

FWD The One



This is your contract for your insurance policy.

Read it to understand all the benefits as well as the important terms and conditions that apply to your insurance cover. Don't worry, we've made it as easy to read as possible.

If you need help, call our hotline: +632 8888 8388

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About this policy

Thank you for choosing FWD. We're pleased to be protecting you, so you can focus on living life to the fullest.

Easy to read

We're here to change the way you feel about insurance—starting with this document. We've made it easy to read, so you can understand the benefits and what you are covered for.



We highlight important information like this. Read these carefully.

Words with special meaning

Some words in this policy have special meaning. We show those meanings on page 15 **Important words and phrases**. Please refer to this section when you need to.

Beneficiaries	Endorsement	Policy owner
Benefit amount	Expiry date	Premium due date
Claimant	Insured person	We, us and our
Effective date	Policy	You and your
	Policy data page	

What makes up this policy

This insurance policy is made up of the documents listed below. We will provide them to you in electronic form. You may also request for a paper version to be provided to you.

- This policy document.
- The policy data page.
- Any supplementary benefit that you have chosen.
- The application form and any documents you provided with it.
- Any policy endorsement.
- The rewards terms and conditions.



Supplementary benefits can be added to your policy for added protection against serious events.

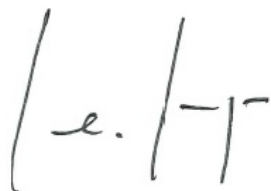


A policy endorsement is the document we provide to tell you about any official change to this policy.

Questions?

Please call our **Customer Connect Hotline at +632 8888 8388**. We are here for you 24/7.

For and on behalf of FWD Life Insurance Philippines.



Lee Longa

Chief Financial Officer and Treasurer

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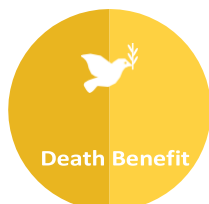


The One

This policy pays a lump sum if the insured person dies.

Your benefits at a glance

! You can claim the following benefits while this policy is active.



Details on page 4

We pay 100% of the benefit amount to the beneficiaries if the insured person dies.

This is a simplified diagram. For more important details see page 4 [What you are covered for](#).

Supplementary benefits

You can choose to add supplementary benefits to your policy for added protection. The details of any supplementary benefits you have will be shown on your policy data page, or in a policy endorsement (if you add the supplementary benefit after your policy started).

This is a protection product

This The One policy, and any supplementary benefits you may have added, is a protection product and does not contain any savings or investment components. This policy provides a death benefit.



What you are covered for

In this section, we explain what benefits you are covered for, and any conditions that apply to those benefits. General exclusions also apply – see page 6 **What we do not cover**.



You can claim the following benefits while this policy is active.



We pay 100% of the benefit amount to the beneficiaries if the insured person dies.

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Making a claim

Claiming this benefit

To claim for this benefit, we need to receive signed claim documents and any other information that we need. We will not be able to process your claim until we receive this information and your signed claim documents.

We are not responsible for any of the costs of filing any forms or getting any documents or reports needed for the claim.

What you or the beneficiary needs to do

You or the beneficiary must make every effort to send your claim to us within 90 days of the insured person's death as it is difficult to assess claims after this period. Your claim will not be declined or reduced if there were good reasons why you could not send us your claim on time.

When the unexpected happens, we're here to help. Just call our Customer Connect Hotline on +632 8888 8388 and we'll help you with your claim.



Claims may be delayed or even declined if they are sent in after 90 days. Don't risk it!

What we will do

We will assess your claim, and if it is valid, we will pay the benefits less any unpaid premiums.

Taking unpaid premiums from benefit payments

If there are any unpaid premiums, we will deduct these amounts from the benefit payment when we pay it.

What we do not cover

This policy has certain exclusions, meaning situations where we will not pay the benefits. We list below the exclusions that apply.

Exclusions that apply to death benefit

Suicide or self-inflicted act

We will not pay the death benefit if the claim arises from attempted suicide or a deliberate self-inflicted act by the insured person while sane within two years after this policy's effective date, or last reinstatement date. In this case, we will return all premiums you have paid to the beneficiaries.

