



**Gear up
on your adventure**

Crisis XDefender Light

Critical Illness Protection • Participating Life

Gear up on your adventure

Get geared to unlock your courage against all odds. FWD's **Crisis XDefender Light** ("the Plan") brings to you an all-round defence at an affordable premium, helping you break through unexpected obstacles fearlessly!

Higher Confidence from a Broad Coverage

In addition to protection for 61 Crises, the Plan also covers 22 Special Diseases with 8 of them specifically for juveniles^{1,2,3}. There's no simpler way to achieve your need for protection against critical illnesses.

Protection for Your Newborn

Everyone wants to protect their babies as much as they can. Under the Plan, should an infant be born to you or your spouse, your new born will be covered by Crisis Benefit or Death Benefit under Special Benefit for Infant⁶ at no extra premium or impact on your own coverage to the child's 5th birthday – 20% of the Initial Sum Insured of this Policy (up to HK\$200,000 / US\$25,000 per infant).

Greater Reassurance from Additional Benefits

The Plan provides Additional Coverage Benefit to back you up if you are diagnosed with any covered Crises³ or pass away in the first 15 Policy Years⁴.

Medical Check-up for Your Wellness

Early detection is always the better option, so to help you maintain your well-being, the Plan offers a Medical Check-up⁷ on each of the 2nd, 4th, 6th, 8th and 10th Policy Anniversaries of the Plan.

Extra Protection for Benign Tumour^{1,5}

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

Reward for Healthy Body

In addition to the medical check-up, the Plan rewards you if you are in health. The Plan offers you Guaranteed Cash Value from the 3rd Policy Anniversary and Special Bonus (if any)⁸ when you surrender the policy while the policy is in force.

Protect you from congenital diseases^{1,2,3}

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

Professional Services Are Around You

As part of our promise of care, the Plan also gives you access to a priority health coaching service: Crisis XDefender Light – PREMIER THE ONEcierge One Team Health Management ("PREMIER THE ONEcierge")⁹. You just simply call the hotline and PREMIER THE ONEcierge provides you with a leading network of specialists so you can receive the most suitable treatment from the best-suited doctor and top-tiered network hospitals in the Pan-Asia Region.

When your crisis claim is approved, you are given the access to some of the highest-ranked medical institutions in the U.S. for a second medical opinion¹⁰. What's more, the Plan also provides a referral service ("Family Care Services")¹¹ to help with taking care of your home. Through Family Care Services, you have immediate access to a wide range of carefully selected referral services including home-cleaning service, Chinese soup service, child care service and pet care service.

