



# Geared to go

Crisis XDefender Supreme

Critical Illness Protection • Participating Life

Get ready to live

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# Crisis XDefender Supreme

Wearing a helmet is more than just looking cool; it allows you to be safe while you are exploring the world. Just like critical illness protection. It has become a must-have in life these days for you to enjoy the things around you.

To accompany and support you wherever you want to go, FWD brings you a comprehensive critical illness protection – Crisis XDefender Supreme (“the Plan”).

## Key Features of Crisis XDefender Supreme



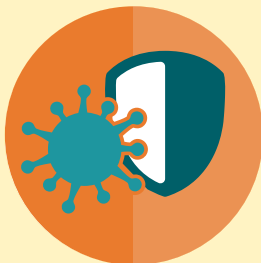
Higher Confidence  
from a Broad Coverage



Enhanced Security from  
Designated Crises (Up to 600%  
of Initial Sum Insured)



Greater Reassurance from  
Additional Benefits (Up to 75%  
of Initial Sum Insured)



Extra Protection  
against Benign Tumour



Protect You from  
Congenital Diseases



Special Care on  
Your Road to Recovery



Protection  
for Your Newborn



Medical Check-up  
for Your Wellness



Reward for  
Healthy Body



Professional Services  
Are Around You



Extended Coverage  
for Your Loved Ones –  
Waiver of Premium on Death  
Benefit (Parents) / (Spouse)  
Rider (optional rider)

## Feature Highlight



### Higher Confidence from a Broad Coverage

In addition to protection against 62 Crises, the Plan also covers 65 Special Diseases with 12 of them specifically for juveniles<sup>1,2</sup>. There's no simpler way to achieve broad protection against critical illnesses.



### Enhanced Security from Designated Crises (Up to 600% of Initial Sum Insured)

If a Crisis Benefit has been paid, the rest of the premium payable under the Plan will be waived<sup>1</sup>. If you are subsequently diagnosed with either Cancer, Heart Attack or Stroke, FWD will pay an additional 120% of Initial Sum Insured<sup>1,3</sup> for a maximum of 5 times.



### Greater Reassurance from Additional Benefits (Up to 75% of Initial Sum Insured)

The Plan provides up to 75% of Initial Sum Insured of Additional Coverage Benefit to back you up if you are diagnosed with any covered Crises or pass away in the first 15 Policy Years<sup>4</sup>.



### Extra Protection against Benign Tumour<sup>1, 5</sup>

In case of tumour that a doctor suggests to be malignant potential; and can only to be confirmed as benign by complete surgical removal for diagnosis purpose, the Plan offers you up to additional 15% of Initial Sum Insured to relieve you of your financial burden if it is confirmed diagnosed as a Benign Disease. This way, you can focus on your road to full recovery.





### **Protect You from Congenital Diseases<sup>1,2</sup>**

If signs and symptoms of a congenital disease are undetected before we issue the policy and within the first 90 days after we have issued the policy, the Plan provides coverage if the congenital disease develops into a covered disease. There's no simpler way to shield against these undetected congenital diseases.



### **Special Care on Your Road to Recovery**

Ongoing treatment may be necessary to fully recover from a critical illness. After your first confirmed diagnosis of a Heart Attack or Stroke, and the Crisis Benefit has been paid, you can get the Rehabilitation Benefit<sup>6</sup> of an additional 1% of the Initial Sum Insured per month for up to 6 months. Furthermore, the Lifestyle Management Program<sup>7</sup> will offer you a tailor-made professional rehabilitation program to support your recovery from the critical illness.

If you are diagnosed with an illness related to Group 3 diseases (illnesses related to Circulatory System except for Heart Attack and Stroke) the Lifestyle Management Program<sup>7</sup> will refer you to the best-suited rehabilitation program. The initial consultation fee will also be waived (once per Insured).



### **Protection for Your Newborn**

Everyone wants to protect their babies as much as they can. Under the Plan, should an infant be born to you or your spouse, your new born will be covered by Crisis Benefit or Death Benefit under Special Benefit for Infant<sup>8</sup> at no extra premium or impact on your own coverage to the child's 5<sup>th</sup> birthday – 20% of the Initial Sum Insured of this Policy (up to HK\$200,000 / US\$25,000 per infant).



### **Medical Check-up for Your Wellness**

Early detection is always the better option. To help you maintain your well-being, the Plan offers a Medical Check-up<sup>9</sup> on each of the 2<sup>nd</sup>, 4<sup>th</sup>, 6<sup>th</sup>, 8<sup>th</sup> and 10<sup>th</sup> Policy Anniversaries of the Plan.



### Reward for Healthy Body

In addition to the medical check-up, the Plan rewards you if you are in health. The Plan offers you Guaranteed Cash Value from the 3<sup>rd</sup> Policy Anniversary and Special Bonus from the 5<sup>th</sup> Policy Anniversary (if any)<sup>10</sup> when you surrender the policy before 100% of the Initial Sum Insured is claimed.



### Professional Services Are Around You

As part of our promise of care, the Plan also gives you access to a priority health coaching service: Crisis XDefender Supreme – PREMIER THE ONEcierge One Team Health Management (“PREMIER THE ONEcierge”)<sup>11</sup>. You can simply call the hotline and PREMIER THE ONEcierge will provide you with a leading network of specialists so you can receive the most suitable treatment from the best-suited doctor and top-tiered network hospitals in the Pan-Asia Region. When your crisis claim is approved, you are given access to some of the highest-ranked medical institutions in the U.S. for a second medical opinion<sup>12</sup>.



### Extended Coverage for Your Loved Ones – Waiver of Premium on Death Benefit (Parents) / (Spouse) Rider (optional rider)<sup>13</sup>

This optional rider could help you give your loved ones a much-needed safety net – with no additional health information required. If the parent of an insured child (as a Policy Owner or Parent Contingent Owner) or the spouse of an insured adult (as a Spouse Owner or Spouse Beneficiary) passes away before the end of premium payment term, we will waive the future premiums of the basic plan and this rider to lighten the burden. For the purpose of these riders, the parent of an insured child or the spouse of an insured adult must be at or below the age of 50 (age next birthday) at the time of policy application, or request for nomination or change of Policy Owner, Parent Contingent Owner, Spouse Owner or Spouse Beneficiary (as the case may be), these benefits will become effective once the policy or the relevant request has been in force for 2 years.

**Get real. Don't lag behind. Talk to us today!**

# Customer Case Study

(This case is assumed and only for illustrative purpose)



**Insured: Ms Emily Wong**  
**Age next birthday: 30**  
**Job: Sales Manager**  
**Initial Sum Insured of the Plan: HK\$1,000,000**  
**Premium Payment Term of the Plan: 20 years**

## Background:

Emily is married and loves travelling and enjoying an active life.

