

บริษัท ประกันกัยไทยวิวัฒน์ จำกัด (มหาชน) สำนักงานใหญ่ 71 ถนนดินเดง เของสามเล่นใน เขตพญาโก กลุงเทพฯ 10400 โกร. 1231 THAI/IVAT INSURANCE PCL. 71 Din Dang Road, Sameon Nai, Phaya Thai, Bangkok 10400 เลขทะเปลนเดินุเคคล / เลขประจำตัวฟูเสียกษี 0107536001427

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Group Accident Insurance Policy

In reliance upon the statement made in the proposal for insurance which is considered a part of this insurance policy, and in consideration of the premium paid by the Insured, and subject to the general conditions, insuring agreements, exclusions and attached endorsements of this insurance policy, the Company agrees to the covered persons as follows **Coverage:** as coverage Agreement / attached documents

General conditions

1. Definitions: for use in the insurance policy and documents attached to this insurance policy.

1.1	Company	refers to	the Company who issues this insurance policy
1.2	Policy holder	refers to	a person named as Policy holder in the policy schedule and/or endorsements as
			a person arranges Insurance for benefit of the insured
1.3	Insured	refers to	a person named as Insured in the policy schedule and/or endorsements as a
			person is covered under this Insurance Policy
1.4	schedule	refers to	policy schedule
1.5	Accident	refers to	an event which happens suddenly from external means giving rise to a result
			which is not intended or anticipated by the covered person
1.6	Injury	refers to	bodily injury which is caused directly and solely from an accident and is
			independent from other causes while this policy is in force
1.7	Total Permanent	refers to	disability to the extent of being unable to perform the normal duty in the covered
	Disability		person's regular occupation or any other occupation totally and permanently
1.8	Partial	refers to	disability to the extent of being unable to perform the normal duty in the
	Permanent		Insured's regular occupation permanently but being able to perform other work
	Disability		for remuneration
1.9	Temporary Total	refers to	disability to the extent of being unable to perform any permanent work for a
	Disability		certain period of time
1.10	Temporary	refers to	disability to the extent of partial inability to perform any permanent work for a
	Partial Disability		certain period of time or consequences of recovered Temporary Total Disability
			but remain unable to perform all permanent work for a certain period of time
1.11	Deductible	refers to	the amount of loss which is first borne by the Insured
1.12	Any Loss or	refers to	bodily injury suffered by the Insured as a result of an accident and which causes
	Injury		death, dismemberment, loss of sight, disability, or requires the Insured to be
			medically treated.



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2. Completeness of the contract and changes in the Insurance Policy

This Insurance Policy together with the Insuring Agreements and Endorsements are forming part of the insurance contract. Any changes of wordings in the contract must be approved by the Company and noted in the Insurance Policy or Endorsement before such changes shall be valid.

3. Report of Accident

The Insured, the beneficiary or the representative of the said person, whichever the case may be, must report the accident to the Company without delay. In the event of death, an immediate notice must be made to the Company unless it can be proved that the circumstances make it impossible to do so and the notification is given to the Company as early as possible.

4. Proof of Loss

In claiming for compensation, the Insured, the beneficiary or the representative of the said person, whichever the case may be, must furnish all necessary evidences as required at his own expense to the Company.

For death or disability claims, the evidence stated above must be given to the Company within 30 days from the date of death or the commencement of the disability. For other types of compensation, the evidence must be furnished within 180 days from the date of accident. 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.

For medical expenses claim, the original receipt must be presented. The Company will return the original receipt if it is not fully paid noting the amount already paid, so that the Insured can claim the balance from other Insurers, if any. If the Insured receives reimbursement from the government or other welfare, the Insured may submit a copy of the receipt together with the original statement showing the amount paid by the government or other welfare and claim the balance from the Company in accordance with Policy Conditions.

5. Examination Rights

The Company has the right to medically examine the covered person who is claiming benefit under this policy and has the right to conduct an autopsy, within the limits of the law, in case of death, and the expense incurred will be paid by the Company.

