENT DISABLEMENT BENEFITS	
Description of Permanent Disablement	**Percentage of Sum Insured**
1. Permanent total disablement	100%
2. Loss of two Limbs	100%
3. Total Loss of Sight of one eye or both eyes	100%
4. Total paralysis	100%
5. Complete and incurable insanity	100%
6. Loss of hand at or above the wrist	100%
7. Loss of foot at or above the ankle	100%
8. Loss of Sight of eye except perception of light	50%
9. Loss of lens of eye	50%
10. Loss of four fingers and thumb of one hand	50%
11. Loss of four fingers of one hand	40%
12. Loss of thumb - both phalanges - one phalanx	 25% 10%
13. Loss of index finger - three phalanges - two phalanges - one phalanx	 15% 10% 5%
14. Loss of middle finger - three phalanges - two phalanges - one phalanx	 10% 7% 3%
15. Loss of ring finger - three phalanges - two phalanges - one phalanx	 10% 7% 3%
16. Loss of little finger - three phalanges - two phalanges - one phalanx	 10% 7% 3%
17. Loss of metacarpals - first or second - third, fourth and fifth	 3% 2%
18. Loss of toes - all - big, both phalanges - big, one phalanx - other than big, each toe	 18% 5% 2% 2%

19.	Permanent and Total Loss of hearing - both ears - one ear	 75% 20%
20.	Permanent and Total Loss of speech	50%

Benefit 3 – Accidental Medical Expenses
We will reimburse You the Reasonable and Customary Charges for Medically Necessary medical, clinic or hospital Treatment expenses, including all daily room and board expenses incurred by an Insured Person while he/she is a Hospital Patient.
For any one Insured Person, We will not pay more than the total amount shown in the Schedule for "Accidental Medical Expenses", for any one Accident.

Benefit 4 – Hospital Income
We will pay the amount stated in the Schedule of Benefits for each completed twenty-four (24) hours an Insured Person is Hospitalised for Treatment as a result of an Accident, up to a maximum of one hundred and eighty (180) days in any one Policy Year.

Benefit 5 – Financial Obligations
We will in the event of a claim admissible under Benefit 1 – Accidental Death and Benefit 2 – Accidental Permanent Disablement, where the compensation payable is fifty percent (50%) or more of Sum Insured, additionally pay the monthly repayment instalments for a period not exceeding six (6) months in respect of the outstanding balance of Your housing loan, car loan and/or the outstanding balance of the Your credit card account at the time of the accident.

The maximum amount payable for this benefit is maximum up to the Sum Insured stated in the Schedule of Benefits.

If any of the loan(s) or credit card account is in joint names, Our liability is limited to the proportionate part of the monthly repayment instalments attributable to You.

Benefit 6 – Funeral Allowance
We will pay the funeral allowance stated in the schedule in the event of death of the insured person resulting from an accident.

<u>Gen PA ZenProtect - Optional Benefit / Rider</u>

<u>ACTIVE LIFESTYLE BUNDLE</u>

Benefit 7 – Bone Fracture
Fractures subject to a maximum amount stated in the Schedule of Benefits as below Scale.
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Item No	Table of events	The Benefits
1.	Neck, Skull or Spine (Complete Fracture)	100%
2.	Hip	75%
3.	Jaw, Pelvis, Leg, Ankle or Knee (Other Fracture)	50%
4.	Cheekbone, Shoulder or Hairline Fracture of skull or spine	30%
5.	Arm, Elbow , Wrist or Ribs (Other Fracture)	25%
6.	Jaw, Pelvis, Leg, Ankle or Knee (Simple Fracture)	20%
7.	Nose or Collarbone	20%
8	Arm, Elbow, Wrist or Ribs (Simple Fracture)	10%
9.	Finger, Thumb, Foot, Hand or Toe	7.5%

The total amount payable in respect of the item 1-9 under Fractured Bones due to the same Injury is arrived at by adding together the various percentages of each of the item but shall not exceed one hundred percent (100%) of the Sum Insured shown in the Schedule of Benefits against Fractured Bones and there shall be no further liability under the Policy in respect of the same Event sustained thereafter.