She wants to better plan against the unexpected, like possible critical illnesses. She purchased the Plan to safeguard her capital and lower the financial burden in the event of critical illness.

**Jan 2020**

Purchased the Plan

**Jan 2024**

Through medical check-up, it is discovered that there is a tumour in breast that a doctor suggests to be malignant potential; and can only to be confirmed as benign by complete surgical removal for diagnosis purpose. She undergoes a complete surgical excision of the solid tumour which is then confirmed by histopathological examination as a non-cancerous benign tumour. The **Benign Tumour Extra Benefit** is payable, which is equal to HK\$50,000 (5% of the Initial Sum Insured).

**Feb 2028**

She has chest pains and is unfortunately diagnosed with carcinoma-in-situ of breast and hence **Special Disease Benefit** is claimed, which is 20% of the Initial Sum Insured (HK\$200,000) plus proportionate Special Bonus (if any).

After the payment of Special Disease Benefit, the Current Sum Insured will be reduced accordingly. Death Benefit, Crisis Benefit, Guaranteed Cash Value, future premium and Special Bonus (if any) will be reduced accordingly.

**May 2029**

She is diagnosed with a Heart Attack. **Crisis Benefit**, which is 100% of Current Sum Insured or equivalent to 80% of Initial Sum Insured (HK\$800,000) and **Additional Coverage Benefit**, which is 75% of Initial Sum Insured (HK\$750,000) are payable, 155% of Initial Sum Insured (HK\$1,550,000) in total, plus Special Bonus (if any) are claimed.

She can also have the coverage and support from **Rehabilitation Benefit** and **Lifestyle Management Program**. As over 100% of Initial Sum Insured of her policy has been claimed, **no more premium is required to be paid** and the Guaranteed Cash Value is reduced to zero accordingly, and any future Special Bonus will not be declared.

**July 2030**

The carcinoma-in-situ of breast has progressed to breast cancer. 1 year waiting period has passed and hence **Multiple Benefit for Designated Crisis** is paid and the amount is HK\$1,200,000 (120% of Initial Sum Insured).

**July 2033**

Unfortunately the breast cancer continues and has not been completed in remission. 3 years waiting period has passed and hence **Multiple Benefit for Designated Crisis** is paid and the amount is HK\$1,200,000 (120% of Initial Sum Insured).

# Plan Summary

Plan Type	Basic Plan		
Benefit Term	To age 100		
Issue Age (Age Next Birthday)	1 - 70	1 - 60	1 - 55
Premium Payment Term	10 years	15 years	20 years
Premium Structure	The premium is non-guaranteed <sup>14</sup> but it will not be increased based on the age of the Insured on his or her next birthday.		
Currency	HKD / USD		
Premium Payment Mode	Monthly / Semi-Annually / Annually		
Minimum Initial Sum Insured	HK\$120,000 / US\$15,000 (per policy)		
Maximum Initial Sum Insured <sup>15</sup>	HK\$12,000,000 / US\$1,500,000 (per life)		
Crisis Benefit <sup>1</sup>	Current Sum Insured + Special Bonus (if any) <sup>10</sup>		
Multiple Benefit for Designated Crises <sup>1,3</sup>	If the Crisis Benefit is paid, in the event the Insured is subsequently diagnosed with Cancer, Heart Attack or Stroke, an additional 120% of Initial Sum Insured will be paid up to 5 times.		
Special Disease Benefit <sup>1,2</sup>	Advanced payment of 20% of Initial Sum Insured + proportionate Special Bonus (if any) <sup>10</sup> (subject to a maximum of HK\$400,000 / US\$50,000 per Insured of each claim under all policies of the Crisis XDefender Series for Carcinoma-in-situ or Early Stage Malignancy of Specific Organs, Angioplasty of Coronary Artery and Special Diseases for Juvenile)		
Additional Coverage Benefit <sup>4</sup>	Additional 75% of the Initial Sum Insured (for the Insured whose issued age is 35 or below at next birthday) or 60% of the Initial Sum Insured (for the insured whose issued age is above 35 at next birthday) will be payable if the Insured is diagnosed with covered Crises or passes away before the 15 <sup>th</sup> Policy Anniversary		
Benign Tumour Extra Benefit <sup>1,5</sup>	Group 1: Surgical Excision of Covered Benign Tumour of (i) breast, (ii) ovary, or (iii) uterus - Additional 5% of Initial Sum Insured (subject to a maximum of HK\$80,000 / US\$10,000 per Insured of each claim under all policies of Crisis XDefender Series of each organ)		
	Group 2: Surgical Excision of Covered Benign Tumour of (i) adrenal gland, (ii) bone, (iii) kidney, (iv) liver, (v) lung, (vi) nerve in cranium or spine, (vii) pancreas, (viii) pituitary gland, or (ix) testis - Additional 15% of Initial Sum Insured (subject to a maximum of HK\$200,000 / US\$25,000 per Insured of each claim under all policies of Crisis XDefender Series of each organ), less amount of Benign Tumour Extra Benefit claim paid and / or payable		
	The Benign Tumour Extra Benefit for each organ will be payable once only. A maximum of all claims paid and / or payable under this benefit is subject to the lower of: (i) 15% of Initial Sum Insured; or (ii) HK\$200,000 / US\$25,000 per Insured under all policies of Crisis XDefender Series		
Rehabilitation Benefit <sup>6</sup>	Additional 1% of the Initial Sum Insured is payable per month after Crisis Benefit for Heart Attack or Stroke is payable (up to a maximum of 6 months)		
Special Benefit for Infant <sup>8</sup>	If the Insured (or the Insured's spouse) gives birth to a child, the new-born infant shall be covered by the Crisis Benefit or Death Benefit (20% of the Initial Sum Insured of this Policy once per new-born infant and up to a per newborn infant of HK\$200,000 / US\$25,000 under all policies of the Insured and / or Insured's spouse of Crisis XDefender Series) from the attained age of 15 days until the child's 5 <sup>th</sup> birthday or termination of the Policy of the Insured, whichever is earlier		
Surrender Benefit / Maturity Benefit	Guaranteed Cash Value + Special Bonus (if any) <sup>10</sup>		
Death Benefit <sup>1</sup>	Current Sum Insured + Special Bonus (if any) <sup>10</sup>		
Medical Check-up <sup>9</sup>	Medical check-up coupon will be offered on each of the 2 <sup>nd</sup> , 4 <sup>th</sup> , 6 <sup>th</sup> , 8 <sup>th</sup> and 10 <sup>th</sup> Policy Anniversaries of the Plan if all premiums are paid when due		
Lifestyle Management Program <sup>7</sup>	Service Program		
Crisis XDefender Supreme – PREMIER THE ONEcierge One Team Health Management <sup>11</sup>	Service Program		
Second Medical Opinion <sup>12</sup>	Service Program		
Extended Grace Period Benefit <sup>16</sup>	Available since the 2 <sup>nd</sup> Policy Year, if the Policy Owner becomes a parent, gets married or divorced, or becomes involuntarily unemployed during the Premium Payment Term of the Plan, the Policy Owner can choose to apply for the Extended Grace Period Benefit to stay protected by this Plan while enjoying an extended grace period for premium payment up to 365 days		
Waiver of Premium on Death Benefit (Parents) / (Spouse) Rider (optional rider) <sup>15</sup>	After the policy has been in force for 2 years, if the parent of an insured child (as a Policy Owner or Parent Contingent Owner) or the spouse of an insured adult (as a Spouse Owner or Spouse Beneficiary) passes away, the future premiums of the basic plan and this rider will be waived.		