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

Plan Summary

Plan Type	Basic Plan
Benefit Term	To age 100
Issue Age (Age Next Birthday)	1 - 55
Premium Payment Term	25 years
Premium Structure	The premium is non-guaranteed ¹² but it will not be increased based on the age of the Insured on his or her next birthday.
Currency	HKD / USD
Premium Payment Mode	Monthly / Annually
Minimum Initial Sum Insured	HK\$120,000 / US\$15,000 (per policy)
Maximum Initial Sum Insured ¹³	HK\$12,000,000 / US\$1,500,000 (per life)
Crisis Benefit ^{1,3}	Current Sum Insured + Special Bonus (if any) ^a
Special Disease Benefit ^{1,2}	Advanced payment of 20% of Initial Sum Insured + proportionate Special Bonus (if any) ⁸ (subject to a maximum of HK\$400,000 / US\$50,000 per Insured of each claim under all policies of the Crisis XDefender Series for Carcinoma-in-situ or Early Stage Malignancy of Specific Organs, Angioplasty of Coronary Artery and Special Diseases for Juvenile)
Additional Coverage Benefit ^{3,4}	Additional 55% of the Initial Sum Insured (for the insured whose issued age is 35 or below at next birthday) or 35% of the Initial Sum Insured (for the insured whose issued age is above 35 at next birthday) will be payable if the Insured is diagnosed with covered Crises or passes away before the 15 th Policy Anniversary
Benign Tumour Extra Benefit ^{1,5}	Group 1: Surgical Excision of Covered Benign Tumour of (i) breast, (ii) ovary, or (iii) uterus - Additional 5% of Initial Sum Insured (subject to a maximum of HK\$80,000 / US\$10,000 per Insured of each claim under all policies of Crisis XDefender Series of each organ)
	Group 2: Surgical Excision of Covered Benign Tumour of (i) adrenal gland, (ii) bone, (iii) kidney, (iv) liver, (v) lung, (vi) nerve in cranium or spine, (vii) pancreas, (viii) pituitary gland, or (ix) testis - Additional 15% of Initial Sum Insured (subject to a maximum of HK\$200,000 / US\$25,000 per Insured of each claim under all policies of Crisis XDefender Series of each organ), less amount of Benign Tumour Extra Benefit claim paid and/or payable
	The Benign Tumour Extra Benefit for each organ will be payable once only. A maximum of all claims paid and/or payable under this benefit is subject to the lower of: (i) 15% of Initial Sum Insured; or (ii) HK\$200,000 / US\$25,000 per Insured under all policies of Crisis XDefender Series
Special Benefit for Infant ⁶	If the Insured (or the Insured's spouse) gives birth to a child, the new-born infant shall be covered by the Crisis Benefit or Death Benefit (20% of the Initial Sum Insured of this Policy once per new-born infant and up to a per newborn infant of HK\$200,000 / US\$25,000 under all policies of the Insured and/or Insured's spouse of Crisis XDefender Series) from the attained age of 15 days until the child's 5 th birthday or termination of the Policy of the Insured, whichever is earlier
Surrender Benefit / Maturity Benefit	Guaranteed Cash Value + Special Bonus (if any) ^a
Death Benefit ¹	Current Sum Insured + Special Bonus (if any) ^a
Medical Check-up ⁷	Medical check-up coupon will be offered on each of the 2 nd , 4 th , 6 th , 8 th and 10 th Policy Anniversaries of the Plan if all premiums are paid when due
Crisis XDefender Light – PREMIER THE ONEcierge One Team Health Management ⁹	Service Program
Second Medical Opinion ¹⁰	Service Program
Family Care Services ¹¹	Service Program
Extended Grace Period Benefit ¹⁴	Available since the 2 nd Policy Year, if the Policy Owner becomes a parent, gets married or divorced, or becomes involuntarily unemployed during the Premium Payment Term of the Plan, the Policy Owner can choose to apply for the Extended Grace Period Benefit to stay protected by this Plan while enjoying an extended grace period for premium payment up to 365 days

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

Crises covered in Crisis XDefender Light

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

Special Diseases covered in Crisis XDefender Light

Group 1: Cancer^	<ul style="list-style-type: none"> - Carcinoma-in-situ of Specific Organs (all organs except skin, including but not limited to the organs listed below) <ul style="list-style-type: none"> a) Breast b) Cervix Uteri c) Colon and Rectum d) Fallopian Tube e) Liver f) Lung g) Nasopharynx h) Ovary i) Pancreas j) Penis k) Stomach and Esophagus l) Testis m) Urinary Tract (for the purpose of in-situ cancers of the bladder, stage Ta of papillary carcinoma is included) n) Uterus o) Vagina - Early Stage Malignancy of Specific Organs <ul style="list-style-type: none"> a) Chronic Lymphocytic Leukaemia b) Prostate c) Thyroid d) Non Melanoma Skin Cancer 	
Group 2: Illnesses related to Organ Failure	<ul style="list-style-type: none"> - Miliary Tuberculosis - Moderately Severe Chronic Lung Disease 	<ul style="list-style-type: none"> - Moderately Severe Systemic Lupus Erythematosus (S.L.E.) with Lupus Nephritis - Skin Transplantation
Group 3: Illnesses related to Circulatory System	<ul style="list-style-type: none"> - Angioplasty for Carotid Arteries - Angioplasty of Coronary Artery^ 	<ul style="list-style-type: none"> - Cardiac pacemaker / defibrillator insertion
Group 4: Illnesses related to Nervous System	<ul style="list-style-type: none"> - Moderately Severe Parkinson's Disease 	
Group 5: Others Illnesses	<ul style="list-style-type: none"> - Amputation of One Foot due to Complication from Diabetes Mellitus - Diabetic Retinopathy 	<ul style="list-style-type: none"> - Osteoporosis with Fractures* - Severe Central or Mixed Sleep Apnea

Special Diseases for Juvenile[^] (age next birthday 1 (15 days) – 18) covered in Crisis XDefender Light

Special Diseases for Juvenile	<ul style="list-style-type: none"> - Autism - Dengue Haemorrhagic Fever - Kawasaki Disease - Osteogenesis Imperfecta 	<ul style="list-style-type: none"> - Rheumatic Fever with Valvular Impairment - Severe Asthma - Still's Disease - Type 1 Diabetes Mellitus
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Benign Disease covered in Crisis XDefender Light

Benign Disease	- Surgical Excision of Covered Benign Tumour [#]
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[®] The claim for Loss of Hearing will only be paid if at the time of diagnosis the Insured is aged 3 (age next birthday) or above.

