

“Life Guardian” Insurance

TERMS AND CONDITIONS

G.C.Life Product Code: 9

1. Composition of Insurance Contract

“Life Guardian” Insurance (hereinafter referred to as “the Contract”) is composed of the insurance certificate, terms and conditions, application form including “Confirmation of Electronic Insurance Application”, health condition disclosure, insurance plan, and other documents related to the Contract.

2. Application Requirements

The applicant must be no younger than 18 years old; have no mental illness; and have the capacity to pay the premium under the Contract.

The applicant may insure himself/herself, his/her family members, and any other affiliated persons (hereinafter referred to as “the Insured”) under this insurance.

Upon the application, the Insured must meet the following requirements:

- (1) The Insured must be no younger than 18 years old and no older than 55 years old;
- (2) The Insured must be in good health and have no mental illness;
- (3) The Insured shall not engage in high risk occupation.

3. Creation and Effectiveness of the Insurance Contract

The applicant submits an application and completes the application procedures, the Company notifies the applicant to make a premium payment after the Company underwrites the insurance, and then the Contract is created.

After the creation of the Contract and the full payment of the initial premium, the Contract shall enter into effect. The effective date of the Contract shall be stated on the insurance certificate. Upon the effectiveness of the Contract, the Company shall issue the insurance policy to the applicant immediately.

4. Period of Insurance

The period of insurance shall commence on the effective date of the Contract until the annual anniversary of the Contract when the Insured reaches the age of 80.

5. Cooling-Off Period and Waiting Period

- (1) From the day following the signing the acknowledgement letter of the Contract, the applicant shall have a 21-days cooling-off period. During this period, if the applicant decides not to procure this insurance, the Contract can be terminated by the applicant’s request.

The Contract shall be terminated from the time when the Company receives the request for termination in writing, and the Company shall no longer be bound by the obligations and shall return the total premium paid (without interest) to the applicant, but the applicant shall pay 10 US dollars to the Company for service fees.

- (2) Starting from the effective date of the Contract, there is a 90-days waiting period. During the waiting period, the Company shall not pay any sum insured related to insured events caused by illness. The waiting period shall start from the effective date of the Contract or reinstatement date of the Contract.

6. Sum Insured

The applicant and the Company shall determine the initial sum, but the agreed sum insured shall not be less than 10,000 US dollars. The agreed sum insured shall be stated on the insurance certificate.

7. Premium Payment, Payment Period, and Mode of Payment

The agreed premium under the Contract shall be made by installments.

There are six types of payment period, including 5 years, 10 years, 15 years, 20 years, 25 years and 30 years. One of which shall be selected by the applicant as an agreed payment period. However, at the end of the payment period, the Insured shall not be older than 60 years old.

There are four types of modes of payment, including annual payment, semi-annual payment, quarterly payment, and monthly payment. One of which shall be selected by the applicant as an agreed mode of payment.

8. Premium and Grace Period

- (1) The applicant shall pay the premium for this Contract based on the amounts listed in Schedule 1: "Table of Premium" and it shall be stated on the insurance certificate.

In case the applicant selects monthly mode of payment, he/she shall pay a one-time total premium for the first 3 months as the initial premium payment.

- (2) After the first initial premium payment made by the applicant, the applicant shall pay the premium for each subsequent period on the agreed date of payment during the payment period under the Contract in order to keep the policy remaining effective.

The agreed date of payment shall be the following day of each annual anniversary, each semi-annual anniversary, each quarterly anniversary, or each monthly anniversary of the date of the Contract.

- (3) There shall be a 60-days grace period agreed under the Contract starting from the day after the agreed date of payment mentioned above.

During the grace period, if applicant pays the premium, coverage shall remain effective.

Coverage shall remain effective during the grace period. During the grace period, if an insured event occurs, the Company shall be obliged for the insurance coverages. However, before the Company pays for the insurance benefit, the Company shall first collect the premium receivables due from the applicant.

If the applicant fails to pay the premium after the grace period, the Contract shall be suspended from 00:00 of the following day of the expiration of the grace period, and coverage will not be effective during such suspension.

9. Coverage

Within the period of insurance and the effective period of the Contract, the Company shall assume the following coverages:

(1) Survival Benefit

When the Insured survives and reaches the age of 60, the Insured shall receive the survival benefit which equals to 150% of the sum insured stated on the insurance certificate on the following day of the annual anniversary of the Contract.

(2) Maturity Benefit

When the Insured survives until the maturity date of the Contract, the Insured shall receive the maturity benefit which equals to 100% of the sum insured stated on the insurance certificate.

(3) Death Benefit and Total Disability Benefit Due to Illness

- a. After the 90-days waiting period, in case the Insured dies or becomes totally disabled due to illness, the Company shall pay the death benefit or total disability benefit as follow:
 - I. If this event occurs before the 2nd anniversary of the Contract, the insurance benefit shall equal to 100% of the sum insured stated on the insurance certificate and the Contract shall be terminated.
 - II. If this event occurs during the period from the 2nd anniversary of the Contract to the annual anniversary of the Contract when the Insured reaches the age of 60, the insurance benefit shall equal to 150% of the sum insured stated on the insurance certificate and the Contract shall be terminated.
 - III. If this event occurs after the annual anniversary of the Contract when the Insured reaches the age of 60, the insurance benefit shall equal to 100% of the sum insured stated on the insurance certificate. If the Insured has not yet received the survival benefit, the Company shall pay the survival benefit at the same time and the Contract shall be terminated.
- b. During the 90-days waiting period, in case the Insured dies or becomes totally disabled due to illness, the Company shall return the premium paid to the applicant (without interest) and the Contract shall be terminated.