We will pay the benefit if the insured person committed suicide while insane at any time.

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When this policy starts and ends

When this policy starts

This policy starts on the effective date shown on the policy data page, unless we tell you that it will start on a different date. You can only claim for this policy after it has started.

Receiving this policy contract

We will provide you this policy contract in electronic form, and we will consider it delivered to you, 10 days after the effective date. A paper version of this policy is available at your own cost.

This policy can be accessed by downloading our supercharged 2-in-1 app, Omne by FWD, which allows you to easily manage your insurance policy anytime, anywhere. You can download Omne by FWD at Google Play Store or App Store.

Canceling this policy

You can cancel this policy by sending us a written request within 15 days after this policy has been electronically delivered to you.

Upon cancellation, we will return all your paid premiums for this policy. No interest will be paid on the refunded amount. If a claim is payable for this policy, we will not refund the premiums.

When this policy ends

This policy ends on the earliest of the following dates:

- on the date of the insured person's death;
- on the date we approve your request to cancel this policy;
- on the expiry date of this policy as shown in the policy data page;
- on the premium due date, if you have not paid your premium for this policy after the 31-day grace period.



The claimant can claim the benefit after this policy ends if the insured person's death happened before this policy ended.

Making changes to this policy

You can ask us to make a change to this policy at any time. Minor changes such as change of contact information can be made through our CustomerConnect Hotline at +632 8888 8388. We are here for you 24/7.

Major changes to this policy such as "change in beneficiaries" will require you to submit the policy change form.

We will provide a letter documenting the change when we approve the changes.

Have irrevocable beneficiaries or assignees

You will need written permission from all irrevocable beneficiaries or assignees if you are making a change that will reduce any benefit they can receive under this policy. See page 9 [Types of beneficiaries](#) to find out more about irrevocable beneficiaries.



This policy is not changed unless we give you a policy endorsement.

Reinstating this policy

If this policy ended because premiums weren't paid

You can apply to reinstate (restart) this policy within three years of it ending, if it ended because the premiums were not paid.

If we approve your reinstatement application, the policy benefits will be effective from the date we reinstate this policy.



This policy will restart from the date we reinstate it.

What you need to do

To apply to reinstate this policy, you need to do the following:

- Send us a written request to reinstate this policy using our standard form and provide any other document and information we will ask to CustomerConnect.ph@fwd.com, or call our 24/7 Customer Connect Hotline at +632 8888 8388.
- Pay us all premiums due for this policy, including any interest, at an interest rate we set upon our confirmation.

What happens next

We will review your request, and if we are satisfied that you have met our requirements, we will reinstate this policy, effective on the date we set.



The main people under this policy

We refer to the policy owner, insured person, and beneficiaries throughout this policy document. This section explains who they are, what rights they have, and how they are treated under this policy.

Policy owner (you)

You (the policy owner) own this policy, and your details are shown in the policy data page or endorsement. Only you can make changes to, or enforce any rights under this policy.

You receive all the benefits under this policy, except for the death benefit which is paid to the beneficiaries.



If you have any irrevocable beneficiaries or assignees, you will need their permission to make certain changes to this policy. See [page 10 Types of beneficiaries](#) for details.

Using this policy as collateral

You can choose to assign the benefits under this policy to someone else (assignee) as collateral for a loan. We will only recognize a policy assignment if we have made a record of it, and issued to you with a policy endorsement.

What you need to do to assign your policy

You need to provide us a signed and notarized collateral assignment form along with any additional information we need. Call our 24/7 Customer Connect Hotline at +632 8888 8388 and they will guide you through the process.

What we will do

We will make a record of your assignment, and provide you with acknowledgment in writing.

We are not responsible for the effect, sufficiency or validity of any assignment.

Insured person

This is the person you chose for us to protect under this policy. The policy insured can be the policy owner. We will pay the death benefit upon the death of this person.