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

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

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

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

Covered Benign Tumour specifically excluded:

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

Note:

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

Remarks:

1. FWD Life Insurance Company (Bermuda) Limited (Incorporated in Bermuda with limited liability) ("FWD" or "We") will pay the Crisis Benefit / Special Disease Benefit / Benign Tumour Extra Benefit only where the First Symptoms appear, the condition occurs and the diagnosis or surgery relating to the relevant Disease occurs after the first 90 days from the Policy Date or the date of last reinstatement, whichever is later. This first 90 days limitation does not apply if any Disease is solely and directly caused by an Accident and independently of any cause. Upon the payment of claims under Special Disease Benefit, the Current Sum Insured of the policy will be reduced accordingly. Current Sum Insured means the Initial Sum Insured less any claims paid and / or payable (excluding non-guaranteed Special Bonus amounts) for Special Disease Benefit under the Policy. Death Benefit, Crisis Benefit, Guaranteed Cash Value, future premium and non-guaranteed Special Bonus (if any) will be reduced accordingly. The following payment(s) under each claim of Special Disease Benefit will not be higher than the reduced Current Sum Insured. If the Current Sum Insured is reduced to zero, the policy will be terminated.
2. Each Special Disease is payable once only (except for Carcinoma-in-situ or Early Stage Malignancy of Specific Organs and Angioplasty of Coronary Artery). A maximum of two claims can be made in respect of Carcinoma-in-situ or Early Stage Malignancy of Specific Organs and Angioplasty of Coronary Artery under the Plan. To be eligible for the second claim under Carcinoma-in-situ or Early Stage Malignancy of Specific Organs, the claims must be a Carcinoma-in-situ or Early Stage Malignancy of one of the covered organs that is different from the organ(s) of the previous claims for which benefit(s) have / has been paid. If the relevant covered organ has both a left and a right component (such as, but not limited to the lungs or breasts), the left side and right side of the organ shall be considered one and the same organ. To be eligible for the second claim under Angioplasty of Coronary Artery, the treatment must be performed on a location of stenosis or obstruction in a major coronary artery where no stenosis greater than 60 percent was identified in the coronary angiogram relating to the first claim of this illness, for which benefit has been paid. A maximum of HK\$400,000 / US\$50,000 per Insured of each claim is payable under all policies of Crisis XDefender series for Carcinoma-in-situ or Early Stage Malignancy of Specific Organs, Angioplasty of Coronary Artery and Special Diseases for Juvenile. This benefit will be payable until the total payment of Crisis Benefit and/or Special Disease Benefit under the Policy reach 100% of the Initial Sum Insured.
3. While the Policy is in force, if the Insured's age next birthday is 4 or below, FWD will pay between 20% and 80% of the Initial Sum Insured for Crisis Benefit as shown in the table below (FWD will not pay more than the Current Sum Insured).

Age next birthday of the Insured when first confirmed diagnosed	Percentage of Initial Sum Insured payable
1	20%
2	40%
3	60%
4	80%

4. Additional 55% of the Initial Sum Insured (for the insured whose issued age is 35 or below at next birthday) or 35% of the Initial Sum Insured (for the insured whose issued age is above 35 at next birthday) will be payable as at the date when the Crisis Benefit or Death Benefit is payable under the Policy. This benefit will be payable once only under the Policy and will be ceased (i) upon the termination of the Policy; (ii) once the Crisis Benefit or Death Benefit has been paid or becomes payable; or (iii) on the 15th Policy Anniversary Date, whichever is the earliest. This additional benefit amount will not be deducted from the Current Sum Insured.
5. Surgical Excision of Covered Benign Tumour means an actual undergoing of a complete surgical excision of a Solid Tumour and such tumour is excised specifically for the purpose of ruling out cancer and is confirmed by histopathological examination in writing by a specialist as a non-cancerous benign tumour. This additional benefit amount will not be deducted from the Current Sum Insured.
6. This additional benefit is available if the Policy has been in effect for at least 2 consecutive Policy Years after the Policy Date or the date of reinstatement, whichever is later. Policy Owners have to notify FWD within 180 days from the date of birth of the infant for application of this benefit. Once the coverage of the covered child has been in effect by FWD, upon the death of the covered child or if the covered child has the first symptoms of a Crisis that appear after the first 90 days from the coverage effective date and has the first confirmed diagnosis of the Crisis subsequently, FWD will pay the benefit. Any claim of the new-born infant under this benefit shall not be deducted from the Insured's Current Sum Insured and will not affect the other benefits available for the Insured under this Policy.
7. Available for Insured whose issue age is 18 (age next birthday) or above. If the issued age of Insured is 17 (age next birthday) or below, medical check-up coupon will be available biennially to the Insured starting from the Policy Anniversary of the Insured's age of 20 at next birthday, and is entitled to a maximum of 5 medical check-up coupons.