(4) Death Benefit and Total Disability Benefit Due to Accidental Injury

This coverage is not subject to the 90-days waiting period:

- a. In case the Insured dies or becomes totally disabled due to an accidental injury within 180 days from the date of such accident, the Company shall pay the insurance benefit as follows:
 - I. If this event occurs before the annual anniversary of the Contract when the Insured reaches the age of 60, the insurance benefit shall equal to 300% of the sum insured stated on the insurance certificate and the Contract shall be terminated.
 - II. If this event occurs after the annual anniversary of the Contract when the Insured reaches the age of 60, the insurance benefit shall equal to 100% of the sum insured stated on the insurance certificate. If the Insured has not yet received the survival benefit, the Company shall pay the survival benefit at the same time and the Contract shall be terminated.
- b. In case the Insured dies or becomes totally disabled due to an accidental injury after 180 days from the date of such accident, the Company shall pay the insurance benefit as follows:
 - I. If this event occurs before the 2nd anniversary of the Contract, the insurance benefit shall equal to 100% of the sum insured stated on the insurance certificate and the Contract shall be terminated.
 - II. If this event occurs during the period from the 2nd anniversary of the Contract to the annual anniversary of the Contract when the Insured reaches the age of 60, the insurance benefit shall equal to 150% of the sum insured stated on the insurance certificate and the Contract shall be terminated.
 - III. If this event occurs after the annual anniversary of the Contract when the Insured reaches the age of 60, the insurance benefit shall equal to 100% of the sum insured stated on the insurance certificate. If the Insured has not yet received the survival benefit, the Company shall pay the survival benefit at the same time and the Contract shall be terminated.

10. Free Insurance Benefit

The company shall give away and automatically upgrade with the following insurance benefits without any additional premium charges or application procedures from the applicant.

During the period from the 2nd anniversary of the Contract to the annual anniversary of the Contract when the Insured reaches the age of 60, the following insurance coverage shall become effective if the Contract is still effective, 2 years of premium has been fully paid, and the following requirements are met:

- (1) If the Insured receives the first diagnostic confirmation of Breast Cancer, Cervical Cancer, Endometrial Cancer, Prostate Cancer as listed in Schedule 3: "38 Types of Critical Illness" under the terms and conditions of the Contract, regardless of whether it is one or many types

of the aforementioned four illnesses, the Company shall pay the Insured an insurance benefit which equals to 100% of the sum insured stated on the insurance certificate. In addition, the subsequent premium payments shall be waived.

After paying such insurance benefit by the Company, this insurance coverage shall be terminated but it shall not affect the effectiveness of Clause 9 under the terms and conditions of the Contract and the below coverage under Clause 10, Section (2).

- (2) If the Insured receives the first diagnostic confirmation of any illness as listed in Schedule 3: “38 Types of Critical Illness” under the terms and conditions of the Contract other than Breast Cancer, Cervical Cancer, Endometrial Cancer and Prostate Cancer, regardless of whether it is one or many types of the illness, the Company shall pay the Insured a partial insurance benefit as the prepayment based on Clause 9 under the terms and conditions of the Contract and such insurance benefit equals to 100% of the sum insured stated on the insurance certificate (in the case the Insured has already received the survival benefit, then there will be no prepayment). In addition, the subsequent premium payment shall be waived. However, in case any insured event related to Clause 9 under the terms and conditions of the Contract occurs before the Company pays the corresponding insurance benefits, the prepaid portion of insurance benefit shall be first deducted.

After paying such insurance benefit by the Company, this insurance coverage shall be terminated but it shall not affect the effectiveness of Clause 9 under the terms and conditions of the Contract and the above coverage under Clause 10, Section (1).

11. Exclusion

- (1) Upon the application, if the applicant fails to fulfill the obligation of truthful disclosure such as intentionally concealing the below listed health conditions of the Insured, the Company shall not be obliged to pay the insurance benefits:
 - a. The Insured has already been diagnosed or suspected to be diagnosed of a critical illness listed in Schedule 3: “38 Types of Critical Illness” of the Contract;
 - b. The Insured has already been diagnosed with one or more chronic illnesses, or acute illness, or mental illness;
 - c. The Insured has already been disabled, or has had functional disorder for eyes or ears, or limb movement disorder;
 - d. The Insured is engaged in high risk occupation that the Company does not underwrite;
 - e. The Insured’s true age does not meet the insurance application requirement upon the creation of the Contract and the applicant intentionally conceals such fact.
- (2) If the Insured suffers from any insured event due to any of the following situations, the Company shall not be obliged to pay the insurance benefits:
 - a. The Insured is intentionally murdered or harmed by the applicant;
 - b. The Insured is involved in a fight, or is intoxicated from alcohol, or drugs, or is deliberately self-injured;
 - c. The Insured is involved in diving, skydiving, climbing, adventure, wrestling competition, extreme stunt show, car racing;

- d. The Insured is speeding, drinking and driving over the legal limit, driving without a valid driver license, or driving a vehicle without a valid registration;
- e. The Insured suffers from any medical accident due to plastic surgery or other surgical operation;
- f. The Insured violates the Cambodian Law by giving birth for another person;
- g. The Insured suffers from any insured event due to war, military clash, riot or armed rebellion, nuclear explosions, nuclear radiation or nuclear contamination.

12. Beneficiary

The beneficiary of the insurance benefit provided under the Contract, except for the death benefit, shall be the Insured. The beneficiary/beneficiaries stated on the insurance certificate refer(s) to the beneficiary/beneficiaries of the death benefit.

The applicant or the Insured may designate one or more beneficiary/beneficiaries for the death benefit. If the applicant or the Insured changes the beneficiary of the death benefit during the period of insurance, a written notice shall be provided to the Company. The Company shall endorse the Contract or other insurance documents or attach an endorsement.

If the beneficiary of the death benefit is under the age of 18 or diagnosed with mental illness, the guardian of the beneficiary shall be designated as the representative of the beneficiary.

After the death of the Insured, if any of the following circumstances occurs, the benefit shall bequest to the Insured in respect of which the Company shall fulfill its payment obligation in accordance with the applicable provisions of laws of the Kingdom of Cambodia:

- (1) No beneficiary has been designated or clearly determined;
- (2) The beneficiary dies before the Insured, and there is no other beneficiary;
- (3) The beneficiary loses the right to receive the benefit or has given up such right in accordance with the law, and there is no other beneficiary.
- (4) If the beneficiary and the Insured dies from the same accident and the order of death cannot be determined, it shall be considered that the beneficiary has died before the Insured.

