

## PLANSCHEDULE

In this Plan, where the context admits, words importing the masculine gender shall include the feminine gender and words importing singular shall include the plural and vice versa.

**The Plan Holder** DUBAI ISLAMIC BANK

**Type of Plan** Group Family Takaful Protection Plan

### Applicable Protection Benefits

1. Family Takaful Benefit (Accidental Death Benefit ONLY)
2. Involuntary Loss of Employment (ILOE)

### Benefit Amount

<b>Contribution Amount</b>	<b>Accidental Death Benefit</b>	<b>Involuntary Loss of Employment (ILOE)</b>
AED 8 per month per Covered Member	AED 25,000 per Covered Member	WPS (Blue Collar)-AED 1,000 per month for a maximum period of 3 months. Maximum liability per Covered Member is limited to AED 3,000.
AED 10 per month per Covered Member	AED 25,000 per Covered Member	AED 4,000 per month for a maximum period of three (3) months. Payment is on monthly installment. (Maximum liability per Covered member is limited to AED 12,000).

**Geographical Limits** For Accidental Death: Worldwide for UAE residents only  
For ILOE: UAE residents only

**Currency** UAE Dirham

## Definitions

The terms used in the Plan shall have the following meaning unless specifically stated

<b>Accident</b>	An event resulting in bodily injury caused solely and directly by external violent and visible means which is unexpected, unforeseeable and not attributable to the Covered Member's intentional self-injury or suicide.
<b>Benefit Amount</b>	The amount(s) payable by the Operator, as the Wakeel, under Protection Benefit(s) as stated in the Plan Terms and Conditions.
<b>Commencement Date</b>	The date indicated in the Plan Schedule and when the first Contribution is paid and the Protection Benefits become applicable for the Covered Member.
<b>Covered Member</b>	Salary transfer customers of Dubai Islamic Bank.
<b>Date of the Event</b>	Any one of the following: In respect of death, the date of death which resulted from a cause not specifically excluded under this Plan, on or after the Commencement Date and during the period of cover.  In respect of ILOE, the date of termination on or after the Commencement Date and during the period of cover.
<b>Eligibility Date</b>	The date that a Covered Member is Eligible to join the Plan.
<b>Expiry Date</b>	The end of the Period of Cover shown in the Plan Schedule on which the Plan terminates and all benefits come to an end, unless stated otherwise.
<b>Event Limit</b>	Maximum Total Benefit Amount payable resulting from any single event, or series of events relating to a single event, giving rise to multiple benefit payments under this Plan.
<b>Free Cover Limit</b>	This is the maximum cover limit or Benefit Amount for a new eligible member or existing member before additional evidence of health/insurability is required. Any Benefit Amount in excess of above limit shall be by explicit acceptance by the Operator, as the Wakeel, and subject to production to the Operator, as the Wakeel, such evidence of good health / insurability as the Operator may require as the Wakeel.
<b>Law</b>	The laws as construed in The United Arab Emirates.
<b>Grace Period</b>	A period of 30 days after the contribution due date allowed for the

payment of each contribution, during which cover will remain in force.

<b>Involuntary Loss of Employment</b>	Unemployment of the Covered Member arising out of the unilateral decision of the employer to terminate his/ her employment contract for any reason other than those mentioned under Exclusions.
<b>Operator</b>	Islamic Arab Insurance Company P.S.C., SALAMA in title as the Wakeel of the Tabarru' Fund.
<b>Parties</b>	Shall mean individually and collectively the Plan Holder and the Operator, as the Wakeel.
<b>Plan</b>	The Group Family Takaful Protection Plan Terms and Conditions, the Plan Schedule, Special Provisions and any Endorsement thereto.
<b>Plan Holder</b>	The owner of this Plan indicated in the Plan Schedule.
<b>Protection Benefits</b>	Collective term for all Takaful benefits as specified in the Plan Schedule.
<b>Re-Employment</b>	Accepting and starting work for a new employer or the same employer under a new employment contract during the period when ILOE benefit is being paid.
<b>Registered Medical Practitioner</b>	A legally qualified licensed medical physician or surgeon who is legally authorised to practice medicine in his country of residence and is not a Covered Member or any person related by blood or marriage to the Covered Member.
<b>Shari'ah Principles</b>	Islamic law where relevant interpreted by the Shari'ah Supervisory Committee of the Operator, as the Wakeel.
<b>Shari'ah Supervisory Committee</b>	A committee of learned Shari'ah scholars engaged by the Operator, as the Wakeel, to provide guidance on Shari'ah Principles.
<b>Takaful</b>	Insurance conforming to Shari'ah Principles.
<b>Tabarru' Fund</b>	A collective pool established, invested and managed in accordance with Shari'ah Principles with the sole purpose of providing Protection Benefits.
<b>Takaful Rate</b>	The appropriate Rate of Mortality and Morbidity Charge.
<b>Wakalah Fee</b>	The fee equal to 15% of the Takaful Contribution.
<b>Wakeel</b>	The Operator, as the Wakeel, appointed to undertake transactions on behalf of the Plan Holder.

