

# MoveIT RIDE Cover Group Policy



Group Policy Number: NAC MOVITNPA01

# MoveIT Ride Cover Group Policy

## Policy Wording

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## PLEASE READ THIS POLICY

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Please review this Group Policy and return immediately to Insurance Company of North America (a Chubb Company), hereinafter called the “Company”, if any errors are found.

## SECTION I- INSURING AGREEMENT

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In consideration of the statements in the policy application or other acceptable means of enrolment, which shall be the basis of this contract and whose original copy or proof is filed with the Company, and made a part of this Group Policy, upon the payment of premium and subject to all the exclusions, provisions and other terms of this Group Policy, the Company hereby insures the persons named, hereinafter called the “Insured”, against loss indicated as covered in the Policy Schedule occurring during the term of this Group Policy.

## SECTION 2- ELIGIBILITY

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To be eligible for cover, the Insured must:

- (a) be a MoveIT Passenger as defined under this Group Policy; and
- (b) have availed and paid for the Policyholder’s Ride Cover Program which consists of a voucher for pick-up delay.

## SECTION 3- DEFINITIONS

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The following terms when used with capital letters in this Group Policy shall have the meaning set forth below:

- 1. **Accident or Accidental** means a sudden, external and identifiable event that happens by chance and could not have been expected from the perspective of the Insured. The word Accidental shall be construed accordingly.
- 2. **Accidental Death** means death occurring within one hundred and eighty (180) days from the date of the Accident as a result of a Bodily Injury.
- 3. **Acts of Terrorism** means any act, including but not limited to the use of force or violence or threat thereof, of any person, people or group of people, whether acting alone or on behalf of or in connection with any organization or government which from its nature or context is done for, or in connection with, political, religious, ideological or similar purposes or reasons, including the intention to influence any government or to put the public, or any section of the public, in fear.
- 4. **Benefit Amount** means the benefit amount payable by the Company as stated in the Policy Schedule.
- 5. **Bodily Injury or Injury** means a bodily injury resulting solely and directly from an Accident and which occurs independently of any illness or any other cause, where the bodily injury and Accident both occur during the Period of Insurance and while the person is an Insured. Bodily Injury includes illness or disease resulting directly from medical or surgical treatment rendered necessary by any Bodily Injury as defined herein.
- 6. **Company** means Insurance Company of North America (a Chubb Company).
- 7. **Confirmation of Cover** means the PDF document issued by the Company via email to the Insured using the MoveIT Platform regarding the Insured’s insurance coverage under this Group Policy. Any Confirmation of Cover in effect when the Group Policy is cancelled, non-renewed or otherwise terminated shall continue to be in effect for the period of coverage specified in the Confirmation of Cover.

