



PRODUCT SUMMARY: PruVital Cover

The Product Summary and Policy Illustration are for illustrative purposes only and shall not constitute a contract. The following is a simplified description of the key product features. The exact terms can be found in your policy document.

Details of Product Provider:

Prudential Assurance Company Singapore (Pte) Limited ("Prudential Singapore"), 30 Cecil Street, #30-01 Prudential Tower, Singapore 049712 Tel: 1800-3330 333 is the product provider.

The Prudential Financial Consultant or a representative of Prudential Singapore shall explain to you that Prudential Singapore is responsible for the product features and contractual provisions.

This policy and its Supplementary benefit(s) (if any) is/are protected under the Policy Owners' Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy is automatic and no further action is required from you. For more information on the types of benefits that are covered under the scheme as well as the limits of coverage, where applicable, please contact your insurer or visit the General Insurance Association (GIA) /Life Insurance Association (LIA) or SDIC web-sites (www.gia.org.sg or www.lia.org.sg or www.sdic.org.sg).

The Proposer acknowledges receipt of all the pages of the Product Summary for the Main plan and Supplementary benefits (where applicable). The contents have been explained to his/her satisfaction.

Nature and Objective of the Plan:

PruVital Cover is a non-participating, regular premium term plan that provides financial protection against death and Terminal Illness for a specific term.



Benefits under the Plan:

What do we pay for Death Benefit?

If the life assured is covered for this benefit and dies before the Cover Expiry Date, we pay the higher of:

- (a) the Death Benefit as shown on your Certificate of Life Assurance; or
- (b) the total premiums paid (excluding premiums for supplementary benefits).

However, if you made a successful Terminal Illness, Disability or critical illness claim previously, and your sum assured is now reduced, your premiums will be reduced accordingly. The Death Benefit we pay will be the higher of:

- (a) the reduced sum assured; or
- (b) the total premiums paid (excluding premiums for supplementary benefits).

The total premiums paid will be based on the reduced premium and calculated as if you have been paying this reduced premium amount from the inception of your policy.

What is not covered for Death Benefit?

If the life assured dies directly or indirectly from an activity under Special Exclusion or Special Terms and Conditions shown on your Certificate of Life Assurance, we do not pay the Death Benefit but will refund the total premiums, without interest, received from you less expenses incurred by us on your policy.

If the life assured dies from suicide within 12 months from the Cover Start Date or date of reinstatement of your policy, we will cancel your policy and refund the total premiums, without interest, received from you less expenses incurred by us on your policy.

If the life assured dies from a Pre-existing Condition within 12 months from the Cover Start Date or date of reinstatement (if any) of your policy, we cancel your policy unless the level of severity was accurately declared in the proposal and specifically accepted by us. If we cancel the policy, we refund the total premiums received from you, without interest, less expenses incurred by us on your policy.

A **"Pre-existing Condition"** is the existence of any signs or symptoms for which treatment, medication, consultation, advice or diagnosis has been sought or received by the life assured or would have caused an ordinary prudent person to seek treatment, diagnosis or cure, prior to the Cover Start Date or date of reinstatement (if any) of this benefit.

What happens after a death claim?

Your whole policy automatically terminates once a death claim is paid.

What do we pay for Terminal Illness Benefit?

If the life assured is covered for this benefit and is diagnosed as having a Terminal Illness before the Cover Expiry Date, we pay the higher of:

- (a) the Terminal Illness Benefit as shown on the Certificate of Life Assurance; or
- (b) the total premiums paid (excluding premiums for supplementary benefits).

If you made a successful Disability or critical illness claim previously, and your sum assured is now reduced, your premiums will be reduced accordingly. The Terminal Illness benefit we pay will be the higher of:

- (a) the reduced sum assured; or
- (b) the total premiums paid (excluding premiums for supplementary benefits).

The total premiums paid will be based on the reduced premium and calculated as if you have been paying this reduced premium amount from the inception of your policy.

"Terminal Illness" is defined as a condition which, in the opinion of a Registered Medical Practitioner and subject to the acceptance of our appointed doctor, is highly likely to lead to death within 12 months.

A **"Registered Medical Practitioner"** is any person properly qualified by degree in western medicine to practice medicine, and is licensed by the appropriate medical authority of his country of residence to practice medicine within the scope of his licensing and training and excludes the policyowner, the life assured or a family member of either.