6. Indemnification

Compensation for death will be paid to the beneficiary while other types of compensation will be paid to the Insured.

6.1 In the case of loss according to the coverage agreement No. 1 and 4, the compensation shall be paid by the Company within 20 days after receipt of complete and proper proof of loss

6.2 In the case of loss according to the coverage agreement No. 2 and 3, the company will pay on the due date every 4 weeks throughout the disability period, but not more than 52 weeks.



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In the event the Company wishes to investigate a claim for compensation under Insuring Agreement No.6.1 and 6.2, the time so specified may be extended if necessary but in no event shall this total period be more than 90 days after all documents received by the Company.

For claims according to No. 6.2, the period according to the preceding paragraph can be extended only for the first payment schedule. Burden of proof Claims for compensation not in accordance with the insurance coverage agreement are the responsibility of the company. In this case, the policy holder, Insured or the beneficiary must provide reasonable facts and conveniences to the company.

If the Company cannot settle the claim within the specified time limit, the Company is liable to pay the interest at 12 percent per annum of the amount due, calculated from the due date of the compensation.

7. Limitation of Liability

throughout the insurance period, The Company will pay claims for coverage agreement No. 1 in total not exceeding the amount as specified in the schedule. And when compensation is paid according to the coverage agreement No. 1 full limit of liability as specified in the table has been paid. The coverage under this insurance policy will continue to be in effect for the remainder of the insured period. This is only according to the coverage agreement No. 4 (if any) only.

8. Change of Occupation

If the Insured suffers an injury while under a remunerated occupation which is considered more hazardous than which had been previously declared to the Company, the Company shall pay the compensation equal to the coverage amount of which the previously paid premium can buy for the new occupation.

If the Insured changes occupation to one which the Company considers as less hazardous, the Company will reduce the premium and refund it to the Insured on a pro rata basis as from the date of receiving such evidence of change

9. Arbitration

In case of argument, dispute, or appeal under this Policy between the person who is entitled for compensation versus the Company, and if so desired by that person to settle the disputed claim by use of arbitration, the Company must conform and allow the case to be judged by arbitration according to the Arbitrating Regulation governed by the Department of Insurance.

10. Cancellation

10.1 The Company may cancel this Insurance Policy by giving written not less than 15 days in advance by registered mail to the Insured at the last known address as declared to the Company. In such event, the Company shall refund the premium to the Insured on a pro-rata basis.

10.2 The Insured may cancel this Insurance Policy by giving written notice to the Company and shall be entitled to receive a refunded premium after deducting premium for the period that the policy has been in force according to the Short Period Schedule.



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Short Period Schedule				
Period (not over/month)	% of annual premium			
1	15			
2	25			
3	35			
4	45			
5	55			
6	65			
7	75			
8	80			
9	85			
10	90			
11	95			
12	100			

Short Period Schedule

11. Automatic Termination of the Contract

This Insurance Policy shall be automatically terminated should the Insured be imprisoned by lawful Authority, for which the premium shall be returned to the Insured on a pro-rata basis.

12. Precedent Condition

The Company shall not be liable to compensate the Insured or other party under this insurance policy unless the Insured has complied with the insurance contract and the Conditions of this Policy.



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(For Group Accident Insurance Policy)

ORBOR 2

Insuring Agreement

The company provides coverage only for coverage agreements with the insured amount as specified in the table only.

This insurance covers any losses or injuries to the Insured arising from bodily injury, which is caused by an accident and causes the following results:

1. Loss of Life, Dismemberment, Loss of Sight, Loss of Hearing, Loss of Speech or Permanent Disability

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 the sum insured	for loss of life
2	100% of the 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 the 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 the sum insured	for loss of one hand from the wrist joint and one foot from the ankle joint.
5	100% of the sum insured	for loss of one hand from the wrist joint and loss of sight in one eye.
6	100% of the sum insured	for loss of one foot from the ankle joint and loss of sight for in eye.
7	60% of the sum insured	for loss of one hand from the wrist joint.
8	60% of the sum insured	for loss of one foot from the ankle joint.
9	60% of the sum insured	for loss of sight in one eye.
10	50% of the sum insured	for permanent loss of hearing or speech.
11	15% of the sum insured	for permanent loss of hearing in one ear.
12	25% of the sum insured	for loss of a thumb (two joints).
13	10% of the sum insured	for loss of a thumb (one joint)
14	10% of the sum insured	for loss of an index finger (three joints)
15	8% of the sum insured	for loss of an index finger (two joints)
16	4% of the sum	for loss of an index finger (one joint)



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17	5% of the sum insured	for loss of each finger (not less than two joints) other than a thumb and an index
		finger
18	5% of the sum insured	for loss of a big toe
19	1% of the sum insured	for loss of each toe (not less than one joint) other than a big toe

Loss of sight refers to complete blindness, which is permanently incurable.

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 insurance period, all items combined cannot exceed the limit of liability stated in the policy 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 policy schedule.

2. Temporary Total Disability

If the Injury causes the Insured to become a Temporary Total Disability within 180 days from the date of Accident, the Company shall compensate on weekly basis for the amount specified in the policy schedule throughout the period of disability (up to 52 weeks) less the any Deductible or number of initial days for which the Insured shall be liable by him/herself as specified in the policy schedule (if any).

The Company shall cease compensation immediately upon the Company's compensation under the Insuring Agreement No.1

3. Temporary Partial Disability

If the Injury causes the Insured to become Temporary Partial Disability within 180 days from the date of Accident, the Company shall compensate on weekly basis for the amount specified in the policy schedule throughout the period of disability (up to 52 weeks) less the Deductible or number of initial days for which the Insured shall be liable by him/herself as specified in the policy schedule (if any).

The Company shall cease compensation immediately upon the Company's compensation under the Insuring Agreement No.1 or No.2

4. Medical Expense

If the Insured sustains injury and requires him/her to receive medical treatment by legally licensed physician, or requires treatment by licensed nurse within 52 weeks from the date of accident, the Company shall compensate the Insured according to the actual medical expenses incurred which are customary and reasonable medical charges according to the medical necessity and medical standard. Such medical expenses include expenses of room and board, observe room, medical



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charges, and nurse fee. Nevertheless, the total amount paid will not exceed the amount specified in the policy schedule, less the deductible (if any).

If the Insured receives compensation from government or other welfare or from other insurer, the Company is responsible only for the excess amount, over that which is covered under the welfare or other insurer's policy.

Exclusions

This Insurance Policy does not cover

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

A. 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

B. Suicide or attempted suicide or self-inflicted injury.

C. Infections except pyogenic infections, tetanus, or rabies from a wound or cut suffered as a result of an accident.

D. Medical treatment or surgical treatment except the necessary treatment for the injury which is covered under this

Insurance Policy and occurring within the period of this Insurance Policy.

E. Miscarriage and abortion

F. Dental care or root canal treatment except dental treatment which is given from the date of accident

G. Backache as a result of Disc herniation, Spondylolisthesis, Degenerative disc disease, Spondylosis, Defect or Pars interarticularis (Spondylolysis) except if there is a fracture or dislocation of spinal cord as a result of an accident.

H. War (whether declared or not), invasion, act of foreign enemies, civil war, revolution, insurrection, civil commotion, popular rising against the government, riot, strike.

I. Nuclear weapons radiation or radioactivity from any nuclear fuel or any nuclear refuse arising from the combustion of nuclear fuel and any process of self-sustaining nuclear fission/fusion.

2. Loss or injury which occurs:

A. 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.

B. While the Insured is riding or traveling on a motorcycle

C. 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



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- D. While the Insured pilots or works as a crew in any aircraft
- F. While the Insured is taking part in a brawl or taking part in inciting a brawl.
- G. While the Insured is committing a felony or while the Insured is being arrested, under arrest, or escaping the

arrest

H. 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 Policy shall become effective again until the expiry date on the policy schedule.