13. Notice of Insured Event

The applicant, the Insured, or the beneficiary, upon becoming aware of any insured event, shall promptly (within 10 days) notify the Company. Intentional failure to do so, resulting in inability of the Company to determine the nature, cause, level of damage of such insured event, the Company shall not be obliged to pay the insurance benefit for any part which cannot be determined, unless the Company has been aware of the situation of such insured event through any other means.

14. Claim and Payment of Benefit

- (1) The beneficiary, as the claimant for benefit, shall fill out the claim application form and provide evidences and documents required for claiming the benefit listed under Clause 15 of the Contract. If the evidences and documents are not complete, the Company shall promptly inform the claimant at once to provide supplementary evidences and documents. The claimant shall be obliged to promptly provide the relevant evidences and documents mentioned above.

- (2) The Company, upon receipt of the claim application form from the claimant and the above-mentioned evidences and documents, shall verify them within 10 working days, or 20 working days for complicated cases.

After verification, if it is confirmed to be covered, the Company shall pay the benefit within 2 working days upon reaching an agreement with the claimant on the payment of the benefit. After verification, if it is confirmed not to be covered, the Company shall, within 2 working days of the verification, issue a notice of refusal of insurance benefit payment to the claimant by explaining the reasons.

- (3) The effective period for the beneficiary to claim the benefits from the Company shall be 5 years, and to claim the benefits caused by critical illness shall be 1 year, from the date on which the beneficiary is aware of or should have been aware of the occurrence of the insured event.

15. Evidences and Documents Required for Claiming Insurance Benefit

- (1) An insurance certificate or any other proof of the objective existence of this insurance contract;
- (2) Legal and valid identification documents of the claimant;
- (3) Evidences and documents proving the fact, nature, and cause of the insured event available to be provided by the claimant;
- (4) If a representative is appointed to claim the benefit, a power of attorney and identification documents of the representative;
- (5) If claiming for the total disability benefit, certificates of degree of disability or letter of authentication of degree of physical disability issued by a medical institution or authentication institution which is legally qualified in disability authentication. If the evidences and documents are medically verified by the Company to be insufficient for determining the final approval, the Company has the right to require the applicant to provide additional supporting documents. If claiming for the disability benefit due to accidental injury, the disability assessment report for the Insured shall be based on the report issued within the 180 days of the occurrence of the accidental injury;
- (6) If claiming for the critical illness benefit, medical certificate and supporting documents, attached with pathology test of the Insured, blood test report, and reports of other medical diagnostic devices, issued by a hospital which is highly qualified to diagnose major diseases/critical illness.

If the aforesaid documents are medically verified by the Company to be insufficient for determining the final approval, the Company has the right to require the applicant to provide additional supporting documents.

16. Disappearance

If the Insured disappears within the validity of the Contract and is later declared dead by the court, the Company shall pay the insurance benefit according to the Clause 9, Section (3), and the Contract shall be terminated. If there is conclusive evidence showing that the Insured disappears due to plane crash, or a marine vessel capsized, or was buried by a deep mine collapse, the Company shall pay an insurance

benefit according to the Clause 9, Section (4) under the terms and conditions of the Contract and the Contract shall be terminated.

The time of death of the Insured shall be the date of declaration of death by the court.

If the Insured reappears or is confirmed to be alive after the declaration of death, the Company shall have the right to collect the benefit received by the beneficiary. If the Company proves the false declaration of the Insured's death by the beneficiary, the Company shall have the right to collect the benefit received by the beneficiary and to terminate the Contract immediately without paying the cash value of the Contract.

17. Termination by the Applicant

After the Contract is created, unless otherwise provided in the Contract, the applicant may request to terminate the Contract for any reasons, including that the applicant request to terminate the Contract because the Company refuses to pay insurance benefit.

The Contract shall be terminated when the Company receives the request form for termination of contract. The Company shall return the cash value of the Contract to the applicant. If the applicant or beneficiary loses their legal right to collect the cash value of the Contract, the return of cash value shall be proceeded by following the Cambodian Law.

For any contract where the insurance benefit payment has been paid or premium has been waived, the Company shall not accept the termination request.

If the applicant terminates the Contract after the cooling-off period, he/she shall bear the economic loss arising from such termination.

18. Cash Value

The term "cash value" referred to in the Contract means the surrender payment to be made by the Company to the applicant according to the provisions of the Contract at premature termination of the Contract.

The cash value at the end of each policy year of the Contract shall be stated on the insurance certificate (see Schedule 4: "Table of Cash Value of the Contract at the End of Each Policy Year").

19. Contract Suspension and Contract Reinstatement

- (1) The Contract shall be suspended if the applicant fails to pay the premiums on time according to the provisions of the Contract, and the Company shall not be obliged to pay the benefit.

Within two years after the suspension of the Contract, the applicant may request to reinstate the Contract, and the Contract shall reinstate from the following day of the day on which the applicant formally processes for reinstatement of the Contract and pays the outstanding premium with interest and other outstanding amounts with interest. However, the waiting period stated at Clause 5, Section (2) under the terms and conditions of the Contract shall apply.

Interest rate mentioned above shall be set at 6% per annum.

- (2) Two years after the suspension of the Contract, it will become permanently invalid. The Company shall no longer accept any request to reinstate the Contract. When the applicant formally processes the termination, the Company shall return the cash value at the time of suspension to the applicant. Any delay of the receipts of the aforementioned cash value by the applicant is not subjected to any interest.

20. Clear Explanation and Truthful Disclosure

At the creation of the Contract, the Company shall clearly explain to the applicant the contents of the Contract.

For the exclusion clause under the terms and conditions of the insurance and any important matters such as the responsibility of economic loss due to termination by the applicant after the cooling-off period, the Company shall, at the execution of the Contract, provide obvious disclosures to the applicant on the insurance plan, application form, or other insurance documents.

The Company may inquire the applicant and the Insured about personal information, health condition, previous medical history, family medical history of the applicant and the Insured, and other matters related to the execution of the Contract. The applicant shall, with honesty and legal liability, fulfill the obligation of truthful disclosure otherwise, the Contract shall be invalid.