Please refer to the Policy Provisions for details of benefits and exclusions.

Crises covered in Crisis XDefender Supreme		
Group 1: Cancer	- Cancer	
Group 2: Illnesses related to Organ Failure	<ul style="list-style-type: none"> <li>- Aplastic Anaemia</li> <li>- Chronic Liver Disease</li> <li>- Chronic Lung Disease</li> <li>- End Stage Lung Disease (including Chronic Obstructive Lung Disease, Severe Bronchiectasis and Severe Emphysema)</li> <li>- Fulminant Hepatitis</li> <li>- HIV Due to Blood Transfusion</li> </ul>	<ul style="list-style-type: none"> <li>- Major Organ Transplantation (lung, pancreas, liver, bone marrow)</li> <li>- Medullary Cystic Disease</li> <li>- Occupationally Acquired HIV</li> <li>- Severe Pulmonary Fibrosis</li> <li>- Severe Systemic Lupus Erythematosus (S.L.E.) with Lupus Nephritis</li> <li>- Surgical Removal of One Lung</li> </ul>
Group 3: Illnesses related to Circulatory System	<ul style="list-style-type: none"> <li>- Cardiomyopathy</li> <li>- Coronary Artery Disease Surgery</li> <li>- Eisenmenger's Syndrome</li> <li>- Heart Attack</li> <li>- Heart Valve Surgery</li> <li>- Infective Endocarditis</li> </ul>	<ul style="list-style-type: none"> <li>- Kidney Failure</li> <li>- Major Organ Transplantation (kidney, heart)</li> <li>- Other Serious Coronary Artery Disease</li> <li>- Primary Pulmonary Arterial Hypertension</li> <li>- Stroke</li> <li>- Surgery to Aorta</li> </ul>
Group 4: Illnesses related to Nervous System	<ul style="list-style-type: none"> <li>- Alzheimer's Disease</li> <li>- Apallic Syndrome</li> <li>- Bacterial Meningitis</li> <li>- Benign Brain Tumour</li> <li>- Blindness</li> <li>- Creutzfeld-Jacob Disease</li> <li>- Encephalitis</li> <li>- Loss of Hearing@</li> <li>- Major Head Trauma</li> <li>- Motor Neurone Disease</li> </ul>	<ul style="list-style-type: none"> <li>- Multiple Sclerosis</li> <li>- Muscular Dystrophy</li> <li>- Paralysis</li> <li>- Parkinson's Disease</li> <li>- Poliomyelitis</li> <li>- Progressive Bulbar Palsy</li> <li>- Progressive Muscular Atrophy</li> <li>- Progressive Supranuclear Palsy</li> <li>- Severe Myasthenia Gravis</li> </ul>
Group 5: Other Illnesses	<ul style="list-style-type: none"> <li>- Amputation of Feet due to Complication from Diabetes Mellitus</li> <li>- Chronic Adrenal Insufficiency</li> <li>- Chronic Relapsing Pancreatitis</li> <li>- Coma</li> <li>- Crohn's Disease</li> <li>- Ebola</li> <li>- Elephantiasis</li> <li>- Loss of Independent Existence</li> <li>- Loss of Limbs</li> </ul>	<ul style="list-style-type: none"> <li>- Loss of Speech</li> <li>- Major Burns</li> <li>- Necrotizing Fasciitis</li> <li>- Pheochromocytoma</li> <li>- Severe Osteoporosis*</li> <li>- Severe Rheumatoid Arthritis</li> <li>- Systemic Sclerosis</li> <li>- Terminal Illness</li> <li>- Ulcerative Colitis</li> </ul>

Special Diseases covered in Crisis XDefender Supreme		
Group 1: Cancer^	<ul style="list-style-type: none"> <li>- Carcinoma-in-situ of Specific Organs (all organs except skin, including but not limited to the organs listed below)</li> </ul>	
	<ul style="list-style-type: none"> <li>a) Breast</li> <li>b) Cervix Uteri</li> <li>c) Colon and Rectum</li> <li>d) Fallopian Tube</li> <li>e) Lung</li> <li>f) Liver</li> <li>g) Nasopharynx</li> <li>h) Ovary</li> <li>i) Pancreas</li> </ul>	<ul style="list-style-type: none"> <li>j) Penis</li> <li>k) Stomach and Esophagus</li> <li>l) Testis</li> <li>m) Urinary Tract (for the purpose of in-situ cancers of the bladder, stage Ta of papillary carcinoma is included)</li> <li>n) Uterus</li> <li>o) Vagina</li> </ul>
	<ul style="list-style-type: none"> <li>- Early Stage Malignancy of Specific Organs</li> <li>a) Chronic Lymphocytic Leukaemia</li> <li>b) Prostate</li> </ul>	<ul style="list-style-type: none"> <li>c) Thyroid</li> <li>d) Non Melanoma Skin Cancer</li> </ul>
Group 2: Illnesses related to Organ Failure	<ul style="list-style-type: none"> <li>- Acute Aplastic Anaemia</li> <li>- Biliary Tract Reconstruction Surgery</li> <li>- Liver Surgery</li> <li>- Miliary Tuberculosis</li> <li>- Moderately Severe Chronic Lung Disease</li> </ul>	<ul style="list-style-type: none"> <li>- Moderately Severe Systemic Lupus Erythematosus (S.L.E.) with Lupus Nephritis</li> <li>- Skin Transplantation</li> <li>- Surgical Removal of One Kidney</li> </ul>
Group 3: Illnesses related to Circulatory System	<ul style="list-style-type: none"> <li>- Angioplasty for Carotid Arteries</li> <li>- Angioplasty of Coronary Artery^</li> <li>- Cardiac Pacemaker / Defibrillator Insertion</li> <li>- Carotid Artery Surgery</li> <li>- Early Cardiomyopathy</li> <li>- Early Renal Failure</li> </ul>	<ul style="list-style-type: none"> <li>- Insertion of a Vena-Cava Filter</li> <li>- Keyhole Coronary Bypass Surgery</li> <li>- Minimally Invasive Surgery to Aorta</li> <li>- Percutaneous Valve Surgery</li> <li>- Pericardiectomy</li> <li>- Secondary Pulmonary Hypertension</li> </ul>