## GENERAL EXCLUSIONS

### **Section 1:**

No Protection Benefits under this Plan shall be payable in respect of Covered Members where the event giving rise to a claim under this Plan occurs directly or indirectly from any of the following causes;

○ **War or terrorism defined as follows;**

If the benefit claim occur as a direct consequence of war or warlike operations, (whether war be declared or not), invasion, act of foreign enemy, act of terrorism, hostilities, mutiny, riot, civil commotion, civil war, rebellion, revolution, insurrection, conspiracy, military or usurped power, martial law or state of siege or any other events or causes which determine the proclamation of maintenance of martial law.

Further it remains agreed that if, the Covered Member has been taking an active part in any of the event mentioned in this clause above or has been an active member of militia or para militia organisation, then the present extension of coverage becomes null and void and the Operator, as the Wakeel, shall not pay the sum mentioned above.

Passive war cover is excluded if a Covered Member is traveling to a country after war has been declared in that country or after it has been recognised as a war zone by the United Nations or where there is war like operations as described above.

- Unlawful act of the Covered Member or punishment by the due process of law.
- Losses in connection with nuclear energy, fusion, weapons or devices, ionising radiations or contaminations by radio-active devises or chemicals.
- Misuse or under influence of drugs or alcohol unless prescribed or administered by a registered Medical Practitioner.
- Suicide, or attempted suicide and intentional self-inflicted injury whilst sane or insane.
- Any participation or training for any dangerous or hazardous sports or competition or riding or driving in any form of race or competition including but not limited to Mountaineering, maritime navigation beyond 20 nautical miles from a coastal shelter, diving beyond a depth of 20 meters, potholing or caving, sports of combat, off-piste snow sports, equestrianism in competition, bungee jumping, rafting, any activity in desert area or any sport needing the use of a motor engine.
- Aviation, gliding or any form of aerial flight other than as a pilot, cabin crew or a fare paying passenger of a recognised commercial airline or charter service on a recognised air route.
- Any other exclusion, shown under a specific Applicable Protection Benefit as more particularly described in Section 2, Scope of Cover, of the Plan terms and Conditions.

### **Scope of Cover**

### **Section 2**

*Subject to the Terms and Conditions in this Plan, the Operator, as the Wakeel, shall pay the Protection Benefits shown in the Plan Schedule as hereinafter provided:*

### **2.1.1 FAMILY TAKAFUL BENEFIT ( ACCIDENTAL DEATH BENEFIT ONLY)**

This benefit shall not apply unless stated in the Plan schedule as Applicable.

In the event of the accidental death of a Covered Member, from a cause not specifically excluded under this Plan, on or after the Commencement Date and on or before the benefit Expiry Date, the Operator as an Agent (Wakeel) shall, subject to any limit(s) specified, pay the Plan Holder the Amount shown in the Plan Schedule.

The benefit covers death solely caused by Accident as herein limited and provided.

