

Office of Insurance Commission

Registrar Order

No. 56/2561

re: Format and Content of General Conditions of Ordinary, Standard Dread Disease Riders for Insurance Terms of One Year and More Than One Year, and Rules on Approval, for Life Insurance Companies

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To ensure that general conditions of dread disease riders to ordinary life insurance policies are under the same standards, and that the process of application for approval of the format, content, and insurance premiums is smooth and fast, by virtue of section 29 and section 30 of the Life Insurance Act, B.E. 2535 (1992), the registrar hereby issues an order with a following details.

Clause 1 This order is called Registrar Order No. 56/2561 re: Format and Content of General Conditions of Ordinary, Standard Dread Disease Riders for Insurance Terms of One Year and More Than One Year, and Rules on Approval, for Life Insurance Companies

Clause 2 This order is henceforth effective.

Clause 3 In this order,

"a dread disease rider," or whatever trade name it is called, means a rider to an ordinary life insurance policy that mainly offers insurance against an illness or death from a dread disease, with an insurance term of one year or more than one year. A dread disease rider does not include an enhanced rider to increase benefits for the payer of insurance premiums in the case of a dread disease, an enhanced rider to waive insurance premiums in the case of a dread disease, or a single-premium dread disease rider;

"an enhanced rider to increase benefits for the payer of insurance premiums" means a rider to an insurance policy that offers insurance coverage when the payer of insurance premiums

that is not the insured suffers from a dread disease, as defined; insurance premiums will be waived for a period prescribed in the rider, or whatever trade name it is called; and

"an enhanced rider to waive insurance premiums in the case of a dread disease" means a rider to an insurance policy that offers insurance coverage if the insured suffers from a dread disease, as defined; insurance premiums will be waived for a period prescribed in the rider, or whatever trade name it is called.

Clause 4 From 1 April 2019, the format and content of general conditions of a dread disease rider that are non-consistent with those in a standard dread disease rider, as prescribed in section 1 at the end of this order must be repealed, unless the dread disease rider is issued for the insured before 1 April 2019, and the insured extended their rider term upon the completion of their existing policy or upon the expiration of the rider (reinstatement).

Clause 5 Application for approval of the format, content, and insurance premiums of a dread disease rider that was approved by the registrar before this order came into force must comply with the following requirements.

(1) The format, content, and insurance premiums of the dread disease rider must have been approved by the registrar and remain in full force and effect.

(2) The conditions on benefits must be included, in the same format and with the same content as those approved.

(3) The format and content of general conditions of a standard dread disease rider in accordance with section 1 at the end of this order will apply, except for the following situations.

(A) The condition regarding the "expiration of the rider" must be in the standard format to the extent that there is no discrepancy with the company's "benefits" described in (2). No provision regarding the company's termination of the contract is allowed.

(B) For a dread disease rider to a universal life insurance policy, the condition regarding the "expiration of the rider" must be in the standard format to the extent that there is no discrepancy with the specific conditions of that life insurance policy.

(C) The condition regarding "exceptions" that is beyond the standard format will remain in full force and effect.

(D) Other conditions that are beyond the standard format will remain in full force and effect.

(4) The format, content, and insurance premiums in connection with dread diseases defined in Registrar Order No. 55/2561 re: Standard Definitions of 50 Dread Diseases and Underwriting Criteria for Life Insurance Companies will apply unless there is a definition of a disease that is not included in the order, and that has been approved. In that case, the company can keep the definition, as well as the insurance premiums that have been approved by the registrar and remain in full force and effect.

(5) The following documents are required for an application for approval:

(A) two copies of an insurance premium book, and the certificate of insurance premiums calculation and value of the insurance policy issued by an actuary in accordance with the format prescribed in section 2 at the end of this order; and

(B) three copies of the format and content.

The company must certify that the documents submitted as prescribed in (A) or (B) are in accordance with the provisions in (1), (2), (3) and (4), and the certification must be signed by an actuary.

If the company submits its application for approval in accordance with the provisions in the first paragraph, the application is deemed to be approved by the registrar from the date the Office of Insurance Commission affixed a seal to accept the application. The old

format, content, and insurance premiums of a dread disease rider cannot be issued for the new insured.

Clause 6 To apply for approval of the format and content of a dread disease rider that have never been approved by the registrar, the company must comply with the following instructions, and the use of the format and content by the company is subject to approval from the registrar.