- 8. Event(s)** means the Event(s) described in the relevant Table of Events set out in this Group Policy.
- 9. Effective Date** means the date on which this Group Policy commences as stated in the Policy Schedule.
- 10. Expiry Date** means the date on which insurance under this Group Policy expires or ends as stated in the Policy Schedule.
- 11. Family Member/Relative** means a spouse, parent, parent-in-law, step-parent, child, brother, sister, brother-in-law, sister-in-law, daughter-in-law, son-in-law, half-brother, half-sister, niece, nephew, uncle, aunt, stepchild, grandparent or grandchild.
- 12. Fingers, Thumbs or Toes** means the digits of a Hand or Foot.
- 13. Foot** means the entire foot below the ankle.
- 14. Group Policy** means this policy wording, the policy application, the Confirmation of Cover and the Policy Schedule describing the insurance contract between the Policyholder and the Company. It shall also include, after this Group Policy has taken effect, any amendment, rider, clause, warranty, endorsement or any other document attached to this Group Policy and which has been endorsed by an executive officer of the Company and countersigned by the Policyholder.
- 15. Hand** means the entire hand below the wrist.
- 16. Hospital** means a legally constituted establishment operated pursuant to the laws of the Philippines, which holds a license as a hospital and meets the following requirements:
- a) operates primarily for the reception, care and treatment of sick, ailing or injured persons as in-patients;
  - b) provides a twenty-four (24) hour a day nursing service by and under the supervision of a staff of graduate nurses;
  - c) has a staff of one (1) or more Physician(s) available at all times;
  - d) maintains organized facilities for the medical diagnosis and treatment, and provides (where appropriate) facilities for major surgery within the confines of the establishment or in facilities controlled by the establishment; and
  - e) is not primarily a clinic, nursing, rest or convalescent home, psychiatric institution, community hospital, rehabilitation institution, a place for alcoholics or drug addicts or similar establishments.
- 17. Insured** means the person or persons mentioned in the definition of MoveIT Passenger.
- 18. Limb** includes a hand at or above the wrist or foot at or above the ankle.
- 19. Loss** means in connection with:
- a) a Limb, Permanent physical severance or Permanent total loss of the use of the Limb having lasted twelve (12) consecutive months and at the expiry of that period is beyond hope of improvement;
  - b) an eye, total and Permanent loss of all sight in the eye;
  - c) hearing, total and Permanent loss of hearing;
  - d) speech, total and Permanent loss of the ability to speak;
  - e) Hand, Foot, Fingers or Toes, loss of use of or Permanent severance through or above a metacarpophalangeal metatarsophalangeal joint;
- and which in each case is caused by Bodily Injury.
- 20. Medically Necessary Expenses** means expenses sustained by Injury or incurred by the Insured from a legally qualified medical practitioner, physician, surgeon, nurse, hospital and/or ambulance service for medical, surgical, x-ray, hospital or nursing treatment including the cost of medical supplies and ambulance hire.

- 21. MoveIT Driver** means a person who has signed up and logged in to the MoveIT Platform that allows a MoveIT Driver to accept bookings from a MoveIT Passenger.
- 22. MoveIT Passenger** means either of the following:
- (a) a person who is a passenger of a MoveIT Driver on a trip booked by him/her through the MoveIT Platform and who has availed and paid for the Policyholder's Ride Cover Program; or
  - (b) a Family Member or **Companion** of the person mentioned in 22(a) above and such Family Member also being a passenger of a MoveIT trip booked by the person mentioned 2(a) through the MoveIT Platform.
- Companion** means a person accompanying the person mentioned in 22(a).
- 23. MoveIT Platform** means the online technology platforms (such as, but not limited to, MoveIT Passenger mobile application, MoveIT Driver mobile application, Move IT website) operated by or on behalf of the Policyholder.
- 24. Period of Insurance** means from the moment the MoveIT Passenger enters the vehicle to begin the trip booked via the MoveIT Passenger mobile application until the moment the MoveIT Passenger exits the vehicle at the end of the trip as stated in the Confirmation of Cover.
- 25. Permanent** means a condition that will last twelve (12) consecutive months from the date of the Bodily Injury and at the expiry of that period, being beyond hope of improvement.
- 26. Permanent Total Disability** means where in the opinion of a Physician, the Insured is entirely and continuously unable to engage in, perform or attend to any occupation or business of any and every kind for the remainder of his/her life and said disability is Permanent.
- 27. Physician** means a doctor or specialist who is registered or licensed to practice medicine under the laws of the Philippines. A Physician cannot be:
- a) the Policyholder;
  - b) the Insured;
  - c) a Family Member or relative of the Insured unless otherwise approved by the Company.
- 28. Policyholder** means WE-LOAD TRANSCARGO CORPORATION, the named company listed as the Policyholder in the Policy Schedule.
- 29. Policy Schedule** means the relevant policy schedule attached to this Group Policy issued by the Company to the Policyholder.
- 30. Ride Cover Program** means the voucher for pick-up delay made available by MoveIT while a MoveIT Passenger is taking a Ride Cover trip and which is distributed via the MoveITGrab Platform.