### Special Diseases Covered in Crisis XDefender Supreme

Group 4: Illnesses related to Nervous System	<ul style="list-style-type: none"> <li>- Cochlear Implant Surgery</li> <li>- Cerebral Aneurysm Requiring Surgery</li> <li>- Early Amyotrophic Lateral Sclerosis</li> <li>- Early Multiple Sclerosis</li> <li>- Early Progressive Bulbar Palsy</li> <li>- Early Progressive Muscular Atrophy</li> <li>- Less Severe Encephalitis</li> <li>- Loss of Sight in One Eye</li> <li>- Moderately Severe Alzheimer's Disease</li> </ul>	<ul style="list-style-type: none"> <li>- Moderately Severe Bacterial Meningitis</li> <li>- Moderately Severe Brain Damage</li> <li>- Moderately Severe Muscular Dystrophy</li> <li>- Moderately Severe Paralysis</li> <li>- Moderately Severe Parkinson's Disease</li> <li>- Moderately Severe Poliomyelitis</li> <li>- Severe Psychiatric Illness</li> <li>- Surgery for Subdural Haematoma</li> <li>- Surgical Removal of Pituitary Tumour</li> </ul>
Group 5: Others Illnesses	<ul style="list-style-type: none"> <li>- Acute Necrohemorrhagic Pancreatitis</li> <li>- Adrenalectomy for Adrenal Adenoma</li> <li>- Amputation of One Foot Due to Complication from Diabetes Mellitus</li> <li>- Coma for 48 hours</li> <li>- Crohn's Disease (Regional Enteritis)</li> <li>- Diabetic Retinopathy</li> </ul>	<ul style="list-style-type: none"> <li>- Early Elephantiasis</li> <li>- Loss of Speech due to Vocal Cord Paralysis</li> <li>- Moderately Severe Burns</li> <li>- Moderately Severe Rheumatoid Arthritis</li> <li>- Osteoporosis with Fractures*</li> <li>- Severance of One Limb</li> <li>- Severe Central or Mixed Sleep Apnea</li> </ul>

### Special Diseases for Juvenile<sup>^</sup> (age next birthday 1 (15 days) - 18) covered in Crisis XDefender Supreme

- |   |   |
|---|---|
| <ul style="list-style-type: none"> <li>- Autism</li> <li>- Dengue Haemorrhagic Fever</li> <li>- Juvenile Huntington Disease</li> <li>- Kawasaki Disease</li> <li>- Marble Bone Disease (Osteogenesis)</li> <li>- Osteogenesis Imperfecta</li> </ul> | <ul style="list-style-type: none"> <li>- Rheumatic Fever with Valvular Impairment</li> <li>- Severe Asthma</li> <li>- Still's Disease</li> <li>- Type 1 Diabetes Mellitus</li> <li>- Type I Juvenile Spinal Amyotrophy</li> <li>- Type II Juvenile Spinal Amyotrophy</li> </ul> |
|---|---|

### Benign Disease Covered in Crisis XDefender Supreme

- Surgical Excision of Covered Benign Tumour<sup>#</sup>

<sup>@</sup> The claim for Loss of Hearing will only be paid if at the time of diagnosis the Insured is aged 3 (age next birthday) or above.

\* The claim for Severe Osteoporosis and Osteoporosis with Fractures will only be paid if at the time of diagnosis the Insured is aged 70 (age next birthday) or below.

<sup>^</sup> Subject to HK\$400,000/US\$50,000 per Insured of each claim under all policies of Crisis XDefender Series.

<sup>#</sup> Covered Benign Tumour includes: (a) adrenal gland, (b) bone, (c) breast, (d) kidney, (e) liver, (f) lung, (g) nerve in cranium or spine, (h) ovary, (i) pancreas, (j) pituitary gland, (k) testis, or (l) uterus.

The decision for excision of tumour must be recommended by specialist which the tumour is considered to have a definite and significant malignant potential according to appropriate medical criteria after full and appropriate investigations and must be in accordance with accepted medical protocols and based on clinical, imaging and any histopathological evidence.

Covered Benign Tumour specifically excluded:

- surgery for ovarian cysts including but not limited to simple cysts, endometrial cysts (endometriomas) of the ovary;
- surgery for removal of tumours in organs not listed above or surgery for removal of gall bladder, gall stones, kidney stones, benign hormone secreting tumours of the adrenal glands; and
- surgery for the following causes in all organs:
  - High grade dysplasia, Lipoma, Haemangioma, non-solid tumours including simple cysts;
  - Tumours which were clearly established as benign or of low malignant potential on radiological criteria or biopsy;
  - Tumours removed for reasons other than ruling out cancer; and
  - Partial excision of tumour or other procedures including open or closed biopsies, needle aspiration biopsy or cytology, aspiration, embolization or any procedure to reduce tumour size.

Note: Benefits relating to Crisis, Special Disease and Benign Disease are payable according to the Policy Provisions. Please refer to the definition of Crises, Special Diseases and Benign Disease in the Policy Provisions for the details of Crises, Special Diseases and Benign Disease.

