



# AIA SINGAPORE AIA PREMIER DISABILITY COVERAGE (SPECIALISED OCCUPATION)

## Name of Insured and Policy Owner

Name of Insured

Name of Policy Owner

## Policy Number(s)

## Modified Terms of Coverage

Your AIA Premier Disability coverage shall be subjected to the following endorsement.

The "Working Disability" refers to disability by reason of Illness or Injury:

- (a) and the date of commencement of such disability as confirmed by a Physician is while the Insured is employed to earn or obtain Remuneration; and
- (b) during the Deferment Period and thereafter, resulting in the Insured totally unable to perform the material or substantial duties of his Own Occupation and any occupation to which he is reasonably suited by reason of his training, experience or education.

## Acceptance of the Modified Terms of Coverage

I agree to accept the modified terms outline above.

Signature of Policy Owner

Date

FSC/IR's Name

FSC/IR's Code

FSC/IR Unit Name

Mobile No.

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