Beneficiaries

The beneficiaries are the people you chose to receive any amounts paid under your policy when the insured person dies. You can appoint one or more beneficiaries, and you can decide how much of the death benefit each beneficiary will receive.

Beneficiaries receive the death benefit under this policy. Beneficiaries cannot receive any other benefit under this policy, and they cannot make changes to this policy.

Types of beneficiaries

When you choose your beneficiaries, you classify them as 'revocable' or 'irrevocable', and 'primary' or 'contingent'. These choices affect how easily you can change your policy, and who is first in line to receive the benefits. You can choose any legal entity (including a corporation, partnership, charity, or trust) to be a beneficiary.

Revocable or irrevocable

Your beneficiaries will be revocable or irrevocable.

Revocable

If you make all of your beneficiaries revocable, you can make any change to your policy without the permission of your revocable beneficiaries.

Irrevocable

If you make any of your beneficiaries irrevocable, you need written permission from all of your irrevocable beneficiaries if you are making a change that will reduce any death benefit they can receive under this policy.

Beneficiaries are considered to be irrevocable if you made no changes to your beneficiaries while the insured person was alive.

Revocable

Policy can be changed any time

[OR]

Irrevocable

Must agree to change the policy

Primary or contingent

Your beneficiaries will be primary or contingent. Primary beneficiaries are first in line to receive the death benefit. If there are no living primary beneficiaries, we will pay the death benefit to the contingent beneficiaries, if any.



Contingent beneficiaries are the back-ups for your primary beneficiaries. They only receive a benefit if there are no primary beneficiaries.

Primary

We will pay the entire death benefit to the surviving primary beneficiaries in the specific shares you have chosen. If you have not chosen any shares, we will pay them in specific equal shares.

Contingent

If there are no living primary beneficiaries, we will pay the entire death benefit to the surviving contingent beneficiaries, if any, in the specific shares you have chosen. If you have not chosen any specific shares, we will pay them in equal shares.

Primary

First in line

[OR]

Contingent

Second in line

Substitute beneficiaries

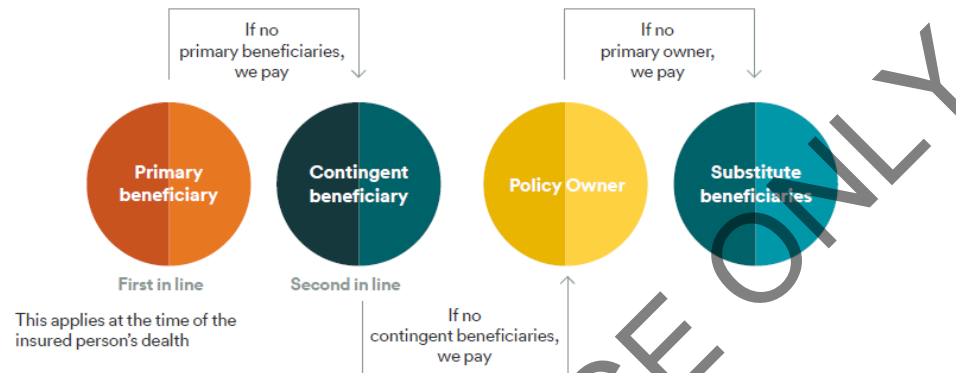
We think it's important to be ready for anything, so your policy has rules if there are no primary or contingent beneficiaries when the insured person dies. This may happen if the beneficiaries have been disqualified by law, or if they die before the insured person.

Should this happen, we will pay the policy owner the death benefit in the event of death. Otherwise, we will pay the death benefit to any of the surviving relations of the insured person's:

- legal spouse;
- legitimate children;
- illegitimate children;
- parents;
- brothers and sisters; or
- half-brothers and half-sisters.

If we cannot pay any of the people above, we will pay the death benefit to the insured person's estate.

Beneficiary payment order



Changing a beneficiary

You can change or add a beneficiary at any time before your policy ends. If you have any irrevocable beneficiaries and you want to:

- reduce the death benefit share of the irrevocable beneficiaries; or
 - remove any of the irrevocable beneficiaries;
- you need to get the consent of the current irrevocable beneficiaries whose death benefit may be reduced, before we can make the change.