This benefit will not be payable for any Insured Person who has been diagnosed as having osteoporosis prior to the date on which they were first covered under this Policy. If any Insured Person is diagnosed as having osteoporosis after the date on which they were first covered under this Policy, We will only pay this benefit for the first Simple Fracture, Hairline Fracture or Other Fracture sustained, and no further payments will be made under this benefit.

Benefit 8 – Physiotherapy Treatment
We will reimburse the expenses, including medication, incurred for physiotherapy treatment if the Insured Person suffers an Injury as a result of an Accident, provided that supporting receipts are submitted. Physiotherapy Treatment shall mean treatment by a registered physiotherapist, provided that the treatment is first recommended or sought from a Physician.

Benefit 9 – Double Indemnity
1. We will pay double the Principal Sum Insured if an Accident results in an Insured Person's Accidental Death or an Insured Person sustaining any Accidental Permanent Disablement for which one hundred percent (100%) of the Sum Insured is payable according to the Scale of Compensation above, and such Accident occurred in the following circumstances:

   1.1 whilst the Insured Person was travelling on Public Transport;

   1.2 whilst the Insured Person was Travelling Overseas; or

   1.3 as a result of the Insured Person being a victim of Snatch Theft or Robbery;

2. In respect of an Insured Person, only one claim per Accident may be made for this Benefit 9 regardless of the circumstances of the Accident.

3. If this Benefit 9 is payable in respect of any Accidental Death or Accidental Permanent Disablement, Benefit 1 and Benefit 2 will not be available.

Exclusions applicable to Benefit 9

1. This Benefit 9 is not available if the Insured Person has been out of Malaysia for more than ninety-five (95) days in a Policy Year or if the Accident, Accidental Death or Accidental Permanent Disablement occurred:
   - 1.1 in a country where the Insured Person has permanent residence;
   - 1.2 in a country where the Insured Person, if Malaysian, is legally employed; or
   - 1.3 in the Home Country of the Insured Person, if non-Malaysian

<u>CHILDREN BUNDLE</u> (FOR ONE CHILD)

Benefit 10 – Bone Fracture

Fractures subject to a maximum amount stated in the Schedule of Benefits as below Scale.

Item No	Table of events	The Benefits
1.	Neck, Skull or Spine (Complete Fracture)	100%
2.	Hip	75%
3.	Jaw, Pelvis, Leg, Ankle or Knee (Other Fracture)	50%
4.	Cheekbone, Shoulder or Hairline Fracture of skull or Spine	30%
5.	Arm, Elbow , Wrist or Ribs (Other Fracture)	25%
6.	Jaw, Pelvis, Leg, Ankle or Knee (Simple Fracture)	20%
7.	Nose or Collarbone	20%
8	Arm, Elbow, Wrist or Ribs (Simple Fracture)	10%
9.	Finger, Thumb, Foot, Hand or Toe	7.5%

The total amount payable in respect of the item 1-9 under Fractured Bones due to the same Bodily Injury is arrived at by adding together the various percentages of each of the item but shall not exceed one hundred percent (100%) of the Sum Insured shown in the Schedule of Benefits against Fractured Bones and there shall be no further liability under the Policy in respect of the same Event sustained thereafter.

This benefit will not be payable for any Insured Person who has been diagnosed as having osteoporosis prior to the date on which they were first covered under this Policy. If any Insured Person is diagnosed as having osteoporosis after the date on which they were first covered under this Policy, We will only pay this benefit for the first Simple Fracture, Hairline Fracture or Other Fracture sustained, and no further payments will be made under this benefit.

Benefit 11 – Education Allowance

We will pay the "Education Allowance" specified in the Schedule if either one of the Insured Person's parents or legal guardian suffers Accidental Death or sustains any Accidental Permanent Disablement for which one hundred percent (100%) of the Sum Insured is payable according to the Scale of Compensation above.