**PROVIDED** (1) that such death shall have occurred while said Plan and this Benefit are in full force and prior to the anniversary of said Plan before the **65<sup>th</sup> birthday** of the Covered Member and (2) that all contributions under said Plan and this benefit shall have been duly paid and (3) that death shall have occurred within 90 (ninety) days from date of such injuries; and (4) the Covered Member died as a direct result, independently and exclusively of all other causes, of bodily injury effected solely by external, violent and accidental means of which (except in the case of drowning or of internal injury revealed by autopsy) there is evidence of visible contusion or wound on the exterior of the body.

**MEDICAL EXAMINATION:** The Operator, as the Wakeel, shall, if required, have the right and opportunity to examine the body of Covered Member and to make an autopsy unless forbidden by law.

**TERMINATION OF BENEFIT:** The protection under this benefit shall automatically terminate when a Covered Member (a) ceases his eligibility to be a member of the classes for which the protection benefit is granted or (b) if his membership under the basic group Plan terminates or (c) if this benefit terminates or (d) if the contribution payment for his protection benefit are discontinued or (e) when he reaches his **65<sup>th</sup> birthday**.

This benefit shall not be reinstated unless said Plan is in full force with no contribution in default thereon, or unless said Plan has been reinstated by the Operator, as the Wakeel.

### **2.1.2 INVOLUNTARY LOSS OF EMPLOYMENT (ILOE)**

This benefit shall not apply unless stated in the Plan schedule as Applicable.

If a Covered Member becomes unemployed due to Involuntary Loss of Employment (ILOE) as defined in this Plan, from a cause not specifically excluded under this Plan, on or after the Commencement Date and on or before the benefit Expiry Date, the Operator will pay to the Plan Holder an amount as per the limits and up to the number of months as specified in the Plan Schedule subject to other terms and conditions of the Plan.

#### **ELIGIBILITY CRITERIA:**

To report a claim under this Benefit, the Covered Member must meet the following conditions:

- Being unemployed as a consequence of redundancy or dismissal (other than due to a reason of misconduct),
- Being less than 60 years old on the notification of unemployment,
- Six continuous months of permanent gainful contract of employment of not less than 30 hours per week with the same employer in the private/public sector prior to the claim date [self- employed Covered Members are not entitled to claim under this ILOE coverage],
- There must be at least 6 months of continuous employment after the term of a first claim for which benefits have been paid to re-qualify for a new one.
- Only unemployment arising in the covered countries as mentioned in the Plan Schedule and according to the respective contract of employment is covered.
- A Covered Member would not be allowed to join the Plan in case he / she had opted out from this Plan.
- ***(\*) the eligibility to ILOE depends on conditions that have to be met on the claim date, irrespective of what the occupation of the Covered Member was when he applied for insurance***

#### **TERMINATION OF BENEFIT:**

The benefit payment terminates at the earliest of the following:

- in case of Death/Disability,
- when the Covered Member resumes work (even if it is only a part-time work),
- on the date of retirement or early retirement,
- when the maximum benefit payment term is reached,
- on the maximum age at claim date,
- When the maximum number of monthly benefit payment term as mentioned in the Plan Schedule has been reached for any one claim; or number of monthly installments in aggregate as mentioned in the Plan Schedule for several ILOE claims (if applicable) during the period of coverage.
- When the Covered Member's visa is cancelled and he leaves the country.
- When the Covered Member no longer claims the Social Security Benefit applicable for Nationals of the GCC Countries (e.g. Tanmia unemployment benefit applicable to UAE Nationals).

#### **EXCLUSIONS APPLICABLE FOR INVOLUNTARY LOSS OF EMPLOYMENT BENEFITS**

No Protection Benefits under this Plan shall be payable in respect of Covered Members where the event giving rise to a claim under this Plan occurs directly or indirectly from any of the following causes;