What you need to do

To change the beneficiary, you need to tell us in writing and give us any other information we need (including the consent of any of the irrevocable beneficiaries).

What we will do

We will provide a letter documenting the change.



Premiums

You may renew your coverage until age 99 by paying your premiums regularly.

We have the right to change the premium for this policy if approved by the Insurance Commission. If we do, we will notify you at least 45 days before your renewal date.

When you need to pay your premiums

When you apply for this policy, you will be told how much you need to pay and when the premiums are due (the premium due dates). You need to keep paying your premiums until the date shown on the policy data page.

The frequency of your premiums for this policy (for example every quarter, semi-annual, or once a year) will be shown on the policy data page.

When you renew your policy, the amount you need to pay may change depending on your age.

You will enjoy No Premium Increase after every 5 years if you continually renew your plan on time. This applies to both this base plan's premium and any supplementary rider which you may have.

What happens when you do not pay your premiums

31-day grace period

We give you a 31-day grace period after the premium due date to pay the premium. This policy will continue if you pay the premium within the grace period. If we do not receive the premium within the grace period, your policy will end.



Keeping it legal

Contract and governing law

This policy is a legal contract of insurance between you and us, and is governed by Philippine law.

Under this policy, we agree to provide the policy benefits, and you agree to keep to the terms and conditions of your policy.

We rely on your information

We relied on the information you and the insured person gave us during the application process to provide you with this policy. It is important that you and the insured person had given us complete, correct, and true information, as this information helped us decide if you and the insured person were eligible for this policy, and what you needed to pay.

You must let us know immediately if the information you or the insured person gave us was not complete, correct, or true. If you don't let us know and don't provide complete, correct, or true information, your benefits under this policy will be affected and, in some cases, we may cancel this policy.

Incorrect age or sex

If we discover that we were given the incorrect age or sex for the insured person, we will adjust the benefit amount of this policy to reflect the correct age and sex.

If the insured person was not eligible for insurance coverage at their correct age or sex, we will treat this policy as having never existed, and we will refund all premiums you have paid for this policy.

Contestability

We can contest (dispute) the validity of any claim within two years from the effective date or the date we last reinstated this policy (whichever is later) if we discover that you or the insured person did not give us complete, correct, or true information when you applied for this policy.

We cannot contest (dispute) the validity of any claim after the two-year period unless we are allowed by law or jurisprudence.

If we contest (dispute) a claim, we will review the claim and decide if we have any reason to treat this policy as having never existed. If we do, we will not pay any benefit,

and we will refund all premiums you have paid (to you or to your beneficiaries).

Time limit on legal action

No one can take legal action in connection with this policy after five years from the time the reason for the legal action arose. Legal actions done on this policy can be made anywhere within the legal jurisdiction of the Philippines.

Payments under your policy

All amounts paid to us, or by us, in connection with your policy will be paid in the currency shown in the policy data page.

We will only make payments in the Philippines.

Payments are not adjusted for inflation or deflation

Article 1250 of the Civil Code of the Philippines does not apply to any payments under your policy. Article 1250 says:

“In case an extraordinary inflation or deflation of the currency stipulated should supervene, the value of the currency at the time of establishment of the obligation shall be the basis of payment...”



No adjustments are made if there is an extraordinary rise or fall in the value of the currency you chose for your policy.

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Important words and phrases

The list below explains the meanings of certain words and phrases used in this document.