## SECTION 4- BENEFITS

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### 4.1 – Accidental Death Benefit

- (a) If, during a Ride Cover trip that is booked through the MoveIT Platform, an Insured suffers Accidental Death, the Company will pay the person or persons indicated under the clause "To Whom the Benefit is Payable" the Accidental Death Benefit specified in the Policy Schedule/Confirmation of Cover.
- (b) If the Insured has claimed successfully under Section 4.2 - Accidental Permanent Total Disability Benefit for the

same Accident and the Insured dies as a result thereof, the Company will pay the person or persons indicated under the clause “To Whom the Benefit is Payable” the difference between the amount the Insured had received under the Accidental Permanent Total Disability Benefit and the amount of the Accidental Death Benefit specified in the Policy Schedule/Confirmation of Cover.

#### 4.2 – Accidental Permanent Total Disability Benefit

- (a) If, during a Ride Cover trip that is booked through the MoveIT Platform, an Insured suffers a Loss or Permanent Total Disability within one hundred eighty (180) days, as certified by a Physician, the Company will pay the Insured the Accidental Permanent Total Disability Benefit as specified in the Policy Schedule/Confirmation of Cover.
- (b) The Company will pay the Insured the Accidental Permanent Total Disability Benefit according to the percentage limit described in the Table of Events below up to the maximum benefit limit specified in the Policy Schedule/Confirmation of Cover.

<b>Table of Events</b>	
<b>The following Event(s) must occur within one hundred eighty (180) days from the date of Bodily Injury:</b>	<b>Being a percentage of the Benefit Amount shown in the Policy Schedule</b>
1. Accidental Death	100%
2. Permanent Total Disability	100%
3. Permanent paralysis of all Limbs	100%
4. Loss of both Hands or both Feet	100%
5. Loss of one (1) Hand or one (1) Foot	100%
6. Loss of one (1) Limb and sight of one (1) eye	100%
7. Loss of sight of both eyes	100%
8. Permanent Loss of speech and hearing	100%
9. Loss of sight of one (1) eye	100%
10. Permanent and incurable insanity	100%
11. Permanent Loss of the lens of one (1) eye	75%
12. Permanent Loss of speech	75%
13. Loss of hearing in:	
(a) both ears	100%
(b) one (1) ear	30%
14. Permanent Loss of the use of four (4) Fingers and Thumb of either Hand	85%
15. Permanent Loss of the use of four (4) Fingers of either Hand	55%
16. Permanent Loss of the use of one (1) Thumb of either Hand:	40%
17. Permanent Loss of the use of Fingers of either Hand:	20%
18. Permanent Loss of the use of Toes of either Foot:	
(a) all – one (1) Foot	25%

	(b) great Toe	10%
	(c) other than great – each Toe	2%
19.	Fractured leg or patella with established non- union	20%
20.	Shortening of leg by at least five (5) cm	10%
21.	Permanent disabilities not specified in items 2 to 20 above.	<p>Such percentage of the Benefit Amount, which corresponds to the percentage reduction in whole bodily function as certified by no less than two (2) Physicians, one (1) of whom will be the Insured's treating Physician and the other will be appointed by Us.</p> <p>In the event of disagreement, the amount payable will be the average of two (2) opinions.</p>

#### 4.3 – Accidental Medical Expenses Reimbursement Benefit

- (a) If, during a Ride Cover trip that is booked through the MoveIT Platform, the Insured incurs Medically Necessary Expenses as a result of an Accident, the Company will reimburse the Insured, upon production of original invoice(s) and/or receipt(s), for costs incurred up to the limit specified in the Policy Schedule.
- (b) In the event that the Insured becomes entitled to a reimbursement or indemnity of all or part of such expenses from any other source(s), the Company will only pay the amount that is not recoverable from such other source(s).