If the applicant unintentionally fails to fulfill the obligation of truthful disclosure, resulting in inability of the Company to decide whether to cover or by what mean to cover, the Company shall not cover any insurance benefit stated. If the applicant requests to terminate the Contract because of this, the Company shall return the cash value of the Contract to the applicant and the Contract shall be terminated.

If the applicant intentionally fails to fulfill the obligation of truthful disclosure or provides fraudulent information, the Company shall not cover any insurance benefit and shall have the right to terminate the Contract unilaterally on the date of confirmation for such fraudulence. If the applicant requests to terminate the Contract, the Company shall not return the premium paid or the cash value of Contract. Also, the Company shall not be obliged to pay any insurance benefit for any insured event occurring before the termination of the Contract.

21. Contract Modification

- (1) During the effectiveness of the Contract, the applicant and the Company may negotiate to modify the contents of the Contract. In the case of modification, the applicant shall fill out a request form for modification of the Contract, and the Company, after examining and approving the request, shall endorse the insurance policy or other insurance documents or attach an endorsement, or enter into a written amendment agreement with the applicant.
- (2) The applicant shall fill in the true age of the Insured on the application form. In case of any misstatement, he/she shall enter into a written agreement to modify the age with the Company, and the premium shall be re-calculated based on the true age. The premium shall

be refunded in case of overpayment and shall be supplemented in case of underpayment. Any calculation related to interest shall be based on 6% per annum. In case of misstatement of age of the Insured by the applicant, and the true age is not eligible under the provision of the Contract, the Contract shall be terminated immediately. The applicant shall operate with the Company to proceed such termination and collect the premium paid (without interest).

If insured event occurs before contract modification or termination and the effectiveness of the Contract is no longer than 2 years, the Company shall not pay any insurance benefit but return the premium paid without interest to the applicant. If insured event occurs before contract modification or termination and the effectiveness of the Contract is longer than 2 years, the Company shall pay the insurance benefit but the insurance benefit shall be re-calculated based on the true age of the Insured.

If the applicant intentionally conceals the true age of the Insured, or intentionally delay the process for contract modification for the true age, or intentionally delay the process for contract termination, the Company shall have the right to terminate the Contract unilaterally; to not be obliged for insurance coverages; to not return the premium paid; and to not pay the cash value to the applicant.

- (3) In case the applicant changes his/her contact address and contact information, he/she shall promptly notify the Company in writing. If the applicant fails to do so, the company shall provide relevant notices through the latest contact address and contact information known.

22. Dispute Resolution

For any dispute relevant to the insurance business, any of the disputing parties shall submit the dispute to the Ministry of Economy and Finance for mediation and resolution prior to filing a lawsuit in a court or commencing arbitration, except in relation to a dispute involving criminal charges.

This Contract is written in Khmer, English, and Chinese, and the Khmer version shall prevail in case of any inconsistency.

23. Definition

The Company: refers to GC Life Insurance PLC.

Year of age: refers to age calculated based on the date of birth stated on identification documents, which shall be zero from the date of birth and increase by one when a year has passed; it shall not be counted as one year if the year has not passed.

Legally valid identification document: refers to a certificate or document, such as ID card, passport, etc., issued by the national government to prove the identity.

Accident: refers to objective hazard which is external, unexpected, unintentional, non-disease, and directly causes personal injury. Accident includes explosion, collapse, scalding, collision, lightning strike, electric shock, contortion, frostbite, heat stroke, drowning, suffocation, fall, acute poisoning, animal bite, car or boat or plane crash, work-related injury caused by overwork. Sudden death is not attributable to accidental death (Sudden death refers to non-violent sudden death of a person that appears healthy within 24 hours after occurrence of symptoms due to underlying illness, malfunction, or

other causes. Sudden death shall be determined by the hospital diagnosis and authentication by the police station.)

Total disability: refers to the conditions stated on Clause 24, Schedule 2 “Table of Total Disability for Personal Insurance” under the terms and conditions.

Critical illness: refers to the conditions stated on Clause 24, Schedule 3 “38 Types of Critical Illness” under the terms and conditions.

Annual anniversary of the Contract: refers to the same day of each year of the effective date of the Contract.

Policy year: from the effective date of the Contract (or yearly anniversary of the effective date) to the anniversary of the effective date in the following year.

Contract suspension: refers to the period which the Contract is in force and the effectiveness of the Contract becomes temporarily invalid due to specific reasons. In case the insured event occurs, the Company shall not be obliged to pay the insurance benefit. If the Contract has been suspended for no longer than 2 years, the applicant may apply for reinstatement, but the consent of the Company is required.

Contract termination: refers to after the Contract has been created, a state in which the validity of the Contract has been completely terminated and cannot be restored (except the case which there are other additional agreements) due to the result of contractual or legal reasons. In the case an insured event occurs, the Company shall not be obliged to pay the insurance benefit.

Drugs: refers to opium, heroine, methamphetamine, morphine, cannabis, cocaine, ketamine and determined by the United Nations and other nationally restricted addictive narcotics and psychiatric drugs, except any medicines which contained components of drugs, but is prescribed by a doctor and used by following the doctor’s prescription for the treatment of disease.

Drinking and driving over the legal limit: refers to an event in which the vehicle driver is tested or verified to contain in every hundred milliliter of his/her blood the level of alcohol which reaches or exceeds the level limited by law or the government.

Driving without a valid driver license: refers to any of the following situations:

- (1) not obtaining driving qualifications;
- (2) driving a type of vehicle which does not match the driving license;
- (3) having an unqualified driving license;
- (4) having a learner’s license and learning to drive without coach guidance, or without following the designated time and route for learners.

Driving without a valid registration: refers to any of the following situations:

- (1) Any vehicle which has been de-registered in accordance with the law;
- (2) Failing to undergo or to pass regular safety and technical inspection of motor vehicles.

Vehicles: refers to any vehicle transported by a machine on road and on board.

Diving: refers to underwater activity in rivers, lakes, seas, reservoirs, canals and other water areas by using auxiliary breathing apparatus.

Climbing: refers to the activity of climbing cliffs, building facades, man-made cliffs, ice cliffs, and icebergs.

Adventure: refers to the act of deliberately putting oneself in any circumstance by knowing that it causes risks of death or injury under certain natural conditions; for example, river rafting, mountaineering, walking through the desert or in an inaccessible forest.