(1) The company must use the format and content of general conditions of the standard dread disease rider prescribed in section 1 at the end of this order, except for the following.

(A) The condition regarding the "expiration of the rider" must be in the standard format to the extent that there is no discrepancy with the company's "benefits."

(B) For a dread disease rider to a universal life insurance policy, the condition regarding the "expiration of the rider" must be in the standard format to the extent that there is no discrepancy with the specific conditions of that life insurance policy.

(C) The condition regarding "exceptions" can be lessened below the standard format.

(D) These are other conditions beyond the standard format.

(2) The format, content, and insurance premiums in connection with dread diseases defined in Registrar Order No. 55/2561 re: Standard Definitions of 50 Dread Diseases and Underwriting Criteria for Life Insurance Companies will apply unless there is a definition of a disease that is not included in the order, and that has been approved. In that case, the company must provide a physician's certificate certifying that the medical definition of the dread disease is medically correct, and an actuary's certificate certifying that the definition of the dread disease is consistent with the determination of insurance premiums.

(3) The following documents are required for an application for approval:

(A) two copies of an insurance premium book, and the certificate of insurance premiums calculation and value of the insurance policy issued by an actuary in accordance with the format prescribed in section 3 at the end of this order;

(B) three copies of the format and content;

(C) in the case of (2), a copy of a physician's certificate certifying that the medical definition of the dread disease is medically correct, in accordance with the format prescribed in section 4 at the end of this order; and

(D) a copy of the receipt of fee payment for the format and content, and a copy of the receipt of fee payment for insurance premiums of the dread disease rider.

The company must certify that the documents submitted as prescribed in (A) and (B) are in accordance with the provision in (A) or (B), and the certification must be signed by an actuary.

Clause 7 On an annual basis, the company must prepare a report on the statistics of insurance provided under dread disease riders that are approved by the registrar under this order, in an Excel file using the format provided in section 5 at the end of this order, and submit it to the registrar by April of the following year on a compact disc (CD).

Issued on 2 November 2018

(Mr. Suthipol Taweechaikarn)

Secretary-general,

The Office of Insurance Commission,

Registrar

## Addendum to the Registrar Order

### re: Format and Content of General Conditions of Ordinary, Standard Dread Disease Riders for Insurance Terms of One Year and More Than One Year, and Rules on Approval, for Life Insurance Companies

Rules on approval of formats, content, and insurance premiums attached to the end of this registrar order comprises.

Section 1 General conditions of ordinary, standard dread disease riders for insurance terms of one year and more than one year.

Section 2 Certificate of insurance premiums calculation and value of the insurance policy issued by an actuary in accordance with clause 5 (5) (A).

Section 3 Certificate of insurance premiums calculation and value of the insurance policy issued by an actuary in accordance with clause 6 (3) (A).

Section 4 A physician's certificate certifying that the medical definition of the dread disease is medically correct.

Section 5 Report on the statistics of insurance provided under the dread disease rider.

## Section 1

### General conditions of ordinary, standard dread disease riders for an insurance term of one year

This rider is an integral part of the insurance policy to which it is attached, and will take effect once payment for this rider has been successfully made. If any term and condition in the insurance policy to which this rider is attached is non-consistent with any term and condition in the rider, the term and condition in the rider will prevail. The coherent terms and conditions in the insurance policy will apply to this rider *mutatis mutandis*.

#### Part 1: Definition

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#### Part 2: Benefits

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Remarks: It must be clearly stated in the conditions on the insurance coverage that, "the insured must be diagnosed or certified by a physician that they have one of the dread diseases eligible for the insurance coverage, while they are alive, subject to the definition of dread diseases."

#### Part 3: Conditions of the rider

##### 1. No argument against, or objection to the invalidity of the rider

The company will by no means argue against, or object to, the invalidity of this rider if it has been effective, while the insured is still alive, for at least two (2) years from the date on which

the rider began to take effect, or if the insured has engaged in this rider with the company and has been alive for at least two (2) years. If the rider term is extended upon its expiration (reinstatement), the period will be calculated based on the date that the rider began to take effect due to the most recent extension, or the date of the company's approval of the raise of the insurance coverage amount under this rider, whichever later. If the company has approved the raise of the insurance coverage amount, it can argue against, or object to, only the invalidity of the raised insurance coverage amount under the rider.