8. When the Policy has been in effect for 5 years or more, a Special Bonus, which is not guaranteed, will be payable under the Policy upon the payment of Crisis Benefit or Death Benefit under the Policy, surrender, maturity of the Policy or at the end of the one year reinstatement period if the policy lapses and is not reinstated within that period. A proportionate non-guaranteed Special Bonus, if any, will be also paid upon payment of the Special Disease Benefit or partial surrender. Non-guaranteed Special Bonus (if any) will then be reduced on a pro rata basis accordingly. Non-guaranteed Special Bonus will not be payable when total payment of Crisis Benefit and/or Special Disease Benefit under the Policy reach 100% of the Initial Sum Insured.
9. PREMIER THE ONEcierge, provided by HMG and its healthcare network team and Parkway Hospitals Singapore ("Parkway") is not a part of the Policy or benefit item under the Policy Provisions and only applicable to the Plan. FWD reserves the right to terminate or vary the service in its sole discretion without further notice. FWD shall not be responsible for any act, negligence or failure to act on the part of HMG and its healthcare network team and Parkway. This service is only available in the Pan-Asia Region. The hotline for PREMIER THE ONEcierge is (852) 8120 9066 for Hong Kong and there is also a toll-free number for Mainland, 400 9303078. For details, please refer to the attached PREMIER THE ONEcierge's brochure.
10. Second Medical Opinion is provided by International SOS currently and is not guaranteed renewable. All relevant fees and charges (if any) of this service shall be borne by the Insured. FWD shall not be responsible for any act or failure to act on the part of International SOS. Details of the services may be revised from time to time without FWD's prior notice.
11. Family Care Services is provided by Aspire Lifestyles ("Aspire") currently and is not guaranteed renewable. All relevant fees and charges (if any) of this service shall be borne by the Insured. FWD shall not be responsible for any act or failure to act on the part of Aspire and/or any of its affiliates. Details of the services may be revised from time to time without FWD's prior notice.
12. Premium rates are not guaranteed and FWD reserves the right to review the premium rates from time to time.
13. Subject to the aggregate maximum Sum Insured per life of all designated critical illness policies, which is determined by FWD's prevailing rules and regulations.
14. You must provide FWD with all documents and information FWD requires within 30 days from the date you first receive relevant proof. If any premium is unpaid at the end of the Extended Grace Period, the premium shall be in default and the Policy shall cease to be in force from the date of the first unpaid premium was due without prejudice to any claim arising prior to the date the Policy ceases to be in force. Any due and unpaid premium shall be deducted from any benefit otherwise payable. You are only entitled to apply and claim for the Extended Grace Period Benefit once under this Policy.

Important Notes and Declarations:

- The Plan is underwritten by FWD. FWD is solely responsible for all features, Policy approval, coverage and benefit payment under the Plan. FWD recommends that you carefully consider whether the Plan is suitable for you in view of your financial needs and that you fully understand the risk involved in the Plan before submitting your application. You should not apply for or purchase the Plan unless you fully understand it and you agree it is suitable for you. Please read through the following related risks before making any application of the Plan.
- The Plan material is issued by FWD. FWD accepts full responsibility for the accuracy of the information contained in this product material. This product material is intended to be distributed in the Hong Kong Special Administrative Region only and shall not be construed as an offer to sell, a solicitation to buy or the provision of any insurance products of FWD outside the Hong Kong Special Administrative Region. All selling and application procedures of the Plan must be conducted and completed in the Hong Kong Special Administrative Region.
- The Plan is an insurance product. The premium paid is not a bank savings deposit or time deposit. The Plan is not protected under the Deposit Protection Scheme in the Hong Kong Special Administrative Region.
- The Plan is a participating life product with a savings element. The costs of insurance and the related costs of the Policy are included in the premium paid under this Plan despite the product brochure/leaflet and/or the illustration documents of this Plan having no schedule/section of fees and charges or no additional charge noted other than the premium.
- The Plan is a savings insurance product. If you surrender your Policy before its maturity date, the amount you get back may be less than the total premium you have paid.
- All underwriting and claims decisions are made by FWD. FWD relies upon the information provided by the applicant and the Insured in the insurance application to decide to accept or decline the application with a full refund of any premium and insurance levy paid without interest. FWD reserves the right to accept/reject any insurance application and can decline your insurance application without giving any reason.
- All the above benefits and payment are paid after deducting Policy debts (if any, e.g. unpaid premiums or premium loan and the interest of the loan).
- Please refer to FWD's website (<https://www.fwd.com.hk/en/regulatory-disclosures/fulfilment-ratios/>) for dividend / bonus history. The dividend / bonus declaration philosophy, investment strategy and investment vehicle of FWD are shown below (Please refer to FWD's website for latest information: <https://www.fwd.com.hk/en/regulatory-disclosures/dividend-bonus-declaration-philosophy/>).

Dividend / Bonus Declaration Philosophy

FWD issues participating policies, which offer the policyholders ("You") with dividend/bonus benefits that are not guaranteed. Dividend/bonus includes annual dividend, terminal dividend, reversionary bonus and special bonus.

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

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

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

The dividend/bonus recommendation is reviewed and approved by our Board of Directors (the "Board"), with written declaration by the Chairman of the Board, an Independent Non-Executive Director and the Appointed Actuary on due regard to our dividend policy as well as the principle of fair treatment of customers. The current year and projected dividend/bonus would be communicated to you at least annually. Any changes in the current year and projected dividend/bonus will be reflected in the policy annual statement.

Smoothing

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

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

Pooling

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

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

Investment Strategy

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

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

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

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

The asset portfolios also target to provide diversification across different geographic regions and industries to the extent the size of portfolio can support. Currency exposure of the underlying policies is mitigated by closely matching either through direct investments in the same currency denomination or the use of currency hedging instruments. Currently, the majority of the asset is invested in the United States and Asia Pacific and denominated in USD. Furthermore, the asset portfolio is actively managed by investment professionals to closely monitor the investment performance. In addition to conducting regular review, FWD also reserves the right to change the investment strategy and shall notify policyholders for any material changes.

Investment Vehicle

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

Fixed income type securities

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

Equity-type investments

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

¹Include interest on accumulated dividends

- If you are not fully satisfied with this policy, you have the right to change your mind.
We trust that this policy will satisfy your financial needs. However, if you are not completely satisfied, you have the right to cancel and obtain a full refund of the insurance premium paid by you and levy paid by you without interest by giving us written notice. Such notice must be signed by you and received directly by the office of FWD within 21 calendar days immediately following either the day of delivery of the policy or a Cooling-off Notice to you or your nominated representative, whichever is the earlier. The notice is the one sent to you or your nominated representative (separate from the policy) notifying you of your right to cancel within the stated 21 calendar day period. No refund can be made if a claim payment under the policy has been made prior to your request for cancellation. Should you have any further queries, you may (1) call our Customer Service Hotline on 3123 3123; (2) visit our FWD Insurance Solutions Centres; (3) email to cs.hk@fwd.com and we will be happy to explain your cancellation rights further.
- To surrender the Policy, the Policy Owner needs to send FWD a completed surrender form or by any other means acceptable by FWD.

FWD must comply with the following requirements of the Inland Revenue Ordinance to facilitate the Inland Revenue Department automatically exchanging certain financial account information:

- (i) to identify accounts as non-excluded "financial accounts" ("NEFAs");
- (ii) to identify the jurisdiction(s) in which NEFA-holding individuals and NEFA-holding entities reside for tax purposes;
- (iii) to determine the status of NEFA-holding entities as "passive non-financial entities (NFEs)" and identify the jurisdiction(s) in which their controlling persons reside for tax purposes;
- (iv) to collect information on NEFAs ("Required Information") which is required by various authorities; and
- (v) to furnish Required Information to the Inland Revenue Department.