#### Benefit Limitations Applicable to Benefit 4.1 and Benefit 4.2

Once the Company has paid under Benefit 4.1 - Accidental Death Benefit or one hundred (100) percent of benefit under Benefit 4.2 - Accidental Permanent Disability Benefit to an Insured, no further benefits shall be payable under this Group Policy to the Insured.

### SECTION 5- GENERAL EXCLUSIONS APPLICABLE TO THE POLICY

This Group Policy does not cover, and the Company will not pay or indemnify any amount, directly or indirectly, caused by, as a consequence of, in connection with or is contributed to by any of the following:

1. War, invasion, act of foreign enemy, hostilities, civil war, mutiny, riot, strike and civil commotion, rebellion, revolution, insurrection or military or usurped power;
2. Acts of Terrorism;
3. Suicide, or any attempt thereat, suicide pacts or agreements, while sane or insane, or any self-inflicted injury;
4. Illegal acts of the Insured or the Insured's executors, administrators, legal heirs or personal representatives;
5. The Insured having taken a drug, unless it is proved that the drug was medically prescribed and was taken in accordance with the proper medical prescription; or

6. Provoked or unprovoked murder & assault.

#### **Sanctions Exclusions Applicable to this Group Policy**

This Group Policy does not apply to the extent that trade or economic sanctions or other laws or regulations prohibit us from providing insurance, including, but not limited to, the payment of claims.

The Company is a branch of a US company and Chubb Limited, a NYSE listed company. Consequently, the Company is subject to certain US laws and regulations in addition to EU, UN, and local sanctions restrictions which may prohibit it from providing cover or paying claims to certain individuals or entities or insuring certain types of activities related to certain countries such as Cuba.

## **SECTION 6- GENERAL PROVISIONS**

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#### **Conditions Precedent to Liability**

The Company's liability for any benefit under this Group Policy is conditional upon the:

- (i) truth of the statements and information as provided to the Company by the Policyholder and all Insured(s); and
- (ii) due observance and fulfilment of the terms and conditions of this Group Policy insofar as these relate to anything to be done or complied with by the Policyholder and all Insured(s).

#### **Due Diligence**

The Insured will exercise due diligence in doing all things to avoid or reduce any loss under this Group Policy.

#### **Breach of Conditions**

If the Policyholder or the Insured is in breach of any of the conditions or provisions of this Group Policy (including a claims condition), the Company may decline to pay a claim, to the extent permitted by law.

#### **Premium Payment**

This Group Policy shall not be valid and binding unless and until the premium has been paid by the Policyholder.

#### **Notice of Claim or Loss**

In case of Injury or Accidental Death, written notice of claim must be given by the Insured to the Company within thirty (30) days after a covered loss occurs or as soon as is reasonably possible.

#### **Claim Forms**

Upon receipt of a notice of claim, the Company will furnish to the claimant such forms usually required by it for filing proofs of loss. If such forms are not furnished within fifteen (15) days from receipt of such notice of claim, the claimant shall be deemed to have complied with the requirements of this Group Policy, as to proof of loss, upon submitting, within the time fixed in this Group Policy for filing proof of loss, written proof covering the occurrence, the character and extent of the loss for which the claim is made. All certificates, information and evidence, other than the usual claim forms, which the Company may reasonably require in support of a claim, shall be furnished by the Insured.

#### **Proof of Loss**

Written proof of loss including the original receipts, invoices and all other relevant documents must be furnished to the Company within ninety (90) days after the date of such loss. Failure to furnish such proof within the time required shall not invalidate nor reduce any claim if it was not reasonably possible to give proof within such time, provided such proof is furnished as soon as reasonably possible and not later than one (1) year from the date of loss.