## Remarks:

- 1 FWD Life Insurance Company (Macau) Limited ("FWD") will pay the Crisis Benefit / Special Disease Benefit / Benign Tumour Extra Benefit / Multiple Benefit for Designated Crises only where the First Symptoms appear, the condition occurs and the diagnosis or surgery relating to the relevant Disease occurs after the first 90 days from the Policy Date or the date of last reinstatement, whichever is later. This first 90 days limitation does not apply if any Disease is solely and directly caused by an Accident and independently of any cause. Upon the payment of claims under Special Disease Benefit, the Current Sum Insured of the policy will be reduced accordingly. Current Sum Insured means the Initial Sum Insured less any claims paid and / or payable for Special Disease Benefit under the Policy. Death Benefit, Crisis Benefit, Guaranteed Cash Value, future premium and Special Bonus (if any) will be reduced accordingly. The following payment(s) under each claim of Special Disease Benefit will not be higher than the reduced Current Sum Insured. If the total claims paid of Crisis Benefit and / or Special Disease Benefit under the Policy reach 100% of the Initial Sum Insured while the Policy is still in force, FWD will waive the balance of premium payable under the Policy falling due immediately after the date following the diagnosis of the Crisis or Special Disease which leads the total claim paid under the Policy to reach 100% of the Initial Sum Insured and all the riders will be terminated.
- 2 Each Special Disease is payable once only (except for Carcinoma-in-situ or Early Stage Malignancy of Specific Organs and Angioplasty of Coronary Artery). A maximum of two claims can be made in respect of Carcinoma-in-situ or Early Stage Malignancy of Specific Organs and Angioplasty of Coronary Artery under the Plan. To be eligible for the second claim under Carcinoma-in-situ or Early Stage Malignancy of Specific Organs, the claims must be a Carcinoma-in-situ or Early Stage Malignancy of one of the covered organs that is different from the organ(s) of the previous claims for which benefit(s) have / has been paid. If the relevant covered organ has both a left and a right component (such as, but not limited to the lungs or breasts), the left side and right side of the organ shall be considered one and the same organ. To be eligible for the second claim under Angioplasty of Coronary Artery, the treatment must be performed on a location of stenosis or obstruction in a major coronary artery where no stenosis greater than 60 percent was identified in the coronary angiogram relating to the first claim of this illness, for which benefit has been paid. A maximum of HK\$400,000 / US\$50,000 per Insured of each claim is payable under all policies of Crisis XDefender Series for Carcinoma-in-situ or Early Stage Malignancy of Specific Organs, Angioplasty of Coronary Artery and Special Diseases for Juvenile. This benefit will be payable until the total payment of Crisis Benefit and / or Special Disease Benefit under the Policy reach 100% of the Initial Sum Insured.
- 3 While the policy is in force, this Multiple Benefit for Designated Crises is payable if, following payment of a Crisis Benefit, the Insured is diagnosed with a subsequent Cancer, Heart Attack or Stroke and survives for a period of at least 14 days from the date of First Confirmed Diagnosis of such respective Cancer (except for Continuous Cancer), Heart Attack or Stroke, subject to the following conditions:
  - (a) If the immediately preceding claim paid under Crisis Benefit for any Crisis or Multiple Benefit for Designated Crises for Cancer, Heart Attack or Stroke covered by this policy, subsequent claim(s) for Cancer, Heart Attack or Stroke can be made provided that the First Confirmed Diagnosis of the subsequent claim(s) for Cancer, Heart Attack or Stroke shall be at least 1 year after the date of the First Confirmed Diagnosis of the immediately preceding Crisis Benefit claim for any Crisis or Multiple Benefit for Designated Crises claim for Cancer, Heart Attack or Stroke covered by this policy (for which benefit has been paid under the policy); and
  - (b) If any preceding claim for Cancer has been paid under Crisis Benefit or Multiple Benefit for Designated Crises, subsequent claim(s) for Cancer (Continuous Cancer, recurring Cancer and Cancer in different sites) can be made provided that,
    - if the subsequent claim for Cancer is a Continuous Cancer of the preceding Cancer claim (for which benefit has been paid), the Cancer of the subsequent claim shall be covered only if 3 years has passed since the date of the confirmed diagnosis of that preceding claim for Cancer which has not been completed in remission;
    - if the subsequent claim for Cancer is a Recurrence of the Cancer of the preceding Cancer claim (for which benefit has been paid), the Cancer of the subsequent claim shall be covered only if the First Confirmed Diagnosis of the subsequent Cancer takes place at least 3 years after the date of the First Confirmed Diagnosis of that preceding claim for Cancer (for which benefit has been paid);
    - if the subsequent claim for Cancer is not a Continuous Cancer or Recurrence of the Cancer of the preceding Cancer claim (for which benefit has been paid), the Cancer of the subsequent claim shall be covered only if the First Confirmed Diagnosis of the subsequent Cancer takes place at least 1 year after the date of the First Confirmed Diagnosis of that preceding claim for Cancer (for which benefit has been paid).

This benefit cannot be claimed more than 5 times under this policy. In case the Insured is aged 70 (age next birthday) or above and makes any subsequent claim for prostate cancer resulting from the Continuous Cancer of a previous prostate cancer for which a previous claim was made, the benefit will only be payable if the Insured has received or is in the process of receiving the full course of cancer-directed surgery, radiotherapy, chemotherapy, targeted therapy or a combination of these treatments (excluding hormonal therapy) which is Medically Necessary during the intervening period between the diagnosis of the previous and subsequent prostate cancer.
- 4 The benefit is only applicable to Insured whose issue age is 1 – 65 (age next birthday). Additional 75% of the Initial Sum Insured (for the insured whose issued age is 35 or below at next birthday) or 60% of the Initial Sum Insured (for the insured whose issued age is above 35 at next birthday) will be payable as at the date when the Crisis Benefit or Death Benefit is payable under the Policy. This benefit will be payable once only under the Policy and will be ceased (i) upon the termination of the Policy; (ii) once the Crisis Benefit or Death Benefit has been paid or becomes payable; or (iii) on the 15th Policy Anniversary, whichever is the earliest. This additional benefit amount will not be deducted from the Current Sum Insured.
- 5 Surgical Excision of Covered Benign Tumour means an actual undergoing of a complete surgical excision of a Solid Tumour and such tumour is excised specifically for the purpose of ruling out cancer and is confirmed by histopathological examination in writing by a specialist as a non-cancerous benign tumour. This additional benefit amount will not be deducted from the Current Sum Insured.
- 6 While the Insured is alive and the Policy is in force, when the Crisis Benefit for Heart Attack or Stroke is payable, Rehabilitation Benefit will be payable for every month (up to a maximum of 6 months) starting from the payment date of the Crisis Benefit for Heart Attack or Stroke. This benefit will be payable once only, and will not be deducted from the Current Sum Insured.
- 7 Lifestyle Management Program is provided by HealthMutual Group Limited ("HMG") and its healthcare network team currently. FWD reserves the right to vary the services in its sole discretion without further notice.

While this Policy is in force and the Insured is still alive, when Crisis Benefit and / or Special Disease Benefit for Group 3 Diseases (Illnesses related to Circulatory System) is payable, the Insured is eligible for the Lifestyle Management Program, subject to the following conditions:

  - When the Crisis Benefit for Heart Attack or Stroke is payable, FWD will provide a designated rehabilitation program to the Insured and the fee will be waived once per life.
  - When the Crisis Benefit and / or Special Disease Benefit for Group 3 Diseases (Illnesses related to Circulatory System, except Heart Attack or Stroke) is payable, FWD will refer the Insured to the designated rehabilitation programs and pay the initial consultation fee, once per life, of the program chosen by the Insured. All other relevant fees and charges will be borne by the Insured. FWD shall not be responsible for any act, negligence or failure to act on the part of HMG and its healthcare network team. This service is only available in Hong Kong region.
- 8 This additional benefit is available if the Policy has been in effect for at least 2 consecutive Policy Years after the Policy Date or the date of reinstatement, whichever is later. Policy Owners have to notify FWD within 180 days from the date of birth of the infant for application of this benefit. Once the coverage of the covered child has been in effect by FWD, upon the death of the covered child or if the covered child has the first symptoms of a Crisis that appear after the first 90 days from the coverage effective date and has the first confirmed diagnosis of the Crisis subsequently, FWD will pay the benefit. Any claim of the new-born infant under this benefit shall not be deducted from the Insured's Current Sum Insured and will not affect the other benefits available for the Insured under this Policy.
- 9 Available for Insured whose issue age is 18 (age next birthday) or above. If the issued age of Insured is 17 (age next birthday) or below, medical check-up coupon will be available biennially to the Insured starting from the Policy Anniversary of the Insured's age of 20 at next birthday, and is entitled to a maximum of 5 medical check-up coupons.
- 10 When the Policy has been in effect for 5 years or more, a Special Bonus, which is not guaranteed, will be payable under the Policy upon the payment of Crisis Benefit or Death Benefit under the Policy, surrender, maturity of the Policy or at the end of the one year reinstatement period if the policy lapses and is not reinstated within that period. A proportionate Special Bonus, if any, will be also paid upon payment of the Special Disease Benefit or partial surrender. Special Bonus (if any) will then be reduced on a pro rata basis accordingly. Special Bonus will not be payable when total payment of Crisis Benefit and / or Special Disease Benefit under the Policy reach 100% of the Initial Sum Insured.
- 11 PREMIER THE ONEcierge, provided by HMG and its healthcare network team and Parkway Hospitals Singapore ("Parkway") is not a part of the Policy or benefit item under the Policy Provisions and only applicable to the Plan. FWD reserves the right to terminate or vary the service in its sole discretion without further notice. FWD shall not be responsible for any act, negligence or failure to act on the part of HMG and its healthcare network team and Parkway. This service is only available in the Pan-Asia Region. The hotline for PREMIER THE ONEcierge is (853) 8988 6066 for Macau, (852) 8120 9066 for Hong Kong and there is also a toll-free number for Mainland, 400 9303078. For details, please refer to the attached PREMIER THE ONEcierge's brochure.
- 12 Second Medical Opinion is provided by International SOS currently and is not guaranteed renewable. All relevant fees and charges (if any) of this service shall be borne by the Insured. FWD shall not be responsible for any act or failure to act on the part of International SOS. Details of the services may be revised from time to time without FWD's prior notice.
- 13 The premium of Waiver of Premium on Death Benefit (Parents) / (Spouse) Rider is non-guaranteed but it will not be increased based on the age next birthday of the Policy Owner, Parent Contingent Owner, Spouse Owner or Spouse Beneficiary (as the case may be).

For Waiver of Premium on Death Benefit (Parents) / (Spouse) Rider selected at time of application.

(i) Waiver of Premium on Death Benefit (Parents) Rider

An insured child must be below the age of 19 (age next birthday) at the time of policy application. After the policy has been in force for 2 years, if you (i.e. the Policy Owner) and / or the Parent Contingent Owner pass(es) away, FWD will waive the premiums payable under the basic plan and this rider which fall due from the date of the Policy Owner's death or the death of Parent Contingent Owner (as the case may be) up to and including the Policy Anniversary immediately preceding the twenty fifth (25th) birthday of the Insured. You and the Parent Contingent Owner need to be at or below the age of 50 (age next birthday) at the time of policy application, or at the date of request for nomination or change of contingent ownership of the policy (as the case may be). The Parent Contingent Owner must be the insured child's parent. For the purpose of this rider, you may reassign a parent who is at or below the age of 50 (age next birthday) as the Policy Owner or Parent Contingent Owner any time while the policy is in effect. This waiver of premium benefit with respect to the reassignment will be effective after 2 years of the relevant reassignment, subject to the age and relationship requirements described above.

(ii) Waiver of Premium on Death Benefit (Spouse) Rider

An insured adult must be at the age of 19 (age next birthday) or above at the time of policy application. After the policy has been in force for 2 years, if the insured's spouse, who is (i) the Policy Owner, (ii) a sole beneficiary or (iii) one of the beneficiaries of the policy, passes away, FWD will waive the balance of premium payable under the basic plan and this rider. The insured's spouse must be at or below the age of 50 (age next birthday) at the time of policy application, or the request for nomination or change of Spouse Owner or Spouse Beneficiary (as the case may be). For the purpose of this rider, you may reassign your spouse who is at or below the age of 50 (age next birthday) as the Policy Owner or beneficiary any time while the policy is in effect. This waiver of premium benefit with respect to the reassignment will be effective after 2 years of the relevant reassignment, subject to the age and relationship requirements described above.
- 14 Premium rates are not guaranteed and FWD reserves the right to review the premium rates from time to time.
- 15 Subject to the aggregate maximum Sum Insured per life of all designated critical illness policies, which is determined by FWD's prevailing rules and regulations.
- 16 You must provide FWD with all documents and information FWD requires within 30 days from the date you first receive relevant proof. If any premium is unpaid at the end of the Extended Grace Period, the premium shall be in default and the Policy shall cease to be in force from the date of the first unpaid premium was due without prejudice to any claim arising prior to the date the Policy ceases to be in force. Any due and unpaid premium shall be deducted from any benefit otherwise payable. You are only entitled to apply and claim for the Extended Grace Period Benefit once under this Policy.

# Dividend / Bonus Information & Investment Strategy

## Dividend / Bonus Information

Please refer to FWD's website (<https://www.fwd.com.mo/en/regulatory-disclosures/fulfilment-ratios/>) for dividend / bonus history. The dividend / bonus declaration philosophy, investment strategy and investment vehicle of FWD are shown below (Please refer to FWD's website for latest information: <https://www.fwd.com.mo/en/regulatory-disclosures/dividend-bonus-declaration-philosophy/>):

## Dividend / Bonus Declaration Philosophy

FWD Life Insurance Company (Macau) Limited ("FWD" or "We") issues participating policies, which offer the policyholders ("You") with dividend / bonus benefits that are not guaranteed. Dividend / bonus includes annual dividend<sup>1</sup>, terminal dividend, reversionary bonus and special bonus.

Through the dividend / bonus declaration, you participate in the financial performance of the participating products. The financial performance of participating products covers the experience and future outlook of a number of factors, including but not limited to:

1. Investment return;
2. Expenses;
3. Persistency;
4. Claims experience.

FWD reviews the dividend / bonus at least annually based on our dividend policy. The dividend / bonus could be adjusted if the financial performance is different from the expectation, and as a result the actual declared dividend / bonus may be different from the benefit illustrations.

The dividend / bonus recommendation is reviewed and approved by our Board of Directors (the "Board"), with written declaration by the Chairman of the Board, an Independent Non-Executive Director and the Appointed Actuary on due regard to our dividend policy as well as the principle of fair treatment of customers.

The current year and projected dividend / bonus would be communicated to you at least annually. Any changes in the current year and projected dividend / bonus will be reflected in the policy annual statement.

