

## ABOUT SOMPO

Sompo is a member of SOMPO HOLDINGS\*, a trusted and established insurance and risk solutions provider in Japan for over a century. Today, SOMPO HOLDINGS serves its customers in more than 30 countries and regions.

Since 1989, Sompo has been providing companies and individuals with premium yet affordable insurance in Singapore.

At the heart of what we do is our commitment to deliver our best service to our customers. More than just providing comprehensive coverage, we aim to be our customers' trusted partner when it comes to protecting what they value and treasure most. Because, above all, their well-being is what we collectively work for.

*\*SOMPO HOLDINGS is the abbreviated name representing Sompo Japan Nipponkoa Holdings and Sompo Japan Nipponkoa Group.*

### Important Note

- This product write-up is not a contract of insurance. Full details of the terms, conditions and exclusions are provided in the Policy. Please visit [sompo.com.sg](http://sompo.com.sg) for a specimen copy of the Policy Wording.
- This policy is protected under the Policy Owners' Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy is automatic and no further action is required from you. For more information on the types of benefits that are covered under the scheme as well as the limits of coverage, where applicable, please visit [sompo.com.sg/FAQ](http://sompo.com.sg/FAQ) or GIA/LIA or SDIC websites ([www.gia.org.sg](http://www.gia.org.sg) or [www.lia.org.sg](http://www.lia.org.sg) or [www.sdic.org.sg](http://www.sdic.org.sg)).

### SOMPO INSURANCE SINGAPORE PTE. LTD.

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Company Registration No.: 198905490E

# New!

PAJunior

- Enhanced Benefits
- Teddy Plan

**All-rounded protection**  
for babies to young adults



It's not possible to prevent injuries and illnesses when your child is growing up. However you can definitely protect your little one with a comprehensive Personal Accident Insurance so you can be relieved of financial expenses when the unexpected happens.

Designed for children from as young as one month old, PAJunior not only covers accidental injuries but also 16 Specified Infectious Diseases including Dengue Fever, Measles as well as Hand Foot Mouth Disease.

**With PAJunior, be rest assured your child is protected at all times! That's our promise.**

### HIGHLIGHTS

- **24/7 accident protection** anywhere in the world
- **Medical Expenses** incurred due to accidental injuries
- **Quarantined Allowance** due to **16 Infectious Diseases** including MERS
- **Treatment Expenses** from licensed Chinese Physicians, Chiropractors, Acupuncturists and Bonesetter for up to S\$200
- **Daily Cash Allowance** during hospitalisation and while resting at home due to accident AND any of the 16 Specified Infectious Diseases
- **Monthly Financial Assistance due to Accidental Permanent Disablement**

NEW!

TEDDY PLAN

ENHANCED!

### FREE BONUS COVERS AND EXTENSIONS\*

- Child Care and School Fee Subsidy up to S\$500 per accident
- Transport Allowance after discharge from hospital and subsequent follow up visits
- Cover accidents during School Sports and Competition such as soccer, basketball, and swimming
- Accidental Death and Permanent Disablement cover up to S\$15,000 during Full-Time National Service
- Full Terrorism Cover

**Free Extensions** include accidental Food Poisoning, Insect/Animal Bites, Disappearance and more!

10% Discount for second Insured Child onwards

\*Varies by plan

### FREQUENTLY ASKED QUESTIONS

#### 1. Who can apply for PAJunior?

Parents who are Singaporean, Singapore Permanent Resident or Foreigner with valid employment pass or work permit can apply as Policyholder.

Eligible Child must be at least one month old to below 21 years old\* who is dependent, unmarried and unemployed natural child, legal step-child and legally adopted child of the Policyholder. For those in full-time tertiary institutes, the age limit will be extended to 25 years old\*.

Both Policyholder and Child have to be residing in Singapore.