If the company becomes aware of a piece of information that can cause the rider to be terminated under the first paragraph, but fails to exercise its right to the termination within one (1) month after it became aware of the information, the company will not be able to terminate the validity of the rider.

**Remarks: The company can indicate a shorter timeframe.**

## **2. Notice of a claim**

The insured, or their representatives or beneficiaries, must inform the company in writing within ..... days (no fewer than 30 days) after the date the insured was diagnosed or certified by a physician that they have one of the dread diseases eligible for the insurance coverage, or after the date of their death, unless they can prove that there is reasonable necessity preventing them from informing the company. If there is necessity preventing them from informing the company within the specified timeframe, the notice must be provided for the company as soon as possible, and their right to the claim will remain.

## **3. Submission of evidentiary materials to validate the claim**

The insured, or their representatives or beneficiaries, at their own expenses, must provide a physician's diagnosis and examination report necessary for the consideration of the dread disease within ..... days (no fewer than 90 days) after the date of the physician's diagnosis or confirmation that the insured has one of the dread diseases eligible for the insurance coverage, or the date of the death of the insured. Failure to submit evidential materials within the specified



timeframe will not cause the right to a claim to end if there is a reasonable ground suggesting that the insured, or their representatives or beneficiaries, cannot prepare the evidentiary material within the specified timeframe, and that they submit it as soon as possible.

#### **4. Compensation under the rider**

Once the company has received a claim, accompanied with complete and correct evidentiary materials, the company will pay compensation under this rider within fifteen (15) days.

If it is suspicious that a claim for the company's compensation under this rider is not consistent with the insurance coverage agreement, the timeframe specified in the first paragraph may be extended as necessary, but to no more than ninety (90) days after the date of the company's receipt of complete and correct documents.

The company will pay benefits under this rider to the insured. If the insured dies before benefits are paid, they will be paid to the beneficiary under the insurance policy or the insurance endorsement (if any).

#### **5. Medical examination**

Within an appropriate timeframe, as the company considers necessary and compliant with legal or religious principles, it is entitled to examine the diagnosis or certification by the physician, or the autopsy of the body of the insured, as necessary and reasonable for this insurance, at its own expenses.

If the insured or the beneficiary refuses to have their medical history and diagnosis examined by the company to support the compensation payment, the company can reject the insurance coverage for the insured.

#### **6. Waiting period**

A dread disease or disorder which, as the physician certifies and there is concrete evidence, is in connection with a dread disease eligible for the insurance coverage under this rider, that

occurs within ..... days (no more than 90 days) after the date on which this rider began to take effect, will not be eligible for the insurance coverage under this rider. If the rider term is extended upon its expiration (reinstatement), the period will be calculated based on the date on which the rider began to take effect due to the most recent extension, or the date of the company's approval of the raise of the insurance coverage amount under this rider, whichever later. If the company has approved the raise of the insurance coverage amount, only the increased amount will not apply.

**Remarks: The company can indicate a shorter timeframe.**

### **7. Expiration of the rider**

This rider will automatically expire in any of the following events:

1) if the insurance policy to which this rider is attached ends or its term expires;

if the insurance policy to which this rider is attached ends due to surrender, the company will return the insurance premiums, based on which no insurance is provided, to the insured proportionally, unless the insured has received benefits under this rider;

2) if the term of this rider expires;

3) if the insured fails to pay premiums within the extended insurance premium payment period; in this case, this rider will end on the premium payment due date, unless loans are automatically taken from the insurance policy to pay insurance premiums;

4) at the end of the insurance policy's annual period in which the insured turns ..... years old;

5) if the insured changes their insurance policy to a reduced paid-up insurance policy or an extended-term insurance;

6) if benefits under this rider are paid until the full insurance coverage amount is reached, or under the conditions on benefit payment specified in part 2; or

7) if the insured terminates this rider in accordance with 8: Termination of the rider.

The expiration of this rider will not affect any rights to claims that exist before the expiration.

#### **8. Termination**

The insured has the right to terminate this rider by providing written notice for the company, and the company will return the premiums to the insured proportionally based on the remaining period in which no insurance coverage has yet been provided, unless the insured has received benefits under this rider.

#### **9. Guaranteed renewal upon the completion of the annual term of the insurance policy**

The insured may renew this rider upon the completion of each annual term of the insurance policy, according to the date specified in the insurance policy, until the insured turns ..... years old, by paying insurance premiums on or before the premium payment due date, or within the extended premium payment period of the insurance policy to which this rider is attached, in accordance with the company's insurance premium rate for the time being. In this case, the company will provide continuous insurance against dread diseases specified in this rider, and the provision in 6: Waiting period will not apply to the extended year.