- Social legal phenomenon such as Emiratization.
- Mass layoffs due to economic recession or company non-performance due to its inability to pay its debts, insolvency or liquidation proceedings are initiated.
- Employees who have not been continuously employed with the same employer for a minimum of 6 months or employees who are on probation or Self-employed persons
- Employment on a fixed term contract or part time or temporary employment.
- Resignation or leaving by mutual agreement or voluntary unemployment or redundancy after voluntary breaks from employment in excess of normal holiday entitlement.
- Disability, Sickness or Accident or any other medical reasons (mental and/or physical);
- Involuntary Loss of Employment which starts within 90 days of the risk Commencement Date for the Covered Member.
- Contributions have not been paid for the last 3 consecutive months from the Date of Event.
- Where the Covered Member was aware of pending unemployment on or before the Plan Commencement Date.
- Where the unemployment is due to unsatisfactory performance or a normal seasonal part of the employment due to or non-renewal of employment contract by the authorities;
- Where the Covered Member has neither been terminated nor become redundant but his/her salary or allowances is being withheld in part or in full for any reason;
- Unemployment due to any of the following: Misconduct; Refusal to accept orders from the superiors; Criminal Conviction; Covered Member being under the influence of alcohol or drugs.
- The period for which payment from the employer is received instead of working notice;
- Payment after the customer reaches the maximum Coverage Age;
- Termination of employment due to voluntary retirement;
- Company failure or redundancy or termination of the Covered Member where a contributing cause was a natural catastrophic peril, war or warlike event; nuclear reaction, nuclear radiation or radioactive contamination.
- Claims intimated after 90 days from the Date of Event.

### **Claims**

If a Covered Member suffers the event upon which the Protection Benefits are payable prior to the Expiry Date and whilst the Plan is in force, the benefits detailed in the Plan Schedule and Covered Members List will become payable to the Plan Holder, subject to the following terms:

- Written notice of claim must be given to the Operator, as the Wakeel, within 3 (three) months after the date of the event. Failure to furnish notice of claim to the Operator, as the Wakeel, within the above time limit shall not invalidate the claim if it shall be shown not to have been reasonably possible to give such notice within the time limit and that notice was given as soon as was reasonably possible.
- The Operator, as the Wakeel, has received satisfactory written proof of the validity of the claim.
- All payments of Protection Benefits are subject to prior deduction of any outstanding Contributions.

### **Section 3**

#### **CLAIMS PROCEDURE:**

Upon the happening of an event giving rise to a claim under this Plan, the Claimant shall follow the following procedure within ninety (90) days of the Date of Event:

Write to the Operator at the below address:

Manager, Underwriting and Claims  
P. O. BOX 10214  
Dubai, United Arab Emirates  
E-mail: [claims@salamalife.ae](mailto:claims@salamalife.ae)  
Tel. No.: +971 4 4079881

The Operator, as the Wakeel, will issue a Statement of Claim Form. The Claimant should complete the Statement of Claim Form issued by the Operator, as the Wakeel, and produce such evidence to substantiate the claim and the title of the claimant as the Operator, as the Wakeel, may require.

#### **CLAIMS HANDLING DOCUMENTS' CHECK LIST**

##### **1. ACCIDENTAL DEATH BENEFIT**

- An official letter signed by the Plan Holder intimating the claim.
- Completed Claim Form
- Original or true copy of the Death Certificate



- Passport Copy of deceased with valid visa page.
- Inquest or post mortem examination report held on the body, if any
- Hospitalization Report or Medical Report
- Medical Certificate indicating cause of death with police report
- System generated Bank Account Statement of Covered Member for last three months
- Any other document as may reasonably be required.
- In case of Death out of UAE, the original or a verified true copy of the documents may be required to be duly notarized and attested by the UAE Embassy of the country where death took place. Subsequently the same should be attested by the Embassy of the country in the UAE and Ministry of Foreign Affairs in UAE.

## **2. Involuntary Loss of Employment (ILOE)**

- Completed Claim Form
- Letter of Termination from the Employer with reason for termination
- Labor contract stating the nature, terms and duration of the job and agreed remuneration/remuneration.
- Six (6) consecutive months internal bank system statement
- Proof of payment of Social Security Benefit for Nationals (wherever applicable)
- Passport Copy of the account holder with valid visa page.
- Any other document as may reasonably be required.

ANY OR ALL DOCUMENTS AS INDICATED ABOVE MAY BE REQUIRED TO BE PRODUCED IN ORIGINAL FOR VERIFICATION BEFORE ANY SETTLEMENT OF A CLAIM.