

EXCLUSIONS AND LIMITATIONS

No benefit payment shall be made for any loss resulting from or is caused directly or indirectly in whole or in part by any of the following occurrences:

1. poison, gas or fumes (voluntarily or involuntarily taken), atomic explosions, nuclear fission, or radioactive gas;
2. self-destruction or any similar attempt while sane or insane;
3. any injury suffered or as a result of any of the following:
 - a. while under the influence of alcohol or drug
 - b. while being a passenger of a driver under the influence of alcohol or drug, except for paying passengers of a public transport vehicle operating in its registered route
 - c. any violation of the law or resistance to arrest by the Insured
 - d. murder or assault provoked by the Insured
 - e. strike, riot, civil commotion, insurrection or war, declared or undeclared, revolution or any war-like operations, or while under orders for war-like operations or restoration of public order or any act incident thereto
 - f. any acts of terrorism or sabotage
 - g. where there is no visible external wound, except drowning or internal injury revealed by autopsy; and
 - h. participation in any brawl
4. pregnancy, childbirth, miscarriage or abortion or any complications of pregnancy or childbirth;
5. entering, operating, or servicing, ascending from or with any aerial or marine device or conveyance except while travelling as a passenger in an aircraft or marine transportation operated by a commercial passenger airline or shipping line on a scheduled air or sea service over an established passenger route;
6. medical, surgical or dental treatment of any kind, or the administration, injection, or taking accidentally or otherwise, of any drug, sedative or other medication except when such treatment or medication is required as a result of an accident;
7. any loss in which the proximate cause was the Insured's attempt at, or commission of or willful participation in any act or crime punishable under the Revised Penal Code of the Philippines or any other statute except crimes of reckless imprudence as defined in Article 365, or similar laws, of any country in which the crime was attempted or committed, or resistance to lawful arrest;
8. congenital anomalies or conditions arising therefrom.
9. engaging in the following activities: aqualung diving, boxing or other combat sport, climbing, football, hang-gliding, hunting, ice hockey, motor competitions, parachuting, hurling, polo, pot-holding, power boating, racing, show jumping, skydiving, use of woodworking machinery, water-

ski-jumping and tricks, winter sports, wrestling, yachting beyond 5 kilometers of a coastline; Other activities not specified above but which present hazards of similar nature to any of the above activities shall likewise be excluded; and

10. engaging in any duty directly or indirectly pertaining to the following occupations: acrobats, stuntmen, army personnel (members of the Armed Forces), asylum attendants, automobile racing driver, secret service personnel, aviators, boiler men, customs personnel, detectives, divers, explosive makers, handlers and custodians, ship's crew, sailors, deckhands and seamen, steeple jacks, underground workers, miners, window cleaners, woodworking and metalworking machinist, loggers, policemen, security guards, professional athletes, professional entertainers and musicians, sawmill workers, cablemen and linemen, structural steel workers; Other occupations not specified above but which present hazards of similar nature to the above occupations shall likewise be excluded.
11. The insurance will not apply to Overseas Filipino Workers (OFW) and Barangay Tanods or other politically exposed persons.


SUICIDE CLAUSE (Cocolife Protect Plus - Burial Benefit)

In case of suicide by the Insured within two (2) years from the Original Effective Date of this Rider or from the date of its last reinstatement, whichever is later, the then pertinent provision of the Insurance Code as amended shall apply. Where the suicide is not compensable, the liability of the Company shall be limited to the refund of premiums paid for this Rider from the time the coverage took effect or the date of the last reinstatement, whichever is later. Suicide committed by the Insured in state of insanity shall be compensable regardless of the date of commission.

IMPORTANT NOTICE

The Insurance Commission, with offices in Manila, Cebu and Davao, is the government office in charge of the enforcement of all laws relative to insurance and has supervision over insurance companies. It is ready at all times to assist the general public in matters related to insurance. For any inquiries or complaints please contact the Public Assistance and Mediation Division (PAMD) of the Insurance Commission at 1071 United Nations Avenue, Manila with telephone numbers +632-852384 61 to 70 and with email address publicassistance@insurance.gov.ph. The official website of the Insurance Commission is www.insurance.gov.ph.

Insurance coverage will be effective only upon approval by the Company. If your application is approved, your policy contract will be sent to your declared email address or mailing address, following your chosen mode of delivery. If you do not receive any advice from the Company regarding your application within 30 days, please contact our Hotline Number.



Cocolife shares your dream to be secure, comfortable, content, and happy.

You can choose from Cocolife's array of products that includes life insurance and income protection, long-term investments, healthcare, education, pension, and retirement plans—all of which are meant to ensure that your future and those of your loved ones are taken care of.

We assure you that Cocolife will provide you with only the highest quality of service, as we have done for over 40 years. It is a commitment that made us the first ISO-certified life insurance company in the Philippines.

As one of the recognized industry leaders, Cocolife is keeping its promise to actively help create better lives for you.