Extreme stunt show: refers to the performance of equestrian, juggling, animal training and others.

Mental illness, mental and behavioral disorder: is based on the “International Statistical Classification of Diseases and Related Health Problems (ICD-10)” issued by the World Health Organization.

War: refers to the armed struggle between nation’s, groups of people, or political groups for certain political and economic purpose, subject to declaration of the government.

Military conflict: refers to an armed confrontation between nations or people within certain scope and subject to declaration of the government.

Riot: refers to an armed disturbance which undermines social order, subject to declaration of the government.

High risk occupation: mainly refers to forest transporting workers; forest fires protectors; beasts breeders; venomous animal breeders; oceanic fishermen; stone or sand mining workers, workers who work in mines; scuba diver; all offshore oil (diver will be included) workers; fuel trailer driver and occupants; rescue crew; helicopter pilots; steel framework workers; construction scaffolding workers; installers of glass curtain walls; exterior cleaning service for high-rise buildings; tunnel construction workers; bridge construction workers; large dam project workers; digging well workers; explosion workers; liquid and gaseous fuels like natural gas, coal-to-gas manufacturing workers; explosives, pyrotechnics and firecrackers processing workers; strong acids and bases like sulfuric, hydrochloric, nitric, caustic manufacturing workers; toxic product processing workers; ship disassembling workers; war correspondent; advertising signboard installers; high-rise building workers; stuntmen; air acrobatics performers; high-voltage facility installers, repairmen; dangerous, toxic, radiologic wastes disposing workers; unemployed for long period of time; drug enforcement police; riot police; special police; on-the-spot rescuers; special army; air soldiers; feet and submarine soldiers; skiing players; wrestling players.

24. Schedule 1, Schedule 2, Schedule 3, and Schedule 4

Schedule 1: “Table of Premium”
(For 1,000 US Dollars sum insured)

Currency Unit: US Dollars

| Age/ Payment Period | 5 Years Payment Period | | 10 Years Payment Period | | 15 Years Payment Period | |
|---------------------|------------------------|--------|-------------------------|--------|-------------------------|--------|
| | Male | Female | Male | Female | Male | Female |
| 18 | 165.97 | 164.24 | 89.97 | 88.96 | 64.94 | 64.17 |

| | | | | | | |
|----|--------|--------|--------|--------|--------|--------|
| 19 | 170.51 | 168.79 | 92.43 | 91.42 | 66.73 | 65.96 |
| 20 | 175.18 | 173.46 | 94.98 | 93.97 | 68.57 | 67.80 |
| 21 | 179.99 | 178.28 | 97.59 | 96.59 | 70.46 | 69.71 |
| 22 | 184.94 | 183.24 | 100.29 | 99.29 | 72.41 | 71.67 |
| 23 | 190.04 | 188.34 | 103.06 | 102.07 | 74.43 | 73.70 |
| 24 | 195.29 | 193.59 | 105.91 | 104.93 | 76.50 | 75.79 |
| 25 | 200.70 | 198.99 | 108.86 | 107.88 | 78.64 | 77.94 |
| 26 | 206.27 | 204.55 | 111.89 | 110.92 | 80.85 | 80.16 |
| 27 | 212.00 | 210.26 | 115.01 | 114.05 | 83.14 | 82.46 |
| 28 | 217.91 | 216.15 | 118.24 | 117.28 | 85.50 | 84.83 |
| 29 | 223.99 | 222.18 | 121.56 | 120.59 | 87.94 | 87.27 |
| 30 | 230.26 | 228.40 | 125.00 | 124.01 | 90.48 | 89.80 |
| 31 | 236.72 | 234.79 | 128.55 | 127.53 | 93.10 | 92.41 |
| 32 | 243.37 | 241.35 | 132.22 | 131.16 | 95.82 | 95.10 |
| 33 | 250.23 | 248.09 | 136.01 | 134.90 | 98.64 | 97.88 |
| 34 | 257.29 | 255.02 | 139.93 | 138.75 | 101.57 | 100.76 |
| 35 | 264.56 | 262.13 | 143.98 | 142.72 | 104.61 | 103.72 |
| 36 | 272.04 | 269.44 | 148.16 | 146.81 | 107.75 | 106.79 |
| 37 | 279.73 | 276.94 | 152.47 | 151.01 | 111.02 | 109.95 |
| 38 | 287.64 | 284.65 | 156.92 | 155.35 | 114.41 | 113.21 |
| 39 | 295.77 | 292.53 | 161.53 | 159.78 | 117.93 | 116.55 |
| 40 | 304.13 | 300.63 | 166.29 | 164.36 | 121.59 | 120.01 |
| 41 | 312.72 | 308.94 | 171.20 | 169.06 | 125.40 | 123.57 |
| 42 | 321.55 | 317.46 | 176.28 | 173.90 | 129.35 | 127.23 |
| 43 | 330.61 | 326.20 | 181.52 | 178.86 | 133.47 | 131.01 |
| 44 | 339.92 | 335.16 | 186.94 | 183.96 | 137.74 | 134.89 |
| 45 | 349.47 | 344.35 | 192.54 | 189.19 | 142.19 | 138.89 |
| 46 | 359.28 | 353.77 | 198.32 | 194.57 | - | - |
| 47 | 369.34 | 363.44 | 204.30 | 200.11 | - | - |
| 48 | 379.68 | 373.40 | 210.49 | 205.83 | - | - |
| 49 | 390.30 | 383.65 | 216.91 | 211.74 | - | - |
| 50 | 401.22 | 394.22 | 223.56 | 217.84 | - | - |
| 51 | 412.46 | 405.11 | - | - | - | - |
| 52 | 424.06 | 416.32 | - | - | - | - |
| 53 | 436.02 | 427.89 | - | - | - | - |

| | | | | | | |
|----|--------|--------|---|---|---|---|
| 54 | 448.30 | 439.83 | - | - | - | - |
| 55 | 460.98 | 452.18 | - | - | - | - |