If the insured wants to increase the insurance coverage amount, the insurance coverage under the increased amount will take effect once the request has been approved by the company.

#### **10. Renewal of the rider upon the completion of the rider term (reinstatement)**

If this rider ends because the insured fails to pay insurance premiums by the extended premium payment due date of the insurance policy to which this rider is attached, the insured can request reinstatement of the rider by issuing their intent in writing for the company, accompanied with evidence showing a perfect condition of their physical health, at their own

expenses. This rider will be extended upon the company's approval and payment of premiums by the insured in accordance with the company's premium rate applicable for the time being.

### **11. Modification of insurance premiums**

The company will modify its premiums for each annual term of the insurance policy, in accordance with the changing age and/or occupation of the insured, as approved by the registrar. If insurance premiums are modified, the company will inform the insured in writing at least thirty (30) days in advance.

### **12. Exception**

The following dread diseases are not included in this rider:

12.1 dread diseases, excluding permanent total disability, directly or indirectly, all or partially, caused by the following:

1) a disorder which, as the physician certifies and there is concrete evidence, is in connection with a dread disease, and which occurs before the insurance coverage under this rider takes effect; or before the date on which the reinstatement of the rider upon its expiration is approved, or the date of the company's approval of the raise of the insurance coverage amount under this rider, whichever later. If the company has approved the raise of the insurance coverage amount, only the increased amount will not apply;

unless the insured declares it to the company, and the company consents to provide insurance without this exception;

2) suicide or self-harm, or attempt to do so;

3) inhaling, intake, drinking, injection, or otherwise ingestion of a poisonous substance, while conscious or insane;

4) rejection by the insured to receive treatment or advice from, or to follow instructions of a physician;

5) examination or treatment ordered by the insured, who is a physician, to be carried out on themselves; or examination or treatment by the father, mother, spouse, or child, who is a physician, of the insured; or

6) the insured being infected with HIV (HIV positive) or having AIDS, directly or indirectly. Under the objectives of this rider, HIV infection or AIDS refers to the acquired immune deficiency syndrome as a result of infection with the virus, and includes opportunistic microbe infection, infection, or any illness regarding to which a blood test detects the human immunodeficiency virus, or HIV. Opportunistic microbe infection includes, without limitation, infection of an organism that causes pneumocystis carinii pneumonia, an organism that causes chronic enteritis, or disseminated virus and/or fungi; malignant neoplasm, including, without limitation, Kaposi's sarcoma and central nervous system lymphoma; and/or other dread diseases known at present as an effect of the acquired immunodeficiency syndrome, or that cause sudden death, illness, or disability. AIDS also includes the human immunodeficiency virus that causes encephalopathy dementia; and

12.2 permanent total disability caused by the following:

- 1) suicide, attempted suicide, or self-harm;
- 2) an injury incurred during the insured's committing of a crime for which heavy punishment can be inflicted, during an arrest of the insured, or during the insured's escape from an arrest;
- 3) wars, whether declared or not; invasion; unfriendly acts by foreign enemies; civil wars; mutinies; rebellions; riots; or terrorism;
- 4) an injury incurred while the insured is embarking on or disembarking from an aircraft that is neither registered for carrying passengers nor operated by a commercial airline;
- 5) an injury incurred while the insured is riding or driving an aircraft, or on duty as an officer on an aircraft;

6) an injury incurred while the insured is on duty as a soldier, police officer, or volunteer in a war or crackdown;

7) a physical defect, illness, or injury of which the insured is aware at the time of entering into the insurance contract but fails to inform the company;

8) an injury caused by the insured due to or as a consequence of any of the following events:

(1) loss of the ability of self-command under the influence of a drug or an addictive substance;

(2) being under the influence of alcohol with at least 150 milligrams of alcohol in 100 milliliters of blood during the examination; or

(3) loss of the ability of self-command under the influence of alcohol, if there is no measurement or if no measurement can be undertaken; and

9) examination or treatment ordered by the insured, who is a physician, to be carried out on themselves; or examination or treatment by the father, mother, spouse, or child, who is a physician, of the insured.