### Smoothing

Financial performance is unforeseeable. To facilitate your financial planning, we have a smoothing process aiming to deliver a more stable dividend / bonus payouts during the policy term.

When the financial performance is better (worse) than expected, we may hold back a portion of the gains (losses), which will be passed back to you over the future years to ensure a more stable dividend / bonus payouts. Due to the variation of features and benefits of different products, different levels of smoothing may also be applied.

### Pooling

Consistent with the nature of insurance contracts, we also group similar policies together to pool the risks amongst a larger number of policyholders to provide diversification benefits, which help to stabilize the financial performance (and hence the dividend / bonus payouts).

To maintain the fairness between policyholders, we may also separate different generations of policies of the same product into different buckets with different dividend / bonus scales, with an aim to more closely reflect the underlying financial performance. As a result, the frequency and magnitude of the dividend / bonus adjustments may vary among different products and buckets. In general, the adjustments on dividend / bonus are more frequent and significant for products with higher risk profile.

## Investment Strategy

FWD's investment strategies are customized for different products to optimize the return. In particular, these asset portfolios employ a balanced asset allocation investment strategy, which consists of

- Investment-grade fixed income type securities
- Equity-type investments to enhance the investment performance in the long run. This may include listed equity, hedge funds, mutual funds, private equity and property

The current long-term target asset allocation of this product is as follows:

Asset type	Target asset allocation (%)
Fixed income type securities	50% - 70% of Target
Equity-type investments	30% - 50% of Target

The asset portfolios also target to provide diversification across different geographic regions and industries to the extent the size of portfolio can support.

Currency exposure of the underlying policies is mitigated by closely matching either through direct investments in the same currency denomination or the use of currency hedging instruments. Currently, the majority of the asset is invested in the United States and Asia Pacific and denominated in USD.

Furthermore, the asset portfolio is actively managed by investment professionals to closely monitor the investment performance. In addition to conducting regular review, FWD also reserves the right to change the investment strategy and shall notify policyholders for any material changes.

### Investment Vehicle

The dividend / bonus rate will be influenced by the performance of the underlying investment portfolio, which consists of both fixed income type securities and equity-type investments. The performance is not static and will be highly affected by the change in market conditions:

#### Fixed income type securities

- The return of fixed income type securities arise from the interest income ("the yield") attained at the purchase of the securities. Under a higher (lower) market interest rates environment, the company is more likely to attain higher (lower) interest income with the new money (e.g., proceeds from coupons, maturities, new contributions);
- The defaults or downgrades of the fixed income type securities will result in unfavorable investment performance.

#### Equity-type investments

- The movement of the market price of the equity-type investments will result in change in the market value of the portfolio. Rise (fall) in the market price will increase (decrease) the market value of the portfolio.
- The change in dividend-type income from the equity-type investments will impact the investment results. Higher (lower) dividend-type income from the underlying investment will improve (worsen) the investment results.

<sup>1</sup>Include interest on accumulated dividends

# Key Product Risks

## Credit Risk

This product is an insurance policy issued by FWD. The application of this insurance product and all benefits payable under your policy are subject to the credit risk of FWD. You will bear the default risk in the event that FWD is unable to satisfy its financial obligations under this insurance contract.

## Liquidity Risk

This product is a long term insurance policy. This policy of long term insurance will be made for certain determined term of years starting from the policy effective date to the policy maturity date. The policy contains value and, if you surrender your policy in the early policy years or before its maturity date, the amount you get back may be considerably less than the total premium you have paid. Application of the Plan may constitute the liquidity risk to your financial condition. You need to bear the liquidity risk associated with the Plan.

## Exchange Rate and Currency Risk

The application of this insurance product with the policy currency denominated in a foreign currency is subject to that foreign currency's exchange rate and currency risk. The foreign currency may be subject to the relevant regulatory bodies' control (for example, exchange restrictions). If your home currency is different from the policy currency, please note that any exchange rate fluctuation between your home currency and the policy currency of this insurance product will have a direct impact on the amount of premium required and the value of benefit(s) to be received. For instance, if the policy currency of the insurance product depreciates substantially against your home currency, there is a negative impact on the benefits you receive from the product. If the policy currency of the insurance product appreciates substantially against your home currency, your burden of the premium payment is increased.

## Inflation Risk

The cost of living in the future may be higher than now due to the effects of inflation. Therefore, the benefits under this policy may not be sufficient for the increasing protection needs in the future even if FWD fulfills all of its contractual obligations.

## Early Surrender Risk

If you surrender your policy in the early policy years or before its maturity date, the amount of the benefit you will get back may be considerably less than the total amount of the premiums you paid.

## Non-guaranteed Benefits

Non-guaranteed benefits (including but not limited to Annual Dividend / Special Bonus) are not guaranteed and are determined at FWD's discretion based on its Dividend / Bonus declaration philosophy.

## Premium Adjustment

The premium of the Plan and Waiver of Premium on Death Benefit (Parents) / (Spouse) Rider (if applicable) are non-guaranteed and may significantly increase due to factors including but not limited to claims experience and policy persistency. However, the premium will not be increased based on the age of the Insured, Policy Owner, Parent Contingent Owner, Spouse Owner or Spouse Beneficiary (as the case may be) on his or her next birthday.

## Premium Term and Non-payment of Premium

The premium payment term of the Plan is 10, 15 or 20 years.

FWD allows a grace period of 30 days after the premium due date for payment of each premium. If a premium is still unpaid at the expiration of the grace period and the policy has no cash value, the policy will be terminated from the date the first unpaid premium was due. If the policy has any loanable cash value, FWD shall automatically advance the amount of premium due as a loan against such loanable cash value of the policy. Once the total amount of outstanding loan and interest accrued thereon is equal to or exceeds the loanable cash value of the policy, the policy will be terminated and you may lose all of your benefits.

## Waiver of Premium on Death Benefit (Parents) / (Spouse) Rider (if applicable)

The premium payment term of the Waiver of Premium on Death Benefit (Spouse) Rider is the same as basic plan.

The premium payment term of the Waiver of Premium on Death Benefit (Parents) Rider is the premium payment term of basic plan or up to the Policy Anniversary immediately preceding the 25th birthday of the Insured, whichever is earlier.

FWD allows a grace period of 30 days after the premium due date for payment of each premium. If a premium is still unpaid at the expiration of the grace period, the rider will be terminated from the date the first unpaid premium was due. Please note that once the rider is terminated on this basis, you will lose all of your rider benefits.