Atty. Martin A. Loon
President and CEO



HOTLINE: 8810-7888

THE FINANCIAL PRODUCTS OF UNITED COCONUT PLANTERS LIFE ASSURANCE CORP. (COCOLIFE) ARE NOT INSURED BY THE PHILIPPINE DEPOSIT INSURANCE CORPORATION AND ARE NOT GUARANTEED BY THE LANDBANK OF THE PHILIPPINES.



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BELIEVING IN THE FILIPINO

**Accidents can happen anytime.
Even a fall or a slip can be costly.
Make sure you are protected against
these unforeseen events.**



Accidents exempt no one, they may happen at the most unexpected time, in the most unexpected places. They might even cause a huge financial burden to your loved ones. We may not always avoid such misfortune, but through a suitable protection coverage, we can always be financially prepared in case it happens.

Cocolife Protect and Protect Plus are designed as affordable and comprehensive protection plans that provide financial security in the event of an accident resulting in injury, disability or death.



ACCIDENTAL DEATH BENEFIT

Provides cash amount equivalent to 100% of the face amount in case of the insured's untimely death due to an accident.



ACCIDENTAL DISABLEMENT OR LOSS OF USE

Provides a percentage of the face amount in case the insured suffers from a disablement or loss of use of specific body part/s due to an accident.



BURIAL BENEFIT DUE TO ACCIDENTAL DEATH

Provides burial benefit to the beneficiary/ies in case of the insured's death due to an accident. This benefit is available only under Cocolife Protect package.

BURIAL BENEFIT DUE TO ANY CAUSE

Provides burial benefit to the beneficiary/ies in case of the insured's death due to any cause subject to the Suicide Clause of the policy. This benefit is available only under Cocolife Protect Plus package.



ACCIDENTAL MEDICAL EXPENSE REIMBURSEMENT

An optional rider which allows the insured to reimburse medical expenses incurred from an accident, up to a maximum amount specified in the policy.



	Face Amount				Face Amount			
Accidental Benefit	₱1,000,000.00				₱500,000.00			
Accidental Death Burial Benefit	₱25,000.00				₱20,000.00			
TABLE OF PREMIUMS								
*Coverage Term	Attained Age / Age Upon Renewal				Attained Age / Age Upon Renewal			
	5 to 17	18 to 45	46 to 55	56 to 64**	5 to 17	18 to 45	46 to 55	56 to 64**
1 Year	₱ 5,150	₱ 3,800	₱ 4,450	₱ 5,400	₱ 2,600	₱ 1,900	₱ 2,250	₱ 2,700
2 Years	₱ 9,600	₱ 6,450	₱ 7,750	₱ 9,800	₱ 4,850	₱ 3,250	₱ 3,900	₱ 4,950
3 Years	₱14,250	₱ 9,000	₱11,100	₱14,350	₱ 7,200	₱ 4,550	₱ 5,600	₱ 7,250



	Face Amount				Face Amount			
Accidental Benefit	₱1,000,000.00				₱500,000.00			
Burial Benefit	₱25,000.00				₱20,000.00			
TABLE OF PREMIUMS								
*Coverage Term	Attained Age / Age Upon Renewal				Attained Age / Age Upon Renewal			
	5 to 17	18 to 45	46 to 55	56 to 64**	5 to 17	18 to 45	46 to 55	56 to 64**
1 Year	₱ 5,150	₱ 3,900	₱ 5,150	₱ 6,750	₱ 2,600	₱ 2,000	₱ 2,800	₱ 3,800
2 Years	₱ 9,600	₱ 6,600	₱ 9,250	₱12,600	₱ 4,850	₱ 3,400	₱ 5,100	₱ 7,200
3 Years	₱14,250	₱ 9,250	₱13,400	₱18,700	₱ 7,200	₱ 4,750	₱ 7,450	₱10,700

* The policy may be renewed for the above Sum Assured upon payment of the applicable premium based on the Insured's attained age upon renewal. The benefits and/or premiums above may change subject to the approval of the Insurance Commission.

** Maximum Issue Ages are 63 for 2-Year Term and 62 for 3-Year Term

Part 1 Accidental Death Benefit

The company will pay 100% of the Accidental Benefit if the Insured dies due to accidental bodily injury within 180 days from the date of accident.

Part 2 Accidental Disablement or Loss of Use

The company will pay the percentage of the Accidental Benefit according to the Schedule of Losses if the Insured, as a result of accidental bodily injury, incurs any of the losses in the Schedule of Losses within 180 days from the date of accident.

Description	% of Amount of Insurance	Description	% of Amount of Insurance
Loss of two limbs	100%	Loss of middle finger	6%
Loss of both hands, or all fingers and both thumbs	100%	Loss of ring finger	5%
Loss of both feet	100%	Loss of little finger	4%
Total loss of sight of both eyes	100%	Loss of metacarpals-1st and 2nd (add'l)	3%
Injuries resulting in being permanently bedridden	100%	3rd, 4th and 5th (add'l)	2%
Any other injury causing Permanent and Total Disablement	100%	Loss of leg at or above knee	60%
Loss of arm at or above elbow	70%	Loss of leg below knee	50%
Loss of arm between elbow and wrist	60%	Loss of one foot	50%
Loss of hand	50%	Loss of toes – all of one foot	25%
Loss of four fingers and thumb of one hand	50%	Loss of big toe	5%
Loss of four fingers	35%	Loss of any toe other than big toe (each)	1%
Loss of thumb	15%	Loss of sight of one eye	50%
Loss of index finger	10%	Loss of hearing – both ears	50%
		Loss of hearing – one ear	25%