Beneficiaries	The person or people you chose to receive the death benefit under this policy if the insured person dies.
Benefit amount	Refers to the benefit amount or sum assured of this policy as stated in the policy data page.
Claimant	The beneficiaries if the claim is a death benefit.
Effective date	The day this policy and insurance coverage start.
Endorsement	The document we provide to record any official change to this policy when we issue it or throughout the life of the policy. An endorsement can only be issued by an authorized FWD employee.
Expiry date	The date shown on the policy data page, when this policy and insurance coverage ends.
Insured person	The person insured under this policy and shown under 'insured' on the policy data page.
Policy	<p>All of the documents listed below.</p> <ul style="list-style-type: none"> – This policy document. – The policy data page. – The application form and any documents you provided with it. – Any policy endorsement. – The rewards terms and conditions.
Policy data page	<p>The document that shows:</p> <ul style="list-style-type: none"> – your name and details; – the effective date and expiry date of this policy; – the benefit amount; – the premium you have paid; and – the policy premium due dates.
Policy owner	You, the person who owns this policy. Your details are shown under 'owner' on the policy data page. We also use the term 'you', or 'your' in this policy document.
Premium due date	The date your premium is due to be paid, shown on your policy data page.
We, us, and our	FWD Life Insurance Corporation, the issuer of your policy.
You, and your	You, the person who owns this policy. Your details are shown under 'owner' on the policy data page.

Important notice: The Insurance Commission, with offices in Manila, Cebu and Davao, is the government office in charge of enforcing all laws related to insurance and supervising insurance companies and intermediaries. They help the general public in matters relating to insurance. For any questions or complaints, please contact the Public Assistance and Mediation Division (PAMD) of the Insurance Commission at 1071 United Nations Avenue, Manila. Phone +632 8523 8461 to 70 or email publicassistance@insurance.gov.ph. The official website of the Insurance Commission is www.insurance.gov.ph

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Accidental Death
Supplementary Benefit

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Accidental Death

This supplementary benefit pays an extra lump sum if the insured person dies as a result of an accident.

Part of this policy

This supplementary benefit is part of this policy.

All of the other terms of the base policy will also apply to this supplementary benefit. If there is a conflict between the base policy and this supplementary benefit, the terms and provisions of this supplementary benefit will apply.

The premiums of this supplementary benefit will not be included to the healthy life benefit of the base policy, if applicable.

Words with special meaning

Some words in this supplementary benefit have special meaning. We show those meanings on page 7 ([What we mean by certain words](#)). Please refer to this section when you need to.

Accident

Base policy

Benefit amount

Your benefits at a glance



You can claim the following benefits while this supplementary benefit is active.



Details on page 3

We pay 100% of the benefit amount if the insured person dies because of an accident.

This is a simplified diagram. For more important details, see page 3 (What you are covered for).

What you are covered for



You can claim the following benefits while this supplementary benefit is active



We pay 100% of the benefit amount if the insured person dies due to an accident and the death happens within 180 days from that accident.



An accident is the abrupt, unexpected, and unwanted contact between the insured person and an external object or substance.



The accident must be the sole and direct cause of death or the injury leading to death.

Claiming this supplementary benefit

To claim for this supplementary benefit, we need to receive signed claim documents and any other information that we need. We will not be able to process your claim until we receive this information and your signed claim documents.

We are not responsible for any of the costs of filing any forms or getting any documents or reports needed for the claim.

What you or your beneficiary needs to do

You must make every effort to send your claim to us within 90 days of the insured person's death as it is difficult to assess claims after this period. Your claim will not be declined or reduced if there were good reasons why you could not send us your claim on time.

When the unexpected happens, we're here to help. Just call our 24/7 Customer Connect Hotline at +632 8888 8388 and we'll help you with your claim.

What we pay

We will assess your claim, and if it is valid, we will pay the benefits less any unpaid premiums.

What we do not cover

This supplementary benefit has certain exclusions, meaning situations where we will not pay the benefits. We list below the exclusions that apply.

Unlawful acts

We will not pay any benefit if the claim arises from you or the insured person committing any illegal or unlawful act (including terrorist act), or failure to act.

War

We will not pay any benefit if the claim arises from war or any act of war (whether declared or not), or any civil or military uprising.

When this supplementary benefit starts and ends

When this supplementary benefit starts

This supplementary benefit starts on the effective date shown on the policy data page, unless we tell you that it will start on a different date. This supplementary benefit cannot start before this policy. You can only claim for this supplementary benefit after it has started.

We will provide you this supplementary benefit in electronic form, and we will consider it delivered to you 10 days after the effective date.