\*Age next birthday

#### 2. What are the 16 Specified Infectious Diseases covered under PAJunior?

They are:

- Severe Acute Respiratory Syndrome (SARS)
- Variant Creutzfeldt-Jakob Disease (vCJD) or 'Mad Cow Disease'
- Nipah Virus Encephalitis
- Malaria
- Measles
- Melioidosis
- Chikungunya Fever
- Rubella
- Dengue Fever / Dengue Hemorrhagic Fever
- Avian Influenza or 'Bird Flu' due to Influenza A viral strains H1N1, H5N1, H9N2, H7N7 or H7N9
- Japanese Viral Encephalitis
- Pulmonary Tuberculosis
- Rabies
- Hand, Foot, Mouth Disease (HFMD)
- Mumps
- Middle East Respiratory Syndrome (MERS)

#### 3. Is there a waiting period for Infectious Disease Cover?

Yes. There is a 14 days waiting period applicable from the first inception of cover.

#### 4. How many PAJunior can I buy for my child?

You can apply for one PAJunior policy for each child.

#### 5. Does the Child need to go for any medical examination?

No. The Child will be accepted on the health declaration made by the Policyholder or the Child on the application form.

#### 6. Can we enjoy any Free Look Period?

Yes, you can enjoy 14 days Free Look from the day you receive your insurance policy. If the policy is not suitable for you, you can arrange to cancel your policy within this period and receive a full refund on the payment made, no questions asked! Beyond the 'Free Look' period, we will refund you the balance premium after deducting our customary short-term premium or minimum premium provided no claims has been made under the policy. (Not applicable to renewals)

#### 7. What is not covered by PAJunior?

All insurance policies have exclusions. The main exclusions under this policy are war, self-destruction, non-prescribed use of drugs, intoxication, insanity, venereal disease, AIDS, pre-existing illness, professional sports, underwater or other hazardous activities, full-time military service, mountaineering or rock climbing. Cover for infectious disease is subjected to a Pandemic Alert Exclusion.

## BENEFITS AT A GLANCE (\$\$)

BENEFITS PER INSURED CHILD	BUNNY	NEW! TEDDY	JUMBO
<b>A Accidental Death</b> Accidental Permanent Disablement (PD) including - Fractured Arms & Legs - Third Degree Burns	\$10,000 \$30,000 \$3,000 \$30,000	\$30,000 \$100,000 \$10,000 \$100,000	\$50,000 \$150,000 \$15,000 \$150,000
<b>B Medical Expenses per Accident incurred in hospital or outpatient clinic including</b> - Treatment by Chinese Physician and Chiropractor	\$1,500 \$100	\$2,500 \$150	\$3,500 \$200
<b>C Education Fund</b> Pays upon accidental death of one or both parent	\$5,000	\$10,000	\$15,000
<b>D Daily Hospital Allowance (Accident)</b> Pays for each day of hospitalisation due to accident up to 200 days	\$50 per day	\$75 per day	\$100 per day
<b>E Ambulance Fee</b> Pays for emergency ambulance service to hospital where Insured is subsequently hospitalised due to a covered event	\$100	\$200	\$300
<b>F Recuperating Allowance (Accident)</b> Daily cash allowance for each day of medical leave upon discharge from hospital up to 30 days	\$20 per day	\$30 per day	\$50 per day
<b>G Medical Expenses (Infectious Diseases)</b> Pays for medical treatment due to any of the 16 Specified Infectious Diseases	N.A.	\$1,000	\$1,500
<b>H Daily Hospital Allowances (Infectious Diseases)</b> Pays for each day of hospitalisation due to any of the 16 Specified Infectious Diseases up to 200 days		\$50 per day	\$100 per day
<b>I Get Well Benefit (Infectious Diseases)</b> Pays daily cash allowance for each day of medical leave or quarantine under medical advice upon discharge from hospital due to any of the 16 Specified Infectious Diseases, for up to 14 days.		\$30 per day	\$50 per day
<b>J Reconstructive Surgery due to Accident</b> a) Restoration or Reconstruction Surgery b) Skin Transplantation c) Re-attachment of severed fingers, toes and limbs		\$10,000	\$15,000
<b>K Mobility Aid Enhancement</b> Pays for purchase/rental of mobility aid, artificial limbs and hearing aids AND cost for modification of residence to aid mobility if the Insured suffered Permanent Disablement covered under Section A		\$1,000	\$2,000
<b>L Monthly Financial Assistance due to Accidental Permanent Disablement (up to 24 months)</b>	\$500 per month	\$500 per month	\$500 per month