**Remarks: The company can lessens these exceptions.**

**Remarks: For a dread disease rider to a universal life insurance policy, the term "insurance premiums" may be replaced by "insurance fees."**

## Section 1

### General conditions of ordinary, standard dread disease riders for an insurance term of more than one year

This rider is an integral part of the insurance policy to which it is attached, and will take effect once payment for this rider has been successfully made. If any term and condition in the insurance policy to which this rider is attached is non-consistent with any term and condition in the rider, the term and condition in the rider will prevail. The coherent terms and conditions in the insurance policy will apply to this rider *mutatis mutandis*.

#### Part 1: Definition

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#### Part 2: Benefits

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Remarks: It must be clearly stated in the conditions on the insurance coverage that, "the insured must be diagnosed or certified by a physician that they have one of the dread diseases eligible for the insurance coverage, while they are alive, subject to the definition of dread diseases."

#### Part 3: Conditions of the rider

##### 1. No argument against, or objection to the invalidity of the rider

The company will by no means argue against, or object to, the invalidity of this rider if it has been effective, while the insured is still alive, for at least two (2) years from the date on which

the rider began to take effect. If the rider term is extended upon its expiration (reinstatement), the period will be calculated based on the date that the rider began to take effect due to the most recent extension, or the date of the company's approval of the raise of the insurance coverage amount under this rider, whichever later. If the company has approved the raise of the insurance coverage amount, it can argue against, or object to, only the invalidity of the raised insurance coverage amount under the rider.

If the company becomes aware of a piece of information that can cause the rider to be terminated under the first paragraph, but fails to exercise its right to the termination within one (1) month after it became aware of the information, the company will not be able to terminate the validity of the rider.

**Remarks: The company can indicate a shorter timeframe.**

## **2. Notice of a claim**

The insured, or their representatives or beneficiaries, must inform the company in writing within ..... days (no fewer than 30 days) after the date the insured was diagnosed or certified by a physician that they have one of the dread diseases eligible for the insurance coverage, or after the date of their death, unless they can prove that there is reasonable necessity preventing them from informing the company. If there is necessity preventing them from informing the company within the specified timeframe, the notice must be provided for the company as soon as possible, and their right to the claim will remain.

## **3. Submission of evidentiary materials to validate the claim**

The insured, or their representatives or beneficiaries, at their own expenses, must provide a physician's diagnosis and examination report necessary for the consideration of the dread disease within ..... days (no fewer than 90 days) after the date of the physician's diagnosis or confirmation that the insured has one of the dread diseases eligible for the insurance coverage, or the date of the death of the insured. Failure to submit evidential materials within the specified timeframe will not cause the right to a claim to end if there is a reasonable ground suggesting



that the insured, or their representatives or beneficiaries, cannot prepare the evidentiary material within the specified timeframe, and that they submit it as soon as possible.

#### **4. Compensation under the rider**

Once the company has received a claim, accompanied with complete and correct evidentiary materials, the company will pay compensation under this rider within fifteen (15) days.

If it is suspicious that a claim for the company's compensation under this rider is non-consistent with the insurance coverage agreement, the timeframe specified in the first paragraph may be extended as necessary, but to no more than ninety (90) days after the date of the company's receipt of complete and correct documents.

The company will pay benefits under this rider to the insured. If the insured dies before benefits are paid, they will be paid to the beneficiary under the insurance policy or the insurance endorsement (if any).

#### **5. Medical examination**

Within an appropriate timeframe, as the company considers necessary and compliant with legal or religious principles, it is entitled to examine the diagnosis or certification by the physician, or the autopsy of the body of the insured, as necessary and reasonable for this insurance, at its own expenses.

If the insured or the beneficiary refuses to have their medical history and diagnosis examined by the company to support the compensation payment, the company can reject the insurance coverage for the insured.

#### **6. Waiting period**

A dread disease or disorder which, as the physician certifies and there is concrete evidence, is in connection with a dread disease eligible for the insurance coverage under this rider, that occurs within ..... days (no more than 90 days) after the date on which this rider began to

take effect, will not be eligible for the insurance coverage under this rider. If the rider term is extended upon its expiration (reinstatement), the period will be calculated based on the date on which the rider began to take effect due to the most recent extension, or the date of the company's approval of the raise of the insurance coverage amount under this rider, whichever later. If the company has approved the raise of the insurance coverage amount, only the increased amount will not apply.