Benefit 12 – Accidental Dental Benefit

We will pay the Sum Insured specified in the Schedule of Benefits for "Accidental Dental Treatment" for the Insured Person's actual dental treatment charges for replacement of or repairs to his/her sound natural teeth damaged due to the Accident, but excluding first teeth and dentures, provided that the Insured Person had consulted a Registered Dental practitioner at a Clinic or Hospital within seventy-two (**72) hours** or **as soon as reasonably possible, but not later than seven (7) days** following the date of the Accident and follow up dental treatments within thirty (30) days thereafter. However, payment per Accident shall not exceed the total "Accidental Dental Treatment" specified in the Schedule of Benefits.

Benefit 13 – Travel Expenses Benefits

We will pay up to the Sum Insured specified in the Schedule of Benefits for travel expenses incurred by the Insured Person's Parent or Guardian in the event that the Insured Person is hospitalized at a Hospital located within Malaysia as a result of an Accident.

<u>PROVISIONS</u> (these should be read in conjunction with Your Schedule)

1. Upon death of the Insured Person, payment shall be made under Benefit 1 only and no payment shall be made under Benefit 2.
2. The total sum payable under Benefit 2 shall not exceed the amount provided for under Benefit 2.
3. Upon the payment of either the benefit under Benefit 1 or the maximum sum under Benefit 2, We shall be discharged from any further claim, except for expenses incurred under other Benefits arising from the same Injury or Accident.

<u>PART D – EXTENSIONS</u>

Subject to the General Conditions and General Exclusions of this Policy, the Benefits in this Policy, where applicable, are extended to cover the following circumstances:

1. **Amateur Sports**
   Accidental Death or Injury due to participation in any amateur sport other than in any kind of speed contests.

2. **Disappearance**
   Disappearance following an Accident where the Insured Person is still not found after a period of one (1) year from the day of the Accident is reported, and there is sufficient evidence produced to Us for Us to conclude that the Insured Person has died due to the Accident.

3. **Drowning**
   Death as a result of drowning.

4. **Exposure**
   Death or Injury of the Insured Person as a result of exposure to the elements as a result of an Accident; this includes exposure to extreme temperatures, environmental conditions or dangerous substances.

5. **Food and/or Beverage Poisoning**
   Death or Injury caused by food or beverage poisoning.

6. **Hijack**
   Death or Injury as a result of the hijacking or attempted hijacking of the Public Transport in which the Insured Person was travelling on as a passenger.

7. **Motorcycling**
   Death or Injury whilst riding a motorcycle, motor scooter, moped or mechanically assisted pedal cycle (except as a result of racing, speed tests/trials or competitions).

8. **Murder and Assault**
   Death or Injury as a result of unprovoked physical assault, murder or attempted murder.

9. **Snake / Insect Bites (excluding Mosquito Bites)**
   Bodily injury resulting from harmful insect bites, snake bites, or animal bites. However, this extension excludes mosquito bites, bug bites, and any disease introduced by a vector.

10. **Suffocation due to Smoke, Fumes or Poisonous Gas**
    Death or Injury as a result of suffocation caused by smoke, fumes or poisonous gas

<u>PART E – GENERAL EXCLUSIONS (APPLICABLE TO THE WHOLE POLICY)</u>

We will not pay for claims arising directly or indirectly from, in respect of, or caused by:

1. any Unlawful Act of an Insured Person (except minor traffic-related offences) or his willful exposure to danger (other than in an attempt to save human life), intentional self-Injury, suicide or attempted suicide, while sane or insane;

2. involvement in any illegal, criminal or terrorist acts or activities;

3. any form of outbreak or a series of a contagious disease including, but not limited to, any form of Coronavirus, severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), or any mutation or variation thereof (“the Outbreak”); this exclusion also applies to any claim, loss, liability, cost or expense of whatsoever nature directly or indirectly arising from, contributed to or by, or resulting from:
   3.1 any fear or threat (whether actual or perceived) relating to the Outbreak; or
   3.2 any action taken to comply with governmental laws, regulations or directive issued in relation to the Outbreak
   and/or any action taken to control, prevent or suppress the Outbreak.