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

Notice of Claim

Written notice of any claim for Death Benefit, Crisis Benefit, Special Disease Benefit and Benign Tumour Extra Benefit must be given to FWD within 30 days (and in any case no later than 6 months) from the date of death of the Insured or the date of the First Confirmed Diagnosis of such respective Crisis, Special Disease or Benign Disease. Any claims for Death Benefit, Crisis Benefit, Special Disease Benefit and Benign Tumour Extra Benefit received after the said 6-month period shall not be accepted, unless FWD in its sole discretion decides otherwise.

Please refer to Policy Provision for the details of claims procedures of each benefit.

Incorrect disclosure or non-disclosure

You or the Insured are/is required to disclose all material facts in response to FWD's underwriting questions. Material facts are the facts, information or circumstances, in particular medically-related facts, e.g. medical history, smoking status, etc., that would influence the judgment of FWD in setting the premium, or in determining whether to insure the risk. If you or the Insured are/is uncertain as to whether or not a certain piece of information is material, please take a cautious approach and disclose it to FWD.

Incorrect disclosure or non-disclosure of any material facts which, in FWD's opinion, may affect FWD's risk assessment, including but not limited to, age, gender and other material facts declared on the relevant application form, may render this Policy void from the Policy Date, unless FWD confirms otherwise in writing. FWD's liability shall be limited to the amount of Total Premiums Paid without interest, less any benefit which has been paid under this Policy.

What are the key product risks?

Credit risk

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

Liquidity risk

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

Exchange rate and currency risk

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

Inflation risk

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

Early surrender risk

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

Non-guaranteed benefits

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

Exclusions

The below exclusions apply to Crisis Benefit, Special Disease Benefit and Benign Tumour Extra Benefit.

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

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

If the Insured dies by suicide, whether sane or insane, within 13 calendar months from the Policy Date, FWD's liability shall be limited to the amount of the premiums paid without interest, less any indebtedness and any benefit which has been paid under this Policy.

Premium adjustment

The premium is non-guaranteed during the premium payment term and may significantly increase due to factors including but not limited to claims experience and policy persistency. However, the premium will not be increased based on the age of the Insured on his or her next birthday.

Premium term and non-payment of premium

The premium payment term of the Policy is 25 years. FWD allows a Grace Period of 30 days after the premium due date for payment of each premium. If a premium is still unpaid at the expiration of the Grace Period and the Policy has no cash value, the Policy will be terminated from the date the first unpaid premium was due. If the Policy has any loanable cash value, FWD shall automatically advance the amount of premium due as a loan against such loanable cash value of the Policy. Once the total amount of outstanding loan and interest accrued thereon is equal to or exceeds the loanable cash value of the Policy, the Policy will be terminated. Please note that once the Policy is terminated on this basis, you will lose all of your benefits.

Termination conditions

The Policy shall terminate on the earliest of the following:

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

Important Words

Disease(s)

The Disease(s) covered under this Policy are shown in a table as set out in "Appendix 1: List of Diseases Covered" of policy provisions. Each Disease is further defined in Appendix 2, Appendix 3 or Appendix 4 of policy provisions.

First Confirmed Diagnosis

The first time that a diagnosis of a Crisis, Special Disease or Benign Disease (as the case may be) is made by a Medical Practitioner and confirmed by histopathological and / or cytopathological patterns and / or radiological tests, blood tests and / or other laboratory tests results. Date of diagnosis of a Crisis, Special Disease or Benign Disease suffered by the Insured will be the day when tissue specimen, culture, blood specimen or any other laboratory investigation upon which the diagnosis is determined is first taken from the Insured. For Cancer, Carcinoma-in-situ or Early Stage Malignancy of Specific Organs and Benign Disease, a diagnosis based on history, physical and radiological findings only will not meet the standards of diagnosis required by this Policy.

First Symptoms

Any condition or illness or any of its direct causes in respect of an Insured, where the Insured and / or the Policy Owner was aware or should reasonably have been aware of signs or symptoms of the condition or illness, or where any laboratory test or investigation showed the likely presence of the condition or illness.

Medically Necessary

A medical service, procedure or supply which is necessary and is:

- (a) consistent with the diagnosis and customary medical treatment for the Insured's disease;
- (b) recommended by a Medical Practitioner for the care or treatment of the Insured's disease involved and must be widely accepted professionally in Hong Kong as effective, appropriate and essential based upon recognized standards of the health care specialty involved; and
- (c) not furnished primarily for the personal comfort or convenience of the Insured or any medical service provider. Experimental, screening and preventive services or supplies are not considered Medically Necessary.

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



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