**Time of Payment of Claim**

Indemnities payable under this Group Policy will be paid within thirty (30) days after receipt by the Company of due written proof of such loss and after ascertainment of the loss is made by the agreement between the Company and the Insured or by arbitration; but if such ascertainment is not made within sixty (60) days after such receipt by the Company of the proof of loss, then the loss shall be paid within ninety (90) days after such receipt. Refusal or failure to pay the loss within the periods prescribed herein will entitle the Insured to collect interest on the proceeds of the Group Policy for the duration of the delay at the rate of twice the ceiling prescribed by the Monetary Board, unless such refusal or failure to pay is based on the ground that the claim is fraudulent.

**To Whom the Benefit is Payable**

Benefits payable under this Group Policy shall be made to the Insured; or in the event of his/her death to the person or persons then surviving in the following order of preference: (a) legal spouse; (b) children; (c) parents; (d) brothers and sisters; otherwise, to the estate of the Insured. Any payment made by the Company in good faith pursuant to this provision shall fully discharge it to the extent of the payment.

**Making Claims after this Group Policy is Cancelled**

If this Group Policy is cancelled, this does not affect the Insured's rights to make a claim under this Group Policy if the Event occurred before the date of cancellation.

**Fraudulent Claims**

If any claim under this Group Policy is fraudulent or if the Insured or anyone on the Insured's behalf used any fraudulent means or devices to obtain benefit under this Group Policy, the Company shall have no liability in respect of such fraudulent claim and shall be entitled to terminate this Group Policy immediately.

**Fraud Warning**

Section 251 of the Amended Insurance Code imposes a fine not exceeding twice the amount claimed and/or imprisonment of two (2) years, or both, at the discretion of the court, to any person who presents or causes to be presented any fraudulent claim for the payment of a loss under a contract of insurance, and who fraudulently prepares, makes or subscribes any writing with intent to present or use the same, or to allow it to be presented in support of any claim.

**Assistance and Cooperation**

The Insured shall cooperate with the Company and upon the latter's request, assist in making settlements, in the conduct of suits and in enforcing any right of contribution or indemnity against any person or organization who may be liable to the Insured because of Injury wherein insurance is afforded under this Group Policy. In this regard, the Insured shall promptly attend hearings and trials and assist in securing and giving of evidence and obtaining the attendance of witnesses.

**Physical Examination and Autopsy**

The Company at its own expense shall have the right and opportunity to examine the Insured when and as often as it may reasonably require during the pendency of the claim hereunder, and to make an autopsy in case of death where it is not forbidden by law.

**Renewal Conditions**

This Group Policy may be renewed for further consecutive periods by the payment of premium on the Effective Date of the renewal at the Company's premium rate in force at the time of renewal, subject to its right to decline renewal of this Group Policy on any anniversary date of the Group Policy upon giving forty-five (45) days prior written notice, mailed or delivered to the Policyholder at the address shown in this Group Policy, of the Company's intention not to renew this Group Policy, or to condition its renewal upon reduction of limits or elimination of coverages. The Company's acceptance of premium shall constitute its consent to renew. Unless renewed as herein provided, this Group Policy shall terminate

at the expiration of the grace period for which premium has not been paid.

### **Right to Return Policy**

In the event the Policyholder is not satisfied with this Group Policy for any reason, the Policyholder may cancel this Group Policy by advising the Company in writing within five (5) days after receipt of this Group Policy. Any premium paid will be refunded during this period. The Policyholder will not be entitled to a refund if an Insured has made a claim during this period.

### **Cancellation**

This Group Policy shall not be cancelled by the Company except upon prior notice thereto to the Group Policyholder, and no notice of cancellation shall be effective unless it is based on the occurrence, after the Effective Date of this Group Policy, of one or more of the following:

- a) non-payment of premium;
- b) conviction of the Insured of a crime arising out of acts increasing the hazards insured against;
- c) discovery of fraud or material misrepresentation;
- d) discovery of wilful or reckless acts of omissions increasing the hazards insured against;
- e) physical changes in the property insured which result in the property becoming uninsurable;
- f) discovery of other insurance coverage that makes the total insurance in excess of the value of the property insured;
- or
- g) a determination by the Insurance Commissioner that the continuation of this Policy would violate or would place the Company in violation of the Amended Insurance Code.