4. any Pre-existing Conditions;

5. illness, disease, bacterial or viral infections even if contracted by accident, except bacterial infection that is the direct result of an accidental cut or wound;

6. medical or surgical treatment except where such treatment is rendered necessary by Injury within the scope of this Policy;

7. any treatment related to cosmetic surgery for purposes of beautification irrespective if such treatment is rendered as a result of burns;

8. venereal disease, AIDS (Acquired Immunisation Deficiency Syndrome), ARC (AIDS Related Complex) and HIV (Human Immunodeficiency Virus) infection;

9. pregnancy or childbirth;

10. effect or influence of drugs not prescribed by a Physician;

11. travel or flight in any vehicle or device for aerial navigation, other than solely as a passenger on a certificated passenger aircraft operated by a regularly established airline or any regularly scheduled, non-scheduled, special or chartered flight;

12. regular or temporary, military or police duties or fire service of any country;

13. declared or undeclared war or any act thereof, invasion, act of foreign enemy, hostilities, civil war, rebellion, revolution, insurrection, exercise of military or usurped power;

14. riot and civil commotion the Insured Person actively participates in;

15. ionising radiations or contamination by radioactivity from any irradiated nuclear fuel, or from any nuclear waste from the combustion of nuclear fuel;

16. radioactive toxic explosive, or other hazardous properties of any explosive nuclear assembly, or of its nuclear components;

17. engaging or participating in any professional sports;

18. any injury whilst engaged in:

18.1 motor rallies or competitions, or any other form of racing other than racing on foot;

18.2 mountaineering with the use of climbing equipment and/or ropes or outdoor rock climbing, hiking or trekking in remote, uncharted areas without any supervision of qualified licensed personnel/guide of a registered tour operator);

18.3 Extreme Sports or Activities;

18.4 pot-holing, private hunting trips, private white water rafting grade 4 or above;

18.5 any activity involving the Insured Person being airborne (whether suspended or not) except leisure parachuting, leisure bungee jumping, leisure sky diving and leisure hot air balloon rides;

18.6 any underwater activity beyond a depth of thirty (30) metres or in which breathing apparatus is used, except snorkeling and scuba diving up to a depth of thirty (30) metres only; or

19. any injury arising from these occupations or whilst performing these occupational activities:

19.1 working onboard any sea vessel whether as a crew member or otherwise;

19.2 working underground in a tunnel or quarry;

19.3 dealing in any way with explosives or hazardous substances; or

19.4 working at heights thirty (30) feet above the ground.

PART F – GENERAL CONDITIONS (APPLICABLE TO THE WHOLE POLICY)

1. Condition Precedent to Liability
You must observe and comply with the terms, provisions and conditions of this Policy in order for Us to be liable under this Policy. This means that if You do not do what You are supposed to do, or if You do what you are not supposed to do, under this Policy, We will not be liable under this Policy at all.

2. Change of Nature of Occupation
Unless otherwise specified in the Schedule of Benefits, this Policy will no longer have any effect if an Insured Person changes or alters the nature of his occupation or job unless the change is declared to Us and We agree to continue with the Policy.

3. Changes in Your Circumstances
You must notify Us as soon as possible in writing of any change in any Insured Person's circumstances which may affect this insurance. We will advise You if there is any additional Premium payable for Cover in respect of that Insured Person.

4. Fraud
If You, or anyone acting for You, make a claim under this Policy knowing the claim to be false or fraudulently inflated, We will not pay the claim and all Cover under this Policy will be forfeited.

5. Absolute Owner of the Policy
We shall unless otherwise expressly provided by endorsement on this Policy be entitled to treat You as the absolute owner of the Policy and shall not be bound to recognise any equitable or other claim to or interest in the Policy and the receipt by You (or the nominee, trustee or assignee as the case may be stated in the Policy) of insurance monies under this Policy shall be a sufficient and an effectual discharge of Our obligations.