**Remarks: The company can indicate a shorter timeframe.**

### 7. Expiration of the rider

This rider will automatically expire in any of the following events:

1) if the insurance policy to which this rider is attached ends or its term expires;

if the insurance policy to which this rider is attached ends due to surrender, the company will pay the surrender amount (if any). Without the surrender value of the rider, the company will return the insurance premiums, based on which no insurance is provided, to the insured proportionally, unless the insured has received benefits under this rider;

2) if the term of this rider expires;

3) if the insured fails to pay premiums within the extended insurance premium payment period; in this case, this rider will end on the premium payment due date, unless loans are automatically taken from the insurance policy to pay insurance premiums;

4) at the end of the insurance policy's annual period in which the insured turns ..... years old;

5) if the insured changes their insurance policy to a reduced paid-up insurance policy or an extended-term insurance;

6) if benefits under this rider are paid until the full insurance coverage amount is reached, or under the conditions on benefit payment specified in part 2; or

7) if the insured terminates this rider in accordance with 8: Termination of the rider.

The expiration of this rider will not affect any rights to claims that exist before the expiration.

## **8. Termination**

The insured has the right to terminate this rider by providing written notice for the company, and the company will pay the surrender amount (if any). Without the surrender value of the rider, the company will return the insurance premiums, based on which no insurance is provided, to the insured proportionally, unless the insured has received benefits under this rider.

The company is entitled to deduct any unpaid amount from the surrender amount or returned premiums.

## **9. Renewal of the rider upon the completion of the rider term (reinstatement)**

If this rider ends because the insured fails to pay insurance premiums by the extended premium payment due date of the insurance policy to which this rider is attached, the insured can request reinstatement of the rider by issuing their intent in writing for the company, accompanied with evidence showing a perfect condition of their physical health, at their own expenses. This rider will be extended upon the company's approval and payment of premiums by the insured in accordance with the company's premium rate applicable for the time being.

## **10. Exception**

The following dread diseases are not included in this rider:

10.1 dread diseases, excluding permanent total disability, directly or indirectly, all or partially, caused by the following:

1) a disorder which, as the physician certifies and there is concrete evidence, is in connection with a dread disease, and which occurs before the insurance coverage under this rider takes effect; or before the date on which the reinstatement of the rider upon its expiration

is approved, or the date of the company's approval of the raise of the insurance coverage amount under this rider, whichever later. If the company has approved the raise of the insurance coverage amount, only the increased amount will not apply;

unless the insured declares it to the company, and the company consents to provide insurance without this exception;

2) suicide or self-harm, or attempt to do so;

3) inhaling, intake, drinking, injection, or otherwise ingestion of a poisonous substance, while conscious or insane;

4) rejection by the insured to receive treatment or advice from, or to follow instructions of a physician;

5) examination or treatment ordered by the insured, who is a physician, to be carried out on themselves; or examination or treatment by the father, mother, spouse, or child, who is a physician, of the insured; or

6) the insured being infected with HIV (HIV positive) or having AIDS, directly or indirectly. Under the objectives of this rider, HIV infection or AIDS refers to the acquired immune deficiency syndrome as a result of infection with the virus, and includes opportunistic microbe infection, infection, or any illness regarding to which a blood test detects the human immunodeficiency virus, or HIV. Opportunistic microbe infection includes, without limitation, infection of an organism that causes pneumocystis carinii pneumonia, an organism that causes chronic enteritis, or disseminated virus and/or fungi; malignant neoplasm, including, without limitation, Kaposi's sarcoma and central nervous system lymphoma; and/or other dread diseases known at present as an effect of the acquired immunodeficiency syndrome, or that cause sudden death, illness, or disability. AIDS also includes the human immunodeficiency virus that causes encephalopathy dementia; and

10.2 permanent total disability caused by the following:

1) suicide, attempted suicide, or self-harm;

2) an injury incurred during the insured's committing of a crime for which heavy punishment can be inflicted, during an arrest of the insured, or during the insured's escape from an arrest;

3) wars, whether declared or not; invasion; unfriendly acts by foreign enemies; civil wars; mutinies; rebellions; riots; or terrorism;

4) an injury incurred while the insured is embarking on or disembarking from an aircraft that is neither registered for carrying passengers nor operated by a commercial airline;

5) an injury incurred while the insured is riding or driving an aircraft, or on duty as an officer on an aircraft;

6) an injury incurred while the insured is on duty as a soldier, police officer, or volunteer in a war or crackdown;