- "Permanent and Total Disablement", means the Insured is unable to perform without the continuous assistance of another person at least three (3) of the **Activities of Daily Living: bathing/washing, dressing, using the lavatory, eating, moving to another room, transferring from a chair, for a continuous period of at least six (6) months and leading to a permanent inability to perform the same.**
- The loss of the first joint of the thumb or any other finger or any toe shall be considered as equal to the loss of one half of the thumb or finger or toe and the benefit shall be one half of the benefit above specified for the loss of the thumb or finger or toe.
- The loss of more than one phalange of the thumb or of any other finger or of any toe shall be treated as loss of the entire thumb or finger or toe.
- Where, however, there is loss of two or more parts of the hand, the percentage payable shall not be more than the loss of the whole hand.

Part 3 Burial Benefit

For Cocolife PROTECT, the Beneficiary(ies) will receive the Burial Benefit in the event of the Insured's death as a result of an accidental bodily injury of the Insured within 180 days from the date of the accident.

For Cocolife PROTECT PLUS, the Beneficiary(ies) will receive the Burial Benefit in the event of the Insured's death, provided that the Insured is in good health upon inception of insurance coverage.

- The total Accidental Benefits payable under this policy in respect of any one accident resulting in loss(es) within 180 days from the date of the accident shall not exceed the Face Amount.
- In any policy year, the aggregate Accidental Disablement or Loss of Use benefits in respect of one or more accident(s) resulting in loss(es) within 180 days from the date of accident(s) shall not exceed the Accidental Benefit, i.e., for any subsequent accident resulting in any loss(es) which would make the aggregate disablement benefits exceed the Accidental Benefit, the amount(s) payable under the policy shall be the Accidental Benefit less any amount(s) paid for previous loss(es).
- The amount of Accidental Death Benefit payable under Part 1 arising from an independent/unrelated accident shall always be 100% of the Accidental Benefit.
- Any benefit already paid for any loss(es) shall not be carried over to the subsequent policy year, i.e., the amount of benefits to be paid in the succeeding policy year shall not be reduced by any amount paid in the preceding policy year.
- Payment of the Burial Benefit will be made in the event of the Insured's death provided that the Insured is in Good Health and is actively doing the normal activities of life at the inception of the insurance coverage, and subject to the Suicide Clause and Incontestability Clause of the Policy.

OPTIONAL RIDER



Accidental Medical Expense Reimbursement Benefit Rider (AMER)

When by reason of an accidental bodily injury, and commencing within thirty (30) days after the date of the accident, the Insured requires treatment by a physician, use hospital facilities, or the employment of a licensed or graduate nurse while at the hospital, this rider will pay the customary and necessary medical expenses incurred within fifty-two (52) weeks from the date of the accident, but not to exceed the amount of insurance for Accidental Medical Expense Reimbursement Benefit.

Payment of accidental medical reimbursement benefits shall be in addition to any amount paid or payable from other benefits.

AMER Face Amount Options: 10,000 / 15,000 / 20,000 / 25,000
Coverage Term Options: 1-Year Term / 2-Year Term / 3-Year Term

ACCIDENTAL MEDICAL EXPENSE REIMBURSEMENT BENEFIT RIDER PREMIUMS

TERM	1-YEAR TERM	1-YEAR TERM	1-YEAR TERM	1-YEAR TERM
Face Amount	10,000.00	15,000.00	20,000.00	25,000.00
Age Group	PRICE PER BENEFIT LIMIT			
5-17	2,500.00	3,000.00	3,300.00	3,700.00
18-45	2,500.00	3,000.00	3,300.00	3,700.00
46-55	2,500.00	3,000.00	3,300.00	3,700.00
56-65	2,500.00	3,000.00	3,300.00	3,700.00

TERM	2-YEAR TERM	2-YEAR TERM	2-YEAR TERM	2-YEAR TERM
Face Amount	10,000.00	15,000.00	20,000.00	25,000.00
Age Group	PRICE PER BENEFIT LIMIT			
5-17	5,000.00	5,900.00	6,550.00	7,350.00
18-45	5,000.00	5,900.00	6,550.00	7,350.00
46-55	5,000.00	5,900.00	6,550.00	7,350.00
56-65	5,000.00	5,900.00	6,550.00	7,350.00

TERM	3-YEAR TERM	3-YEAR TERM	3-YEAR TERM	3-YEAR TERM
Face Amount	10,000.00	15,000.00	20,000.00	25,000.00
Age Group	PRICE PER BENEFIT LIMIT			
5-17	7,400.00	8,800.00	9,700.00	10,900.00
18-45	7,400.00	8,800.00	9,700.00	10,900.00
46-55	7,400.00	8,800.00	9,700.00	10,900.00
56-65	7,400.00	8,800.00	9,700.00	10,900.00