6. Cancellation
We may cancel this Policy at any time by giving You seven (7) days' notice in writing; the Policy will be deemed cancelled upon the expiry of the seven (7) days' notice period. If no claim has been made and admitted by Us before the cancellation, We will refund the proportionate part of the Premium for the unexpired portion of the Period of Insurance of the Policy.

You may also cancel the Policy at any time by giving Us seven (7) days' notice in writing; the Policy will be deemed cancelled upon the expiry of the seven (7) day notice period. If no claim has been made and admitted by Us before the cancellation, We will retain the customary short period rate as shown in the following Short Period Scale for the time the Policy has been in force.

If a claim has been made by You and admitted by Us before the cancellation, there will be no refund of any premium.

Short Period Scale

Period Not Exceeding	% of Annual Rate
One (1) month	20
Two (2) months	30
Three (3) months	40
Four (4) months	50
Five (5) months	60
Six (6) months	75
Over six (6) months	100

7. **Payment of Benefits**
All Benefits payable under this Policy will be paid to You. Benefits payable in the event of Your death, will be paid to Your nominee, if any, in accordance with the relevant laws, or to Your legally appointed personal representative. Such payment shall be a full and final discharge to Us. All Benefits payable under this Policy are subject to the maximum limits stated in the Schedule of Benefits and shall be in Ringgit Malaysia only.

8. **Arbitration**
All differences arising out of this Policy shall be referred to the decision of an Arbitrator to be appointed in writing by the parties in difference or if they cannot agree upon a single Arbitrator to the decision of two Arbitrators one to be appointed in writing by each of the parties within one calendar month after having been required in writing so to do by either of the parties or in case the Arbitrators do not agree of an Umpire appointed in writing by the Arbitrators before entering upon the reference. The Umpire shall sit with the Arbitrators and preside at their meetings and the making of an Award shall be a condition precedent to any right of action against Us. If We shall disclaim liability to You for any claim hereunder and such claim shall not within twelve calendar months from the date of such disclaimer have been referred to arbitration under the provisions herein contained, then the claim shall for all purposes be deemed to have been abandoned and shall not thereafter be recoverable hereunder.

9. **Cash Before Cover**
Full premium must be paid to Us or Our authorized agent before the Effective Date of the policy.

10. **Prevailing Language**
The text of this Policy shall be in English and Bahasa Malaysia, and in the event of different interpretation between the texts, the English text will prevail.

11. **Other Insurance Policies [Applicable to Accidental Medical Expenses only]**
If You have purchased insurance policies from other insurers which cover the same risks covered by this policy, We will only pay You any excess beyond the amount which would have been covered under other insurance policy or policies.

12. **Sanction Limitation Clause**
No (re) insurer shall be deemed to provide Cover and no (re) insurer shall 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 that (re) insurer to any sanction, prohibition, or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, United States of America, or Malaysia.

13. **Claims Notification**
Should any Accident, Injury, Loss or liability occur which may give rise to a claim, You must: notify Us in writing and give Us the full particulars of the Accident, Injury, Loss or liability:

- within twenty-one (21) days of the occurrence in the case of death or Injury; and
- ensure that proper medical and surgical advice is obtained and followed by You or Your family members as soon as possible after any Accident or Injury; and
- at Your expense, provide Us with all reports, certificates, information and other documents We may require.

We are entitled to request:
- an examination by a medical referee appointed by Us for a non-fatal Injury; or
- a post-mortem examination in the event of death.

14. **Data Privacy Notice**
You hereby agree that by using our services and providing your personal data to us, you consent to Generali's collection, use, disclosure and/or processing of your personal data as described in the Data Privacy Notice made available at our website www.generali.com.my. We reserve the right to update and amend our Data Privacy Notice from time to time. We will notify you of any amendments to our Data Privacy Notice via announcement on our website or other appropriate means.