7) a physical defect, illness, or injury of which the insured is aware at the time of entering into the insurance contract but fails to inform the company;

8) an injury caused by the insured due to or as a consequence of any of the following events:

(1) loss of the ability of self-command under the influence of a drug or an addictive substance;

(2) being under the influence of alcohol with at least 150 milligrams of alcohol in 100 milliliters of blood during the examination; or

(3) loss of the ability of self-command under the influence of alcohol, if there is no measurement or if no measurement can be undertaken; and

9) examination or treatment ordered by the insured, who is a physician, to be carried out on themselves; or examination or treatment by the father, mother, spouse, or child, who is a physician, of the insured.

Remarks: The company can lessens these exceptions.

Remarks: For a dread disease rider to a universal life insurance policy, the term "insurance premiums" may be replaced by "insurance fees."

Section 2

**Certificate of insurance premiums calculation and value of the insurance policy issued by  
an actuary**

I, ....., an actuary for ..... who has the authority under license no. ...., which is valid from ..... to ....., to certify the report on the evaluation of liability under the insurance policy, in accordance with section 83/2 and section 83/6 of the Life Insurance Act, B.E. 2535 (1992), amended by the Life Insurance Act (No. 2), B.E. 2551 (2008), hereby certify that the insurance premiums, format, ..... pages of content, ..... pages of the value of the insurance policy, and ..... compact discs (CD) of the ..... Insurance Policy comply with clause 5 of Registrar Order No. .... /2561 and are correctly calculated in accordance with the calculation formula specified in this insurance premium book; and that the calculation formula is correctly determined in accordance with actuarial principles and consistent with the benefit payment terms and conditions under the insurance program.

Signature .....

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Section 3

**Certificate of insurance premiums calculation and value of the insurance policy issued by  
an actuary**

I, ....., an actuary for ..... who has the authority under license no. ...., which is valid from ..... to ....., to certify the report on the evaluation of liability under the insurance policy, in accordance with section 83/2 and section 83/6 of the Life Insurance Act, B.E. 2535 (1992), amended by the Life Insurance Act (No. 2), B.E. 2551 (2008), hereby certify that the insurance premiums, format, ..... pages of content, ..... pages of the value of the insurance policy, and ..... compact discs (CD) of the ..... Insurance Policy comply with clause 6 of Registrar Order No. .... /2561 and are correctly calculated in accordance with the calculation formula specified in this insurance premium book; and that the calculation formula is correctly determined in accordance with actuarial principles and consistent with the benefit payment terms and conditions under the insurance program.

Signature .....

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Section 4

Physician's certificate certifying that the medical definition of the dread disease is  
medically correct

As ..... Company has submitted a request for approval of .....  
....., I, ....., holder of Medical Practitioner's License No.  
..... (for a medical advisor, please indicate that this is a medical advisor of .....  
..... Company), hereby certify that the medical definition of the dread disease below  
is medically correct.

Name of the dread disease                      means .....

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Name of medical practitioner

(                      Title                      )

## Section 5

Report on the statistics of insurance provided under the dread disease rider

Company .....

Records at the end of year .....

Rider .....

Table 1: Insurance statistics

| Name of insurance program | Number of policies | Insurance coverage amount (THB) | Insurance premiums (THB) | Actual compensation      |              | Number of complains |
|---------------------------|--------------------|---------------------------------|--------------------------|--------------------------|--------------|---------------------|
|                           |                    |                                 |                          | Number of cases (person) | Amount (THB) |                     |
|                           |                    |                                 |                          |                          |              |                     |
|                           |                    |                                 |                          |                          |              |                     |
|                           |                    |                                 |                          |                          |              |                     |
|                           |                    |                                 |                          |                          |              |                     |
|                           |                    |                                 |                          |                          |              |                     |
|                           |                    |                                 |                          |                          |              |                     |

Table 2: Complaints

| No. | Policy no. | Subject | Management | Management result | Improvement of products to solve problems | Remarks |
|-----|------------|---------|------------|-------------------|---|---------|
|     |            |         |            |                   |   |         |
|     |            |         |            |                   |   |         |
|     |            |         |            |                   |   |         |
|     |            |         |            |                   |   |         |
|     |            |         |            |                   |   |         |

Remarks: The report must be prepared on an annual basis in an Excel file and submitted to the registrar by April of the following year on a compact disc (CD).