## Bonus Cover

BENEFITS PER INSURED CHILD	BUNNY	NEW! TEDDY	JUMBO
<b>1 Child Care &amp; School Fee Subsidy</b> Reimburse any Child Care charges or School Fees incurred during hospitalisation and while recuperating at home due to an accident	\$100	\$300	\$500
<b>2 Transport Allowance</b> Reimburse the cost incurred to convey (via Public Transport) the Insured, a) Home, on the day of discharge from hospital b) For subsequent follow up visits	\$150	\$200	\$300
<b>3 School Sports &amp; Competition</b> Additional Sum Insured in the event of Death or Permanent Disablement (>75% PD payment) due to an accident while engaged in sports activities organised by the School, including Inter-School Competition as school representative anywhere in the world	N.A.	\$5,000	\$10,000
<b>4 Full Terrorism Cover</b>	Covered	Covered	Covered
<b>5 National Service &amp; Reservist Cover</b> Accidental Death or Permanent Disablement during Full-Time National Service and Reservist	N.A.	\$10,000	\$15,000

## PREMIUM TABLE (\$\$) (Inclusive of GST)

PREMIUM PER CHILD	BUNNY	NEW! TEDDY	JUMBO
<b>Annual Premium</b>	\$85.60	\$197.95	\$288.90
<b>2nd Child Onwards (same policy) – 10% discount</b>	\$77.04	\$178.16	\$260.01

## FREE EXTENSIONS

- Food Poisoning
- Insects and Animal Bite that causes bodily injury through direct skin contact
- Disappearance for > 1 year following sinking, wrecking or destruction of aircraft or conveyance that he/she is travelling on
- Riot, Strike and Civil Commotion
- Hijack, Murder and Assault
- Suffocation by Smoke, Poisonous Fumes and Gas
- Drowning

## APPLICATION FORM

Intermediary's Name/Code: \_\_\_\_\_

### IMPORTANT NOTICE

1. Statement Pursuant to Section 25(5) of the Insurance Act. You are to disclose on this Application Form fully and faithfully all the facts which you know or ought to know, otherwise the policy issued hereunder may be voided.
2. Please note that this insurance is subject to the premium being paid and received in full by the Company (a) before the inception date where the Policy is issued to an Individual, or (b) within the period specified in the Premium Payment Warranty applied to the Policy in all other instances, failing which there will be no liability under the cover.
3. The liability of the Company does not commence until this Application is accepted and the premium is paid in accordance with clause 2 above.

### APPLICANT'S PARTICULARS (PARENT AS POLICYHOLDER)

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

NRIC/FIN: \_\_\_\_\_ Nationality: \_\_\_\_\_

Contact No.: \_\_\_\_\_ (HP) \_\_\_\_\_ (H) \_\_\_\_\_ (O)

Date of Birth: \_\_\_\_\_ Sex: Male/Female Occupation: \_\_\_\_\_

Relationship with Insured Person: Mother/Father

### CHILD(REN)'S PARTICULARS

Name of Child: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Sex: Male/Female NRIC/FIN: \_\_\_\_\_

Sports Club/ Activities participated (if any): \_\_\_\_\_

Name of School: \_\_\_\_\_

Name of Child: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Sex: Male/Female NRIC/FIN: \_\_\_\_\_

Sports Club/ Activities participated (if any): \_\_\_\_\_

Name of School: \_\_\_\_\_

Name of Child: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Sex: Male/Female NRIC/FIN: \_\_\_\_\_