ACTIONS AND/OR DOCUMENTS REQUIRED TO PROCESS YOUR CLAIM

We require You to take certain actions and / or submit certain documents to Us before Your claim can be processed. These documents and / or actions are listed in the table below and will depend on the type of claim You intend to submit to Us. Take note that the documents and / or actions required from You are not limited only to those that are stated in the table below. We reserve the right to request additional documents, information, confirmation or certification from You to process Your claim. If You are unable, for good reason acceptable to Us, to provide any documents, information, confirmation or certification requested, We reserve the right to waive the requirement.

Benefits	Action / Document Required
All claims	• Claim Form • Original Policy Schedule • **Plus the following where applicable**
Benefit 1 **Accidental Death**	• Medical Report from the attending Physician • Death Certificate • Post Mortem Report • Police Report
Benefit 2 **Accidental Permanent Disablement**	• Medical Report from the attending Physician • Acceptable proof showing that the Permanent disablement will, in all probability, continue for the remainder of Your life. • Police Report
Benefit 3 **Accidental Medical Expenses**	• Medical Report from the attending Physician (for claim amount RM300 and above) • Original Medical Invoice & Receipts for amount RM300 and above
Benefit 4 **Hospital Income**	• Hospital Inpatient Discharge Summary • Copy of hospitalisation itemised bills confirming the date of Your admittance and discharge from the Hospital • Medical report or Attending Physician's Statement by treating doctor.
Benefit 5 **Financial Obligations**	• Copy of outstanding loan statement of insured's person car / loan or credit card in the event of a claim admissible under Accidental Death and Permanent Disablement
Benefit 6 **Funeral Allowance**	• Original itemised receipts for all amounts claimed for funeral expenses • Original receipts for additional expenses claimed for cost of cremation or transporting of mortal remains
Benefit 7 & 10 **Bone Fracture**	• Medical report or Attending Physician's Statement by treating doctor, indicating the type and location of fractures. • Radiology Report and X-Ray image
Benefit 8 **Physiotherapy Treatment**	• a written medical referral from the Doctor to the physiotherapist. • Medical report or Attending Physician's Statement by treating doctor
Benefit 9 **Double Indemnity whilst traveling overseas/ traveling on Public Transport /being a victim of Snatch Theft & Robbery**	• Police report
Benefit 11 **Education Allowance**	• Proof of enrollment and continuation of formal education
Benefit 12 **Accidental Dental Benefit**	• Medical report or Attending Physician's Statement by treating dentist
Benefit 13 **Travel Expenses due to hospitalization as a result of an Accident (does not exceed ninety-five (95) consecutive days from the commencement date of the trip)**	• Receipt of additional expenses incurred for transportation • Hospital Inpatient Discharge Summary

15. Period of Cover and Renewal

This Policy shall become effective as of the date stated in the Policy Schedule. The Policy Anniversary shall be one year after the effective date and annually thereafter. On each such anniversary, this Policy is renewable at the premium rates in effect at that time as notified by the Company.

This Policy is renewable at the option of the Company and there is no automatic renewal acceptance. Application for change of benefits or change of plan can be made during renewal only.

16. Portfolio Withdrawal Condition

We reserve the right to cancel the portfolio as a whole if we decide to discontinue underwriting this insurance product.

The Policyholder shall be given a written notice upon the cancellation of the portfolio as a whole and We will run off all policies to expiry of the period of cover within the portfolio.

17. General

Words in their singular form include the plural and vice versa and words importing any gender include all genders.

18. Service Tax

The Premium payable by you is subject to the Service Tax Act 2018, including any subsidiary legislations, orders or regulations governing the application of such tax, as may be imposed, or amended by the relevant authorities from time to time.

When we pay a claim, the amount of claims paid (including any service tax imposed by the relevant authorities) shall be subject to the Sum Insured or limits of insurance covered under the Policy.