| Age/ Payment Period | 20 Years Payment Period | | 25 Years Payment Period | | 30 Years Payment Period | |
|---------------------|-------------------------|--------|-------------------------|--------|-------------------------|--------|
| | Male | Female | Male | Female | Male | Female |
| 18 | 52.48 | 51.84 | 45.08 | 44.53 | 40.46 | 39.96 |
| 19 | 53.93 | 53.30 | 46.34 | 45.80 | 41.60 | 41.12 |
| 20 | 55.43 | 54.80 | 47.64 | 47.11 | 42.79 | 42.32 |
| 21 | 56.97 | 56.36 | 48.98 | 48.46 | 44.02 | 43.56 |
| 22 | 58.57 | 57.97 | 50.37 | 49.87 | 45.30 | 44.85 |
| 23 | 60.21 | 59.63 | 51.81 | 51.32 | 46.63 | 46.18 |
| 24 | 61.91 | 61.34 | 53.30 | 52.83 | 48.00 | 47.57 |
| 25 | 63.67 | 63.11 | 54.85 | 54.39 | 49.44 | 49.00 |
| 26 | 65.49 | 64.95 | 56.45 | 56.00 | 50.93 | 50.49 |
| 27 | 67.37 | 66.84 | 58.12 | 57.67 | 52.49 | 52.04 |
| 28 | 69.33 | 68.81 | 59.86 | 59.41 | 54.12 | 53.64 |
| 29 | 71.35 | 70.84 | 61.67 | 61.20 | 55.83 | 55.31 |
| 30 | 73.46 | 72.94 | 63.56 | 63.07 | 57.62 | 57.04 |
| 31 | 75.66 | 75.11 | 65.53 | 65.00 | - | - |
| 32 | 77.94 | 77.36 | 67.59 | 67.00 | - | - |
| 33 | 80.32 | 79.69 | 69.75 | 69.08 | - | - |
| 34 | 82.80 | 82.10 | 72.01 | 71.23 | - | - |
| 35 | 85.38 | 84.59 | 74.38 | 73.47 | - | - |
| 36 | 88.08 | 87.17 | - | - | - | - |
| 37 | 90.88 | 89.83 | - | - | - | - |
| 38 | 93.81 | 92.59 | - | - | - | - |
| 39 | 96.88 | 95.42 | - | - | - | - |
| 40 | 100.08 | 98.36 | - | - | - | - |

Note: Semi-Annual Payment = Annual Payment*0.52

Quarterly Payment = Annual Payment*0.27

Monthly Payment = Annual Payment*0.09

Schedule 2: "Table of Total Disability for Personal Insurance"

| Class | Item | Description of Disability |
|---------|------|--|
| Class 1 | 1 | Permanent and complete loss of vision in both eyes (Note 1) |
| | 2 | Loss of two upper limbs or two lower limbs |
| | 3 | Loss of one upper limb and one lower limb |
| | 4 | Permanent and complete loss of vision in one eye and loss of one upper limb |
| | 5 | Permanent and complete loss of vision in one eye and loss of one lower limb |
| | 6 | Permanent and complete loss of functions of four limbs (Note 2) |
| | 7 | Permanent and complete loss of masticatory and swallowing functions (Note 3) |
| | 8 | Central nervous system or chest or abdominal organ dysfunction disorders, [resulting in] inability to engage in any work for the remainder of life and needing support from others for daily activities to sustain life (Note 4) |

Note:

(1) Loss of vision includes loss or removal of eyeball, or being unable to distinguish between light and dark, or only able to identify hand movement in front of the eyes; the best corrected visual acuity is lower than 0.02 of the international vision standard, or the visual radius is less than 5 degrees, and having diagnosis certificate issued by an optician accredited by the Company.

(2) Loss of functions of joints means permanent stiffness, or paralysis, or the inability to move freely of joints.

(3) Loss of masticatory and swallowing functions refers to a state of physical disorder or malfunction caused by any reasons other than teeth, resulting in inability to chew or swallow, and inability to eat or swallow any food other than liquid.

(4) Needing support from others for daily activities to sustain life refers to the inability to eat, excrete, wear and take off clothes, live, walk, bath, etc., by oneself and needing the help of others.

Schedule 3: "38 Types of Critical Illness"

| Item | Name of Disease | Definition of Disease |
|-----------------|---|---|
| 1 16 | Specific types of cancer: Lung Cancer, Stomach Cancer, Liver Cancer, Colorectal Cancer, Prostate Cancer, Kidney Cancer, Lymphoma, Bladder Cancer, Leukemia, Brain Cancer, Pancreatic Cancer, Thyroid Cancer, Ovarian Cancer, Breast Cancer, Cervical Cancer, Endometrial Cancer, (malignant neoplasms) | Refers to a disease in which the malignant cells uncontrollably and progressively grow, spread, invade and destroy the normal tissue around them. They can shift to other parts of the body through blood vessels, lymphatic vessels, and the body cavity. Upon pathological diagnosis and clinical diagnosis, malignant neoplasms belong to the category under "International Statistical Classification of Diseases and Related Health Problems" (ICD-10) of the World Health Organization. |
| 17 | Major organ transplant or hematopoietic stem cell transplant operation | Major organ transplant refers to [a condition in which] an allotransplant of kidney, liver, heart or lung has been carried out due to related organ failure. Blood stem cell transplant operation refers to [a condition in which] an allotransplant of blood stem cell (including bone marrow hematopoietic stem cells, peripheral blood hematopoietic stem cells and cord blood hematopoietic stem cells) due to hematopoietic dysfunction or hematopoietic malignancies. |