This policy can be accessed by downloading our supercharged 2-in-1 app, Omne by FWD, which allows you to easily manage your insurance policy anytime, anywhere. You can download Omne by FWD at Google Play Store or App Store.

When this supplementary benefit ends

This supplementary benefit ends on the earliest of the following dates:

- on the date of the insured person's death;
- on the date we approve your request to surrender or cancel this supplementary benefit;
- on the expiry date of this supplementary benefit as shown on the policy data page;
- on the premium due date, if you have not paid your premium for this supplementary benefit after the 31-day grace period; or
- on the date the base policy ends. This includes the policy's cancellation, termination, and expiration.



You can claim a benefit after this supplementary benefit ends if the accidental death happened before this supplementary benefit ended.

Reinstating this supplementary benefit

You can apply to reinstate this supplementary benefit within three years of it ending, if it ended because of non-payment of the premium.

This supplementary benefit can only be reinstated if the base policy is active (or is also reinstated).



This supplementary benefit will restart from the date we reinstate it.

What you need to do

To apply to reinstate this supplementary benefit, you need to do the following:

- Send us a written request to reinstate this supplementary benefit using our standard form and provide any other document and information we will ask to CustomerConnect.ph@fwd.com, or call our 24/7 Customer Connect Hotline at +632 888 8388.
- Pay us all premiums due for this supplementary benefit, including any interest, at an interest rate we set upon our confirmation.

What happens next

We will review your request, and if we are satisfied that you have met our requirements, we will reinstate this supplementary benefit.

Premiums

You need to keep paying your premiums for this supplementary benefit during the duration (years payable) shown on the policy data page.

When you need to pay your premiums

When you apply for this supplementary benefit, you will be told how much you need to pay and when the premiums are due (the premium due dates).

The frequency of your premiums for this supplementary benefit (for example: every month, or once a year) will follow the frequency payment of the base policy.

You will enjoy No Premium Increase after every 5 years if you continually renew your plan on time. This applies to both this base plan's premium and this supplementary rider's premium

What happens when you do not pay your premiums

31-day grace period

We give you a 31-day grace period after the premium due date to pay the premium. This supplementary benefit will continue if you pay the premium within the grace period.

If you do not pay the premium due within the grace period, this supplementary benefit ends.

We rely on your information

We relied on the information you and the insured person gave us during the application process to provide you with this supplementary benefit. It is important that you and the insured person gave us complete, correct and true information, as this information helped us to decide if you and the insured person were eligible for this supplementary benefit, and what you need to pay.

You must let us know immediately if the information you or the insured person gave us was not complete, correct or true. If this is not the case, your benefits under this supplementary benefit will be affected, and in some cases, we may cancel this supplementary benefit.

Incorrect age or sex

If we discover that we were given the incorrect age or sex for the insured person, we will adjust the benefit amount of this supplementary benefit to reflect the correct age and sex.

If the insured person was not eligible for insurance coverage at their correct age or sex, we will treat this supplementary benefit as having never existed, and we will refund all premiums you have paid for this supplementary benefit.

Contestability

We can contest (dispute) the validity of any death benefit claim within two years from:

- the effective date or the date we last reinstated this supplementary benefit (whichever is later); and
- the date of the increase in the benefit amount (for the increased amount)

if we discover that you or the insured person did not give us complete, correct, or true information when you applied for this supplementary benefit.

We cannot contest (dispute) the validity of any death benefit claim after the two-year period, unless we are allowed by law or jurisprudence.

If we contest (dispute) a claim, we will review the claim and decide if we have any reason to treat this supplementary benefit as having never existed. If we do, we will not pay any benefit, and we will refund all premiums you have paid (to you or to your beneficiaries).

What we mean by certain words

The list below explains the meanings of certain words and phrases used in this document.

Accident	An accident is the abrupt, unexpected, and unwanted contact between the insured person and an external object or substance. The accident must be the sole and direct cause of the condition.
Base policy	Base policy refers to the policy document or policy contract where this supplementary benefit is attached.
Benefit amount	Refers to the benefit amount or sum assured of this supplementary benefit as stated on the policy data page.