

SUPPLEMENTARY CONTRACT
MAJOR DISEASES BENEFIT
ATTACHING TO AND FORMING
PART OF POLICY

MDG No.

Policy No.

THE MAJOR DISEASES referred to as MDG in the Policy Schedule or in any Endorsement by the Corporation here on is based on the Proposal and Declaration mentioned in the schedule or on such Endorsement as the case may be.

The corporation hereby agrees that Provided the premium(s) in respect of such benefit as stated in the Product certificate or such Endorsement shall have been duly and Punctually paid and subject to the terms and conditions following and(so far as may be applicable) to the terms of the Product certificate,the provisions of the policy and every Endorsement (if any) by the Corporation here on then if the major diseases of the insured occurs, the Jiban Bima Corporation will pay the agreed sum assured of the said policy.

TERMS AND CONDITIONS

THE TERM & CONDITION OF MAJOR DISEASES BENEFIT ARE

- (a) Under the Major Diseases Product, the policyholder is eligible to make a claim once during the policy term for any of the seven listed critical illnesses: Heart Attack, Stroke, Cancer, Kidney Failure, Multiple Sclerosis, Paralysis, and Coronary Artery Surgery.
- (b) Once a claim has been paid for any of the listed major diseases, the policyholder will no longer be eligible for coverage under the Major Diseases benefit, and this benefit will be discontinued. No additional premium will be required for the Major Diseases coverage. However, the policyholder's main policy will remain in force, provided the regular premium is paid
- (c) The major diseases benefit is not available to those with a pre-existing condition.
- (d) There is a waiting period of 90 days for claim, unless the claim incident is caused by accident.
- (e) The surrender value/ paid-up value /maturity claim will not be payable for the premiums paid under this benefit.
- (f) When the policy term ends, the supplementary benefit will cease automatically. If the base plan is terminated, discontinued, or made paid-up, the major diseases benefit will automatically cease.
- (g) If the policyholder fails to furnish satisfactory proof from the designated specialist doctor, the policyholder will be required to resume premium payments.
- (h) 50% of the basic sum assured, but the maximum coverage may not exceed 5,00,000 Taka.