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| 18 | Final stage of kidney disease (also called chronic renal failure uremia) | Refers to renal chronic non-reversible failure which has reached the uremia stage and, after diagnosis, has undergone at least 90 days of regular dialysis treatment or kidney transplant. |
| 19 | Acute or acute and malignant severe hepatitis | Refers to [a condition in which] diffuse necrosis of liver tissue due to hepatitis virus infection, resulting in acute liver failure and confirmed by serological or biological examination, subject to all of the following conditions: <ol style="list-style-type: none"> 1. Severe jaundice or jaundice is increasing rapidly; 2. Hepatic encephalopathy; 3. The liver volume is shown by B ultrasound or other imaging studies to be rapidly shrinking; 4. The hepatic function index progressively deteriorates. |
| 20 | Benign brain neoplasms | Refers to [a condition in which] the benign brain tumors have caused increase of intracranial pressure, and the clinical manifestations are papilledema, mental symptoms, epilepsy and motor sensory disorders, which is life-threatening. It must be confirmed by radiographic examination such as cranial tomography (CT), magnetic resonance imaging (MRI) or positron emission tomography (PET) and must meet at least one of the following conditions: <ol style="list-style-type: none"> 1. A craniotomy has actually been carried out to remove all or part of the brain tumor; 2. Radiation treatment has actually been carried out for brain tumors. Pituitary tumor, brain cyst, and cerebrovascular disease are not covered. |
| 21 | Decompensation stage of chronic liver failure | Refers to liver failure due to chronic liver disease, subject to all of the following conditions: <ol style="list-style-type: none"> 1. Persistent jaundice 2. Ascites; 3. Hepatic encephalopathy; 4. Congestive splenomegaly with hypersplenism or esophageal varices. Liver failure due to abuse of alcohol or medicines is not covered. |
| 22 | Sequela of encephalitis or meningitis | Refers to the permanent dysfunction of the nervous system due to encephalitis or meningitis. The permanent dysfunction of the nervous system means one or more of the following disorders which remain to exist after 180 days of diagnosis: <ol style="list-style-type: none"> 1. Complete loss of function of one or more limbs (Note 1); 2. Complete loss of speech or masticatory and swallowing functions (Note 2); 3. Complete loss of independent living ability, and inability to independently carry out three or more daily activities among the six- basic daily (Note 3). |
| 23 | Deep coma | Refers to loss of consciousness due to illness or accidental injury, no reaction to external stimuli and internal demand, with the degree of coma of 5 or lower than 5 under the Glasgow Coma Scale, and |

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| | | having been continuously using the respirator and other life supporting systems for more than 96 hours. Deep coma caused by abuse of alcohol or medicines is not covered. |
| 24 | Binaural hearing loss | Refers to the permanent and irreversible (Note 4) loss of binaural hearing due to illness or accidental injury. The average hearing threshold is greater than 90 dB at frequencies of 500 Hz, 1000 Hz, and 2000 Hz, subject to confirmation by pure tone audiometry, acoustic conductivity or auditory evoked potential test. |
| 25 | Paralysis | Refers to permanent and complete loss of function of two or more limbs due to illness or accidental injury. Permanent and complete refers to [a condition in which] two among the three main joints of each limb remain to be completely stiff or unable to move after 180 days of diagnosis of illness or 180 days of occurrence of accident. |
| 26 | Heart valve surgery | Refers to [a condition in which] a heart valve replacement or repair surgery is actually carried out for treatment of heart valve disease. |
| 27 | Severe brain damage | Refers to [a condition in which] the important brain region is injured due to mechanical external forces against the head, resulting in permanent dysfunction of nervous system, subject to confirmation by radiographic examination such as cranial tomography (CT), magnetic resonance imaging (MRI) or positron emission tomography (PET). Permanent dysfunction of the nervous system means, after 180 days of brain injury, one or more of the following dysfunction remain: <ol style="list-style-type: none"> 1. Complete loss of function of one or more limbs (Note 1); 2. Complete loss of speech or masticatory and swallowing functions (Note 2); 3. Complete loss of independent living ability, and inability to independently carry out three or more daily activities among the six basic daily living activities (Note 3). |
| 28 | Severe third-degree burns | Refers to the degree of burn is at third degree, and the area burnt at third degree reaches 20% or more of the entire body. |
| 29 | Severe primary pulmonary hypertension | Refers to the unexplained [condition in which] the pulmonary arterial pressure persistently increases and progressively develops, resulting in chronic disease which has caused permanent and irreversible limitation to the ability to perform physical activities and has reached Class IV of the New York Heart Association (NYHA) Functional Classification, and the average pulmonary arterial pressure exceeds 30mmHg under resting condition. |
| 30 | Severe motor neuron disease | Is a group of progressive degenerative diseases of motor neurons of the central nervous system, including progressive spinal muscular atrophy, progressive medullary paralysis, primary lateral sclerosis, amyotrophic lateral sclerosis, subject to loss of independent living ability, and inability to independently carry out three or more daily activities among the six basic daily living activities (Note 3). |
| 31 | Loss of speech | Refers to complete loss of ability to speak due to illness or accidental injury and unable to recover by existing medical |

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| | | treatment in spite of at least 12 months of active treatment (this time limit is not applicable to complete removal of the vocal cord). Loss of speech due to psychological factors is not covered. |
| 32 | Severe aplastic anemia | Refers to anemia, neutropenia and thrombocytopenia due to chronic and persistent failure of hematopoietic function of the bone marrow, subject to all of the following conditions: <ol style="list-style-type: none"> 1. Diagnosis is supported by the result of bone marrow biopsy; 2. Peripheral blood meets the following three conditions: <ol style="list-style-type: none"> (1) The absolute value of neutrophil $\leq 0.5 \times 10^9/L$; (2) Reticulocytes $< 1\%$; (3) The absolute value of platelet $\leq 20 \times 10^9/L$. |
| 33 | Aorta surgery | Refers to [a condition in which] a thoracic surgery or laparotomy to remove, replace or repair the damaged aortic vessels for treatment of aortic disease. The aorta refers to the thoracic and abdominal aorta, excluding the branch vessels of the thoracic aorta and abdominal aorta. The percutaneous transluminal coronary angioplasty is not covered. |
| 34 | Sequela of cerebral apoplexy | Refers to cerebral hemorrhage, embolism, or infarction due to cerebrovascular disease, resulting in permanent dysfunction of nervous system. Permanent dysfunction of nervous system refers to, after 180 days following the diagnosis, one or more of the following dysfunction remain: <ol style="list-style-type: none"> 1. Complete loss of function of one or more limbs (Note 1); 2. Complete loss of speech or masticatory and swallowing functions (Note 2); 3. Complete loss of independent living ability, and inability to independently carry out three or more daily activities among the six basic daily living activities (Note 3). |
| 35 | Acute myocardial infarction | Refers to [a condition in which] the coronary artery obstruction causes insufficient regional blood supply and results in partial myocardial necrosis, subject to three of the following conditions: <ol style="list-style-type: none"> 1. Typical clinical manifestations, such as acute chest pain; 2. Shown by recent electrocardiographic changes; 3. Myocardial enzymes or troponin has diagnostic significance, or is shown to be consistent with the dynamic changes of acute myocardial infarction; 4. 90 days after the pathogenesis, upon examination, it is confirmed of left ventricular failure, for example, the left ventricular ejection fraction is less than 50%. |
| 36 | Severe Parkinson's disease | Is a degenerative disease of the central nervous system; its clinical manifestations are paralysis, ataxia, etc., subject to all of the following conditions: |