## Termination Conditions

The Plan shall terminate on the earliest of the following:

1. The death of the Insured;
2. The Expiry Date of the Policy;
3. The date of Policy surrender. Such date is determined in accordance with FWD's applicable rules and regulations in relation to Policy surrender;
4. The date of termination of the Policy due to default in payment of any premium determined in accordance with Grace Period or Extended Grace Period Benefit (as the case may be);
5. The Indebtedness equals or exceeds the Guaranteed Cash Value of the Policy; or
6. The Total Claims paid and / or payable reaches 100% of the Initial Sum Insured (except where Crisis Benefit is payable, where the Policy will be terminated when the Multiple Benefit for Designated Crises has been paid for a maximum of 5 times). All riders will also be terminated once the Aggregate Limit is reached where the Total Claims paid for any Crisis Benefit and / or a Special Disease Benefit equals 100% of the Initial Sum Insured.

**Waiver of Premium on Death Benefit (Parents) / (Spouse) Rider (if applicable)**

Waiver of Premium on Death Benefit (Parents) / (Spouse) Rider (if applicable) will be terminated on the earliest of the following:

1. the date the Basic Policy terminates or becomes paid-up;
2. the premium due date if the premium grace period expires and We have not received the premium payment;
3. the first premium due date which occurs after Our receipt of the Policy Owner's written request for termination of this Rider;
4. on the date that the Current Sum Insured of the Basic Policy is reduced to zero; and
5. upon the termination of Waiver of Premium on Death Benefit (Parents) Rider with respect to both the Policy Owner and the Parent Contingent Owner as stated below (only applicable to Waiver of Premium on Death Benefit (Parents) Rider); or
6. the Policy Anniversary immediately preceding the 75<sup>th</sup> birthday of the Spouse Owner or Spouse Beneficiary (only applicable to Waiver of Premium on Death Benefit (Spouse) Rider).

Waiver of Premium on Death Benefit (Parents) Rider with respect to the Policy Owner will be terminated on the earliest of the following:

1. the Policy Anniversary immediately preceding the 25<sup>th</sup> birthday of the Insured;
2. the Policy Anniversary immediately preceding the 75<sup>th</sup> birthday of Policy Owner; and
3. the date when this Rider with respect to the Parent Contingent Owner becomes effective upon the death of a Parent Contingent Owner who predeceases Policy Owner.

Waiver of Premium on Death Benefit (Parents) Rider with respect to the Parent Contingent Owner will be terminated on the earliest of the following:

1. the Policy Anniversary immediately preceding the 25<sup>th</sup> birthday of the Insured;
2. the Policy Anniversary immediately preceding the 75<sup>th</sup> birthday of the Parent Contingent Owner; and
3. the date when this Rider with respect to the Policy Owner becomes effective upon the death of Policy Owner who predeceases the Parent Contingent Owner.

**Exclusions**

The below exclusions apply to Crisis Benefit, Special Disease Benefit, Benign Tumour Extra Benefit and Multiple Benefit for Designated Crises.

This Policy shall not cover any loss / claim directly or indirectly caused by or resulting from any of the following:

1. Human Immunodeficiency Virus (HIV) related illness, including Acquired Immunization Deficiency Syndrome (AIDS) and / or any mutations, derivations or variations thereof, which is derived from an HIV infection (Except "HIV due to Blood Transfusion" and "Occupationally Acquired HIV").
2. Intentional self-inflicted injury or attempted suicide, while sane or insane and while intoxicated or not.
3. The participation in any criminal event.
4. Any condition arising out of consumption of poisoning drugs, psychiatric drug, drug abuse, alcohol abuse, abuse of solvents and other substances unless prescribed by a medical practitioner for treatment.



# Important Notes

## Cancellation Right

If you are not satisfied with the policy, you have the right to cancel it within the cooling-off period and obtain a refund of any premium paid by you without interest provided that you have not made any claims under the policy. A written notice signed by you should be received by the office of FWD within the cooling-off period (that is, 21 days after either the delivery of the policy or the issue of a notice informing you or your representative that the policy is available for collection and expiry date of the cooling-off period, whichever is earlier).

While the policy or rider is in force, the Policy Owner may surrender or terminate the policy or rider by sending a written request to FWD.

## Automatic Exchange of Financial Account Information

FWD must comply with the following requirements to facilitate the Financial Services Bureau automatically exchanging certain financial account information:

- I. To identify accounts as non-excluded "financial accounts" ("NEFAs");
- II. To identify the jurisdiction(s) in which NEFA-holding individuals and NEFA-holding entities reside for tax purposes;
- III. To determine the status of NEFA-holding entities as "passive NFEs" and identify the jurisdiction(s) in which their controlling persons reside for tax purposes;
- IV. To collect information on NEFAs ("Required Information"); and
- V. To furnish Required Information to the Financial Services Bureau.

The Policy Owner must comply with requests made by FWD to comply with the above listed requirements.

# Declarations

- This product is underwritten by FWD. FWD is solely responsible for all features, policy approval, coverage and benefit payment under the product. FWD recommends that you carefully consider whether the product is suitable for you in view of your financial needs and that you fully understand the risk involved in the product before submitting your application. You should not apply for or purchase the product unless you fully understand it and you agree it is suitable for you. Please read through the following related risks before making any application of the product.
- This product material is issued by FWD. FWD accepts full responsibility for the accuracy of the information contained in this product material. This product material is intended to be distributed in the Macao Special Administrative Region ("Macao") only and shall not be construed as an offer to sell, a solicitation to buy or the provision of any insurance products of FWD outside Macau. All selling and application procedures of the product must be conducted and completed in Macau.
- This product is an insurance product. The premium paid is not a bank savings deposit or time deposit. The product is not protected under the Deposit Protection Regime in Macau.
- This product is a participating life product with savings element. The premium of this plan has covered the costs of insurance and the related costs of the policy despite the product brochure / leaflet and / or the illustration documents of this plan having no schedule / section of fees and charges or no additional charge noted other than the premium.
- The product is a participating life product. If you surrender your policy before its maturity date, the amount you get back may be less than the total premium you have paid.
- All underwriting and claims decisions are made by FWD. FWD relies upon the information provided by the applicant and the insured in the insurance application to decide to accept or decline the application with a full refund of any premium paid without interest. FWD reserves the right to accept / reject any insurance application and can decline your insurance application without giving any reason.
- All the above benefits and payment are paid after deducting policy debts (if any, e.g. unpaid premiums or policy loan with interest).

This product material is for reference only and is indicative of the key features of the product. For the exact terms and conditions and the full list of exclusions of the product, please refer to the policy provisions of this product materials. In the event of any ambiguity or inconsistency between the terms of this leaflet and the policy provisions, the policy provisions shall prevail. In case you want to read the terms and conditions of the policy provisions before making an application, you can obtain a copy from FWD. The policy provisions of the product are governed by the laws of Macau.

Address of FWD office: 12/F, Fortuna Business Centre, 301-355 Av. Comercial De Macau, Macau