All notices of cancellation shall be in writing, mailed or delivered to the Policyholder at the address shown in this Group Policy and shall state (i) which of the grounds set forth in this provision is relied upon, and (ii) that, upon written request of the Policyholder, the Company will furnish the facts on which the cancellation is based.

The Policyholder shall inform the Insured of the impending cancellation of the Group Policy by the Company upon its receipt of the notice.

### **Clerical Error**

A clerical error by the Company shall not invalidate insurance otherwise validly in force, nor continue insurance otherwise not validly in force.

### **Entire Contract**

This Group Policy, including endorsements and attached papers of which the descriptive title is mentioned in this Group Policy, if any, the policy application on file with the Company or attached herewith and the Policy Schedule, constitute the entire contract of insurance. No change in this Group Policy shall be valid until approved by an authorized executive officer of the Company and unless such approval be endorsed hereon or attached hereto. No agent has authority to change this Group Policy or to waive any of its provisions. None of the provisions, conditions and terms of this Group Policy shall be waived or altered except in accordance with the pertinent provisions of Section 50 of the Amended Insurance Code.

Any rider, clause, warranty or endorsement issued after the Effective Date of this Group Policy shall be countersigned by the Policyholder, which countersignature shall be taken as the Policyholder's agreement to the contents of such rider, clause, warranty or endorsement.

### **Governing Law**

This Group Policy shall be governed by and interpreted in accordance with the laws of the Philippines.

### **Mediation**

In the event of any controversy or claim arising out of or relating to this Group Policy, or a breach hereof, the Company

and the Policyholder shall first endeavor to amicably settle the matter by mediation administered by the Insurance Commission or any recognized institution under the Mediation Rules, before resorting to arbitration, litigation or some other alternative dispute resolution procedure.

#### **Legal Action**

Unless the claim has been denied, no action or suit shall be brought either to the Insurance Commission or any court of competent jurisdiction to recover on this Group Policy prior to the expiration of sixty (60) days after written proof of loss has been furnished in accordance with the requirements of this Group Policy. In any event, no legal action shall be brought after the expiration of one (1) year from notice of the denial of the claim.

#### **Civil Code 1250 Waiver Clause**

It is hereby declared and agreed that the provision of Article 1250 of the Civil Code of the Philippines (Republic Act No. 386) which reads:

“In case an extraordinary inflation or deflation of the currency stipulated should supervene, the value of the currency at the time of the establishment of the obligation shall be the basis of payment.”

shall not apply in determining the extent of liability under the provisions of this Group Policy.

#### **Availability of the Group Policy**

This Group Policy shall be kept in the main office of the Policyholder or available in the website of the Policyholder at <https://moveit.com.ph/home/> and shall be in the custody of its authorized officer. This Group Policy shall be available to the Insured for inspection during the regular office hours of the Policyholder.

IN WITNESS WHEREOF, the Company has caused this Group Policy to be executed and commenced on the Effective Date stated in the Policy Schedule, provided that no insurance shall be in force unless the Policy Schedule is signed by an authorized representative of the Company.

**INSURANCE COMPANY OF NORTH AMERICA**  
**A Chubb Company**

  
**MARI RACHELLE L. CANTA**  
Country President

(The Insurance Commission of the Philippines, with offices in Manila, Cebu, and Davao, is the government office in charge of the faithful execution and enforcement of all laws relating to insurance and has supervision over insurance companies. It is ready at all times to render assistance in settling any controversy between an Insurance Company and an Insured relating to insurance matter.)

## Privacy Statement

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In this Privacy Statement “We”, “Our” and “Us” means Insurance Company of North America (a Chubb Company). This Statement is a summary of Our Privacy Policy and provides an overview of how We collect, disclose and handle the Insured’s personal information, which may include sensitive personal information. Our Privacy Policy may change from time to time and where this occurs, the updated version will be posted to Our website.