Sports Club/ Activities participated (if any): \_\_\_\_\_

Name of School: \_\_\_\_\_

### ANNUAL PREMIUM (\$\$) (Inclusive of GST)

Plan Type (Please tick)  Bunny  Teddy  Jumbo

Premium for 1st Insured Child: = \$ \_\_\_\_\_

Premium for 2nd Child onwards: \$ \_\_\_\_\_ x \_\_\_\_\_ Child(ren) = \$ \_\_\_\_\_

Total Premium Payable: = \$ \_\_\_\_\_

### PERIOD OF INSURANCE

From \_\_\_\_\_ (dd/mm/yyyy) for 12 Months

May 2016

## APPLICATION FORM

### DECLARATION

I/We, declare that

1. The Insured Child(ren) is/are in good health and free from physical impairment and is/are residing in Singapore.
2. The Insured Child(ren) does/do not participate in any hazardous hobbies or activities.
3. The Insured Child(ren) has/have neither made any claims against any insurer for bodily injury nor had any life or accident insurance application/policies that were declined, cancelled, refused renewal or impose with special terms.
4. I/We will give notice to Sompō Insurance Singapore Pte. Ltd. of any changes in occupation, activities or country of residence.
5. I/We understand and agree that benefits under this policy will only be payable upon an accident occurring with the exception of coverage provided for Specified Infectious Disease.
6. I am/We are aware that for Infectious Disease, there is a waiting period of 14 days from cover inception and cover is subject to Pandemic Alert Exclusion.
7. I am/We are aware that I/we can seek advice from a qualified advisor to ensure that this product is appropriate for my/our financial needs and insurance objective before this application contract with Sompō Insurance Singapore Pte. Ltd.
8. The information given in this application is true and complete and shall be the basis of contract with Sompō Insurance Singapore Pte. Ltd.
9. I am/We are not an undischarged bankrupt(s).
10. I/We acknowledge and agree (in case of corporate policy, I/we represent that I/we have obtained the consent of the individuals in relation to this policy) that Sompō may collect, use, disclose and/or process my/our personal data (in case of corporate policy, personal data of individuals in relation to this policy) in accordance with the Personal Data Protection Act 2012 for the purposes and uses described in Sompō's Privacy Policy (including the provision of protection, services related to this insurance policy, screening activities in accordance with legal/regulatory obligations/risk management procedures). This may include disclosure to Sompō's business partners, intermediaries, third party service providers and industry associations. Sompō's Privacy Policy can be found at sompo.com.sg.
11. I/We consent to receive marketing and promotional information from Sompō (e.g. via email, mail, SMS, etc.). I/We understand that I/we can withdraw or manage my/our consent to receive marketing and promotional information at sompo.com.sg.
12. I am/We are aware of and agree to abide by the Policy terms, conditions and exclusions and confirm that the information given in this application/form is true, accurate and complete.

I/We further declare details relating to item(s) no. : \_\_\_\_\_

- PLEASE CHARGE S\$ \_\_\_\_\_ (Including GST) TO MY VISA / MASTERCARD\* (\*Delete As Appropriate)  
Where a third party credit card is used, I/We declare that the cardholder has authorised and consented to such use.  
CARD NO.: ■■■■ - ■■■■ - ■■■■ - ■■■■ EXPIRY DATE: ■■ - ■■
- I ENCLOSE A CHEQUE FOR S\$ \_\_\_\_\_  
(Including GST) payable to **Sompō Insurance Singapore Pte. Ltd.**  
BANK / CHEQUE NO.: \_\_\_\_\_



SIGNATURE OF APPLICANT \_\_\_\_\_  
on behalf of person(s) to be insured \_\_\_\_\_ DATE: \_\_\_\_\_

### FOR OFFICIAL USE

We confirm acceptance of this application in accordance to our policy terms conditions and exceptions, effective \_\_\_\_\_.

NAME & SIGNATURE OF APPROVING OFFICER / DATE