What is not covered for Terminal Illness Benefit:

We do not pay in any of the following circumstances:

- (a) if the life assured is already deceased at the time of the claim. We will pay the Death Benefit instead;
- (b) the symptoms of the Terminal Illness existed at the Cover Start Date or date of reinstatement (if any) of this benefit; or
- (c) the life assured is diagnosed as having a Terminal Illness caused by:
 - self-inflicted injuries while sane or insane;
 - Acquired Immunodeficiency Syndrome ("**AIDS**"), AIDS-related complex or infection by Human Immunodeficiency Virus ("**HIV**") except HIV Due to Blood Transfusion and Occupationally Acquired HIV as defined below; or
 - the use of unprescribed drugs where such drugs are required by law to be prescribed by a Registered Medical Practitioner.
 - an activity under Special Exclusion and/or Special Terms and Conditions shown on your Certificate of Life Assurance.

"**HIV Due to Blood Transfusion and Occupationally Acquired HIV**" refers to:

- A) Infection with the Human Immunodeficiency Virus (HIV) through a blood transfusion, provided that all of the following conditions are met:
 - the blood transfusion was medically necessary or given as part of a medical treatment;
 - the blood transfusion was received in Singapore after the issue date, date of endorsement or date of reinstatement of this benefit, whichever is the later;
 - the source of the infection is established to be from the Institution that provided the blood transfusion and the Institution is able to trace the origin of the HIV tainted blood; and
 - the insured does not suffer from Thalassaemia Major or Haemophilia.

- B) Infection with the Human Immunodeficiency Virus (HIV) which resulted from an accident occurring after the issue date, date of endorsement or date of reinstatement of this benefit, whichever is the later whilst the insured was carrying out the normal professional duties of his or her occupation in Singapore, provided that all of the following are proven to our satisfaction:
 - Proof of the accident giving rise to the infection must be reported to us within 30 days of the accident taking place;
 - Proof that the accident involved a definite source of the HIV infected fluids;
 - Proof of sero-conversion from HIV negative to HIV positive occurring during the 180 days after the documented accident. This proof must include a negative HIV antibody test conducted within 5 days of the accident; and
 - HIV infection resulting from any other means including sexual activity and the use of intravenous drugs is excluded.

This benefit is only payable when the occupation of the insured is a medical practitioner, housemen, medical student, state registered nurse, medical laboratory technician, dentist (surgeon and nurse) or paramedical worker, working in medical centre or clinic (in Singapore).

This benefit will not apply under either section A or B where a cure has become available prior to the infection. "Cure" means any treatment that renders the HIV inactive or non-infectious.

What happens after a Terminal Illness claim?

Once we pay a Terminal Illness claim, the Terminal Illness Benefit terminates. In addition:

- (a) If the sum assured of the Death Benefit is the same as the sum assured of the Terminal Illness Benefit, the policy and all its benefits including the Vital Cover Disability Benefit terminates.
- (b) If the sum assured of the Death Benefit exceeds the sum assured of the Terminal Illness Benefit, the sum assured of the Death Benefit shall be reduced to an amount equal to the difference between the sum assured of the Death Benefit and the sum assured of the Terminal Illness Benefit. You can continue the policy for this Death Benefit and any other supplementary benefits (except those terminated under c), d), e) and f) of this Section) by paying the required premiums.
- (c) If the sum assured of the Vital Cover Disability Benefit exceeds the sum assured of the Terminal Illness Benefit, the sum assured of the Vital Cover Disability Benefit shall be reduced to an amount equal to the difference between the sum assured of the Vital Cover Disability Benefit and the sum assured of the Terminal Illness Benefit. This is provided you continue to pay the required premiums for both the Death and Vital Cover Disability Benefits.



- (d) If the sum assured of the Vital Cover Disability Benefit is less than or equal to the sum assured of the Terminal Illness Benefit, the Vital Cover Disability Benefit shall be terminated. In such a case, we will not pay for the Vital Cover Disability Benefit once we have paid the Terminal Illness Benefit.
- (e) If the sum assured of the Vital Crisis Care Benefit exceeds the sum assured of the Terminal Illness Benefit, the sum assured of the Vital Crisis Care Benefit shall be reduced to an amount equal to the difference between the sum of the Vital Crisis Care Benefit and the sum assured of the Terminal Illness Benefit. This is provided you continue to pay the required premiums for both the Death and Vital Crisis Care Benefits.
- (f) If the sum assured of the Vital Crisis Care Benefit is less than or equal to the sum assured of the Terminal Illness Benefit, the Vital Crisis Care Benefit shall be terminated. In such a case, we will not pay for the Vital Crisis Care Benefit once we have paid the Terminal Illness Benefit.