### Why We Collect the Insured’s Personal Information

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The primary purpose for Our collection and use of the Insured’s personal information of the Insured is to enable Us to provide Our services (e.g. policy administration, inquiries, claims processing).

### How We Obtain the Insured’s Personal Information

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We collect Personal Information (which may include sensitive personal information) at various points including but not limited to when We are issuing, changing or renewing an insurance policy or cover with Us or when We are processing a claim. Personal information is usually obtained directly from the Insured or through an insurance intermediary or a group policyholder. Please refer to Our Privacy Policy for further details.

When information is provided to Us via a third party, We use that information on the basis that the Insured consented or would reasonably expect Us to collect the Insured’s personal information in this way. We take reasonable steps to ensure that the Insured has been made aware of how We handle his/her personal information.

### How We Disclose the Insured’s Personal Information

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We may disclose the information We collect to third parties, including service providers engaged by Us to carry out certain business activities on Our behalf (such as claims assessors and call centers). In some circumstances, in order to provide Our services, We may need to transfer personal information to other entities within the Chubb group of companies or third parties with whom We (or the Chubb Group of Companies) have subcontracted to provide a specific service for Us, which may be located outside of the Philippines. These entities and their locations may change from time to time. Please contact Us, if you would like a full list of the countries in which these third parties are located. In the circumstances where We disclose personal information to the Chubb Group of Companies, third parties or third parties outside the Philippines, We take steps to protect personal information against unauthorized disclosure, misuse or loss.

Where access to Our products has been facilitated through a third party (e.g. insurance broker) We may also share Your information with that third party.

### Access to and Correction of the Insured’s Personal Information

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If the Insured would like to request access to, update or correct the personal information held by Us, please contact Our Data Protection Officer.

Please contact:  
Data Protection Officer  
Insurance Company of North America (a Chubb Company)  
24th Floor Zuellig Building  
Makati Avenue corner Paseo de Roxas  
Makati City 1226, Philippines  
E-mail [DPO.PH@chubb.com](mailto:DPO.PH@chubb.com)

### About Chubb in the Philippines

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Chubb is the world’s largest publicly traded property and casualty insurer. With operations in 54 countries and territories, Chubb provides commercial and personal property and casualty insurance, personal accident and supplemental health insurance, reinsurance and life insurance to a diverse group of clients. As an underwriting

company, we assess, assume and manage risk with insight and discipline. We service and pay our claims fairly and promptly. The company is also defined by its extensive product and service offerings, broad distribution capabilities, exceptional financial strength and local operations globally. Parent company Chubb Limited is listed on the New York Stock Exchange (NYSE: CB) and is a component of the S&P 500 index. Chubb maintains executive offices in Zurich, New York, London, Paris and other locations, and employs approximately 33,000 people worldwide.

Chubb, via acquisitions by its predecessor companies, has been present in the Philippines for more than 70 years. Chubb in the Philippines is a branch of Insurance Company of North America, which has been assigned a financial rating of AA by Standard & Poor's. The company provides specialized and customized coverages for Property, Casualty, Marine, Financial Lines, as well as Accident & Health. It leverages global expertise and local acumen to tailor solutions to mitigate clients' risks. With a focus on building strong relationships with its clients by offering responsive service, Chubb in the Philippines has become one of the leading providers of Specialty Personal Lines, Accident & Health insurance through direct marketing.

More information can be found at [www.chubb.com/ph](http://www.chubb.com/ph)

#### Contact Us

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Insurance Company of North America  
A Chubb Company  
24<sup>th</sup> Floor Zuellig Building  
Makati Avenue corner Paseo de Roxas  
Makati City 1226 Philippines  
O +63 2 8849 6000  
F +63 2 8325 1675

Chubb. Insured.<sup>SM</sup>