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|----|---------------------------------|--|
| | | <ol style="list-style-type: none"> 1. Medical treatment cannot control the condition of disease; 2. Complete loss of independent living ability, and inability to independently carry out three or more daily activities among the six basic daily living activities (Note 3). <p>Secondary Parkinson's syndrome is not covered.</p> |
| 37 | Severe Alzheimer's disease | <p>Refers to a disease in which the progressive and irreversible change of brain results in severe recession or loss of intelligence; its clinical manifestations are obvious cognitive dysfunction, behavioral disorders and sociability decline, and needing support from others for daily living, subject to confirmation by radiographic examination such as cranial tomography (CT), magnetic resonance imaging (MRI) or positron emission tomography (PET), and Complete loss of independent living ability, and inability to independently carry out three or more daily activities among the six basic daily living activities (Note 3).</p> <p>Neurosis and mental illness are not covered.</p> |
| 38 | Coronary artery bypass grafting | <p>Refers to [a condition in which] a thoracic surgery has actually been carried out for transplant of coronary artery bypass for the treatment of severe coronary heart disease.</p> <p>Coronary stent implantation, cardiac catheterization balloon catheterization, laser radiofrequency technology and other non-thoracic interventional procedures, and endoscopic surgery are not covered.</p> |

Note:

- (1) Complete loss of limb function: refers to [a condition in which] two of the three major joints are stiff or unable to move freely. Limb refers to entire upper limb including the shoulder joint or entire lower limb including hip joint.
- (2) Complete loss of speech or masticatory and swallowing functions: complete loss of speech refers to inability to make any three among the four types of sound (including) to indicate three voices (including lip, teeth and tongue, roof of mouth, and throat), or the vocal cord is completely removed, or aphasia due to cerebral language center is injured. Complete loss of masticatory and swallowing functions refers to a state of physical disorder or malfunction caused by any reasons other than teeth, resulting in inability to chew or swallow, and inability to eat or swallow any food other than liquid.
- (3) Six basic daily living activities refer to: (1) dressing: ability to put on or take off clothes by oneself; (2) moving: moving from one room to another by oneself; (3) transferring: getting on or out of bed or wheelchair by oneself; (4) defecating: controlling the defecation by oneself; (5) eating: taking ready food from a bowl or dish and putting into the mouth by oneself; and (6) bathing: taking a shower or bathing oneself.
- (4) Permanent and irreversible: refers to [a condition in which] from the date of disease diagnosis or of occurrence of accident, upon 180 days of active treatment, [the disease] remains unable to recover through existing treatment method.

Schedule 4: "Table of Cash Value of the Contract at the End of Each Policy Year"

Table of Cash Value for the Insured at the age of 20 , Gender Female , when purchasing the insurance.

| | | | | | | | |
|------------------------------|-----------|------------------------------|-----------|------------------------------|-----------|------------------------------|-----------|
| End of 1 st Year | 0.00 | End of 2 nd Year | 0.00 | End of 3 rd Year | 453.10 | End of 4 th Year | 812.80 |
| End of 5 th Year | 1,185.60 | End of 6 th Year | 1,571.70 | End of 7 th Year | 1,971.60 | End of 8 th Year | 2,385.90 |
| End of 9 th Year | 2,814.70 | End of 10 th Year | 3,258.80 | End of 11 th Year | 3,717.60 | End of 12 th Year | 4,192.70 |
| End of 13 th Year | 4,684.20 | End of 14 th Year | 5,192.30 | End of 15 th Year | 5,717.30 | End of 16 th Year | 6,259.90 |
| End of 17 th Year | 6,820.40 | End of 18 th Year | 7,399.20 | End of 19 th Year | 7,997.20 | End of 20 th Year | 8,614.80 |
| End of 21 th Year | 9,251.70 | End of 22 th Year | 9,910.20 | End of 23 th Year | 10,590.50 | End of 24 th Year | 11,293.60 |
| End of 25 th Year | 12,020.20 | End of 26 th Year | 12,771.40 | End of 27 th Year | 13,548.30 | End of 28 th Year | 14,352.30 |
| End of 29 th Year | 15,185.10 | End of 30 th Year | 16,048.60 | End of 31 th Year | 16,484.40 | End of 32 th Year | 16,932.80 |
| End of 33 th Year | 17,394.30 | End of 34 th Year | 17,869.60 | End of 35 th Year | 18,359.70 | End of 36 th Year | 18,865.30 |
| End of 37 th Year | 19,387.20 | End of 38 th Year | 19,925.10 | End of 39 th Year | 20,479.30 | End of 40 th Year | 21,050.10 |
| End of 41 th Year | 6,097.50 | End of 42 th Year | 6,255.80 | End of 43 th Year | 6,417.80 | End of 44 th Year | 6,583.30 |
| End of 45 th Year | 6,752.40 | End of 46 th Year | 6,925.40 | End of 47 th Year | 7,102.60 | End of 48 th Year | 7,284.50 |
| End of 49 th Year | 7,471.60 | End of 50 th Year | 7,664.10 | End of 51 th Year | 7,862.20 | End of 52 th Year | 8,066.20 |
| End of 53 th Year | 8,276.20 | End of 54 th Year | 8,492.70 | End of 55 th Year | 8,716.50 | End of 56 th Year | 8,948.80 |
| End of 57 th Year | 9,191.10 | End of 58 th Year | 9,445.50 | End of 59 th Year | 9,714.20 | End of 60 th Year | 10,000.00 |