What is the impact of early surrender?

As this product has no savings or investment feature, there is no cash value if the policy ends or if the policy is terminated prematurely.

Premiums:

Premiums are payable for the period of premium payment term and can be paid monthly, quarterly, half-yearly or yearly.

We guarantee that the premiums for your policy will remain unchanged throughout its premium term as long as you pay the premiums within 30 days of the date they are due.

PruVital Cover is not a Medisave-approved policy and you may not use Medisave to pay the premium for this policy.

Select additional benefits according to your need(s):

With additional premiums, you may add supplementary benefits to this insurance plan for extra protection.

All supplementary benefits are subject to product terms and conditions. Please consult a representative of either Prudential Singapore or a distributor duly appointed by Prudential Singapore for more information.

Exclusions:

There are certain conditions under which no benefits will be payable. These are stated as exclusions in your policy document. You are advised to read your policy document for the full details of these exclusions.

Termination:

The benefits under this policy terminate upon:

- the death of the life assured;
- payment of the benefits;
- the surrender of the policy;
- non-payment of premiums within 30 days of the date they are due; or
- the Cover Expiry Date of the policy as shown on your Certificate of Life Assurance,

whichever event occurs first.

Note:

Life insurance is a contract of utmost good faith and a proposer is required to disclose in the proposal form fully and faithfully all the facts which he knows or ought to know, as otherwise the policy issued may be void.

The terms and conditions of your policy are contained in your policy document.

Buying a life insurance is a long-term commitment. This plan has no cash value. Buying health insurance products that are not suitable for you may impact your ability to finance your future healthcare needs.

**Free Look Period**

After purchasing a life insurance policy, you have a 14-day free-look period - starting from the day you receive your policy documents to review the documents carefully. During this time, if you choose to cancel your policy, we will refund you the premiums you have paid (without interest), less any medical fees and other expenses, such as payments for medical check-ups and medical reports, incurred by us.

If we make your policy document and all other documents from us available electronically via PRUaccess, we consider they have been delivered and received when you receive the relevant SMS or email telling you that the documents are accessible on PRUaccess. Otherwise, we consider your policy and all other documents from us as delivered and received seven days from the date of posting to the last-known address you gave us.

If you decide this policy is not suitable for your needs, simply write to us within the 14-day free-look period.



PRODUCT SUMMARY FOR SUPPLEMENTARY BENEFITS

This Product Summary is a simplified description of the key product features. The exact terms can be found in the policy documents.

Vital Crisis Care Benefit

Vital Crisis Care Benefit is an optional supplementary benefit that provides financial protection in the event of a diagnosis of any one of the 5 covered critical illnesses.

What do we pay for Vital Crisis Care Benefit?

If a life assured is covered for this benefit and is diagnosed as having any one of the 5 covered critical illnesses before the Cover Expiry Date, we pay the sum assured of Vital Crisis Care.

The 5 critical illnesses* we cover are:

1. Heart attack of Specified Severity
2. Stroke with Permanent Neurological Deficit
3. Major Cancer
4. End Stage Kidney Failure
5. Blindness (Irreversible Loss of Sight)

***The Life Insurance Association Singapore (LIA) has standard Definitions for 37 severe-stage Critical Illnesses (Version 2019). These Critical Illnesses fall under Version 2019. You may refer to www.lia.org.sg for the standard Definitions (Version 2019).**

We pay this benefit only for one critical illness, even if the life assured is diagnosed as having a second critical illness.

If the life assured is diagnosed as having any one of the 5 critical illnesses and is also Totally and Permanently Disabled or terminally ill, we pay this benefit or the Vital Cover Disability Benefit or the Terminal Illness Benefit but not both. If the life assured dies as a result of the critical illness, we pay only the Death Benefit under your policy and not this benefit.

The critical illness must be diagnosed by a Registered Medical Practitioner.