19. Territorial Exclusion Clause

The Insurer shall not indemnify the Insured for any liability:

(a) in respect of any judgment, award, payment, legal costs and expenses or settlement delivered, made or incurred where legal actions are brought in a court of law within countries which operate under the laws of "Excluded Countries/Territories", or any order made anywhere in the world to enforce such judgment, award, payment, legal costs and expenses or settlement either in whole or in part;

(b) incurred by the government of "Excluded Countries/Territories" or resulting from activities that involve or benefit the government of "Excluded Countries/ Territories", or where the payment of such indemnity by the Insurer will benefit the government of "Excluded Countries/Territories";

(c) in respect of any settlement agreed or incurred outside of a court of law, prior to any legal actions being brought, by, or to the benefit of, persons or entities resident in "Excluded Countries/Territories"; Entities shall include any parent company, direct or indirect holding company owned or controlled by the government of "Excluded Countries/Territories", persons or entities resident in "Excluded Countries/Territories".

List of Excluded Countries/Territories

1. Israel
2. Iran
3. Syria
4. North Korea
5. Crimea Region and the Zaporizhzhia, Kherson, Donetsk and Luhansk People's region
6. Belarus
7. Russian Federation

Please refer to the latest Excluded Countries / Territories list at www.generali.com.my.

20. Cyber Loss Absolute Exclusion Clause

19.1 Notwithstanding any provision to the contrary within this contract, this contract excludes any Cyber Loss.

19.2 Cyber Loss means any loss, damage, liability, expense, fines or penalties or any other amount directly or indirectly caused by:

19.2.1 the use or operation of any Computer System or Computer Network;
19.2.2 the reduction in or loss of ability to use or operate any Computer System, Computer Network or Data;
19.2.3 access to, processing, transmission, storage or use of any Data;
19.2.4 inability to access, process, transmit, store or use any Data;
19.2.5 any threat of or any hoax relating to 2.1 to 2.4 above;
19.2.6 any error or omission or accident in respect of any Computer System, Computer Network or Data.

19.3 Computer System means any computer, hardware, software, application, process, code, programme, information technology, communications system or electronic device owned or operated by the Insured Person or any other party. This includes any similar system and any associated input, output or data storage device or system, networking equipment or back up facility.

19.4 Computer Network means a group of Computer Systems and other electronic devices or network facilities connected via a form of communications technology, including the internet, intranet and virtual private networks (VPN), allowing the networked computing devices to exchange Data.

19.5 Data means information used, accessed, processed, transmitted or stored by a Computer System.

19.6 When this clause forms part of a reinsurance contract, Insured shall be amended to read Original Insured.

SCHEDULE OF BENEFITS

Schedule of Benefits for Gen PA ZenProtect - Main Cover

Items	Benefits	Sum Insured / Limit of Liability Per Accident (RM)	
		Plan A	Plan B
1	Accidental Death	50,000	100,000
2	Accidental Permanent Disablement	50,000	100,000
3	Accidental Medical Expenses	2,000	3,000
4	Hospital Income (Maximum up to 180 days)	50 per day	100 per day
5	Financial Obligations	2,500	5,000
6	Funeral Allowance	1,000	2,000

Schedule of Benefits for Gen PA ZenProtect - Optional Benefit / Rider

Active Lifestyle Bundle			
Items	Benefits	Sum Insured / Limit of Liability Per Accident (RM)	
		Plan A	Plan B
7	Bone Fracture	10,000	20,000
8	Physiotherapy Treatment	1,000	2,000
9	Double Indemnity whilst traveling overseas/ traveling on Public Transport /being a victim of Snatch Theft & Robbery	✓	✓

Children Bundle			
Items	Benefits	Sum Insured / Limit of Liability Per Accident (RM)	
		Plan A	Plan B
10	Bone Fracture	10,000	20,000
11	Education Allowance	10,000	20,000
12	Accidental Dental Benefit	250	500
13	Travel Expenses due to hospitalization as a result of an Accident (does not exceed ninety-five (95) consecutive days from the commencement date of the trip)	100 per week up to 1,000	200 per week up to 2,000