What is not covered for Vital Crisis Care Benefit:

We do not pay in any of the following circumstances:

- a) the critical illness existed before the Cover Start Date or date of reinstatement (if any) of this benefit;
- b) any benefit for any critical illness that is due directly or indirectly to a Pre-existing Condition unless it was declared in the proposal and specifically accepted by us;
- c) the life assured is diagnosed as having a Heart Attack of Specified Severity or Major Cancer within 90 days of the Cover Start Date or date of reinstatement (if any) of this benefit;
- d) the life assured is diagnosed before age 6 as having a critical illness caused by a congenital or inherited disorder;
- e) the life assured is diagnosed as having a critical illness caused by:
 - self-inflicted injuries while sane or insane;
 - AIDS, AIDS-related complex or infection by HIV except HIV Due to Blood Transfusion and Occupationally Acquired HIV;
 - the use of unprescribed drugs where such drugs are required by law to be prescribed by a Registered Medical Practitioner;
 - an activity under Special Exclusion and/or Special Terms and Conditions shown on your Certificate of Life Assurance; or
 - participation or attempted participation in an unlawful act.

What happens after a Vital Crisis Care claim?

Once we pay a Vital Crisis Care claim, the Vital Crisis Care Benefit terminates. In addition:

- a) If the sum assured of the Death Benefit is the same as the sum assured of the Vital Crisis Care Benefit, the policy and all its benefits including the Terminal Illness and Vital Cover Disability Benefit terminates.
- b) If the sum assured of the Death Benefit exceeds the sum assured of the Vital Crisis Care Benefit, the sum assured of the Death Benefit shall be reduced to an amount equal to the difference between the sum assured of the Death Benefit and



the sum assured of the Vital Crisis Care Benefit. You can continue the policy for this Death Benefit and any other supplementary benefits (except those terminated under c), d), e) and f) of this section) by paying the required premiums.

- c) If the sum assured of the Terminal Illness Benefit exceeds the sum assured of the Vital Crisis Care Benefit, the sum assured of the Terminal Illness Benefit shall be reduced to an amount equal to the difference between the sum assured of the Terminal Illness Benefit and the sum assured of the Vital Crisis Care Benefit. This is provided you continue to pay the required premiums for both the Death and Terminal Illness Benefits.
- d) If the sum assured of the Terminal Illness Benefit is less than or equal to the sum assured of the Vital Crisis Care Benefit, the Terminal Illness Benefit shall be terminated. In such a case, we will not pay for the Terminal Illness Benefit once we have paid the Vital Crisis Care Benefit.
- e) If the sum assured of the Vital Cover Disability Benefit exceeds the sum assured of the Vital Crisis Care Benefit, the sum assured of the Vital Cover Disability Benefit shall be reduced to an amount equal to the difference between the sum assured of the Vital Cover Disability Benefit and the sum assured of the Vital Crisis Care Benefit. This is provided you continue to pay the required premiums for both the Death and Vital Cover Disability Benefits.
- f) If the sum assured of the Vital Cover Disability Benefit is less than or equal to the sum assured of the Vital Crisis Care Benefit, the Vital Cover Disability Benefit shall be terminated. In such a case, we will not pay for the Vital Cover Disability Benefit once we have paid the Vital Crisis Care Benefit.

Premiums:

Premiums are payable for the period of premium payment term.

The premium for the Vital Crisis Care is not guaranteed. We reserve the right to vary the premium of this benefit at any time in the future. However, we will give you 30 days' written notice before doing so.

Vital Crisis Care is not a Medisave-approved policy and you may not use Medisave to pay the premium for this policy.

Exclusions:

There are certain conditions under which no benefits will be payable. These are stated as exclusions in your policy document. You are advised to read your policy document for the full details of these exclusions.

Termination:

This benefit under the policy will terminate upon:

- death of the life assured;
- payment of this benefit;
- non-payment of premiums within 30 days of the date they are due;
- the Cover Expiry Date of the benefit as shown on the Certificate of Life Assurance; or
- the termination of the main policy that it is attached to

whichever event occurs first.

Note:

Life insurance is a contract of utmost good faith and a proposer is required to disclose in the proposal form fully and faithfully all the facts which he knows or ought to know, as otherwise the policy issued may be void.

The terms and conditions of your policy are contained in your policy document.

Buying a life insurance is a long-term commitment. This plan has no cash value. Buying health insurance products that are not suitable for you may impact your ability to finance your future healthcare needs.