



Policy terms for
Enterprise Living *Plus*

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 [Enterpriselifegh](#)

Product Terms and Conditions

Fraud Warning: Knowingly presenting false information is a crime. Failure to disclose accurate information may result in non-payment of a claim and all benefits under the Policy being cancelled. No cash payments should be made to sales representatives. Clients who make such cash payments do so at their own risk.

A. YOUR POLICY

Please take the time to study this document and understand the benefits applicable to this insurance Policy. The life assurance Policy terms and conditions, the application form, communication of acceptance through SMS, an e-mail and the schedule of benefits (printed on the website or upon request) enforces the Policy contract between the Life Assured and Enterprise Life (the life insurer). A Policy document contains many legal and technical terms, which are required to protect both the life assured and the life insurer. Enterprise Life has, as much as possible, set out the terms in plain English in the interest of the Policyholder's clear understanding and communication.

Please be advised that you are not entitled to any benefits under this Policy until you have received confirmation from Enterprise Life that your application has been accepted and the first premium received.

Please read these documents carefully and keep them in a safe place for future reference.

B. BENEFITS DESCRIPTION

Enterprise Executive Plus Plan has been designed as an all-inclusive product to meet the death and survival needs of the Policyholder. The benefits are as follows:

1. Main Benefits

1.1. Basic Risk Benefits

The basic risk benefits comprise of Death, Total Permanent Disability (TPD) and Critical Illness (CI), and this comes in Accelerated and Standalone forms. The policyholder also has the option to choose these forms either as:

Main life only

This option covers the main life only.

Joint life

This option covers couples in the event of one dying, contracting a critical illness or becoming totally permanently disabled.

The Basic Risk options are summarized in the table below:

	Main Life Only	Joint Life
Accelerated	Death & TPD Death & CI Death, TPD, & CI	Death & TPD Death & CI Death, TPD, & CI
Standalone	Death TPD CI	Death TPD CI

Depending on the option chosen, the Policy will pay a lump sum equal to the sum assured in the event that the Policyholder dies, becomes permanently disabled or contracts a critical illness.

The Critical Illness option pays out a percentage of the sum assured in the event of the Policyholder being diagnosed with a defined illness. The details of the critical illnesses covered and the lump sum payable are given in Appendix A.

The minimum age at entry is 18 and the maximum is 70 years for Death, Critical Illness and 55 years for Total Permanent Disability(TPD). However, the basic cover for Death and Critical Illness ceases at the age of 80 and Total Permanent Disability. ceases at age 60.

1.1.1 Free Annual Medical Screening

This benefit entitles the policyholder to a free annual medical screening. The results of this screening will have no bearing on the premium charged.

1.1.2 Retirement Waiver of Premiums

If the Policyholder is aged forty-nine or below at the start of the policy, at the 60th birthday, all premium payment would be waived under the policy. If the policyholder was above age 49 at the start of the policy a minimum of 10-year premium payment will be required to enjoy this benefit.

All automatic premium updates will cease on the first day of the month preceding the effective date of this benefit.

11.3 Cash Back

This benefit pays out 20% of the risk product premium every five years if there is no claim on the policy. The cash back is exclusive of the policy fee.

2. Optional Benefits

2.1 Hospitalization Benefit

This benefit option provides the Policyholder with daily fixed amounts which are stated in the table below.

Premium (P)	Hospital Benefit (per day)
Option 1	GHS150
Option 2	GHS250
Option 3	GHS350
Option 4	GHS500
Option 5	GHS750

This benefit becomes payable after a minimum of two nights stay in a hospital. This implies that benefits will not be payable if the Policyholder is hospitalized for a period of less than 2 nights. However, once the minimum of 2 nights has been exceeded, benefit payments will commence from day one when the Policyholder was hospitalized. Hospitalization benefits will be limited to a maximum period of 30 days per calendar year of your Policy. However, hospitalization benefit ceases at age 60.

There is six (6) months waiting period.

The monthly premiums payable for the benefits above are as stated in the tables below for male and female categories.

Male/Female						
		Benefit per day (GHS)				
Age Band(L)	Age Band(U)	150	250	350	500	750
18	25	5.07	8.45	11.81	15.76	25.32
26	30	5.13	8.55	11.96	15.96	25.63
31	35	5.21	8.68	12.14	16.20	26.02
36	40	5.32	8.86	12.40	16.54	26.57
41	45	5.45	9.08	12.70	16.95	27.23
46	50	5.58	9.30	13.01	17.36	27.89
51	55	5.72	9.53	13.34	17.79	28.58
56	59	5.88	9.79	13.70	18.27	29.35

2.2 Personal Accident

This benefit provides compensation in the event of injuries, disability or death caused solely by violent, accidental, external and visible events.

A sum assured depending on the option chosen will become payable when the Policyholder is involved in an accident as described in Appendix A. The options are as stated in the table below:

Male						
		Accidental Death Benefit				
Age Band(L)	Age Band(U)	10,000	20,000	30,000	40,000	50,000
18	25	8.11	10.32	12.53	14.74	16.96
26	30	8.60	11.29	14.00	16.69	19.41
31	35	9.08	12.25	15.45	18.63	21.83
36	40	9.57	13.27	16.99	20.70	24.42
41	45	10.04	14.26	18.51	22.76	26.98
46	50	10.68	15.64	20.61	25.58	30.53
51	55	11.27	16.90	22.54	28.18	33.79
56	59	11.44	17.22	23.01	28.81	34.57

Female						
		Accidental Death Benefit				
Age Band(L)	Age Band(U)	10,000	20,000	30,000	40,000	50,000
18	25	7.99	10.08	12.17	14.26	16.35
26	30	8.45	11.00	13.56	16.11	18.68
31	35	8.91	11.92	14.96	17.97	21.01
36	40	9.39	12.90	16.44	19.96	23.50
41	45	9.84	13.85	17.89	21.94	25.96
46	50	10.45	15.17	19.90	24.64	29.36
51	55	11.01	16.38	21.75	27.14	32.49
56	59	11.17	16.70	22.22	27.75	33.25

Male						
		Accidental TPD Benefit				
Age Band(L)	Age Band(U)	10,000	20,000	30,000	40,000	50,000
18	25	6.20	6.49	6.79	7.09	7.38
26	30	6.26	6.62	6.99	7.35	7.71
31	35	6.26	6.63	7.00	7.38	7.75
36	40	6.22	6.60	6.97	7.34	7.72
41	45	6.19	6.58	6.98	7.38	7.78
46	50	6.15	6.59	7.04	7.49	7.94
51	55	6.13	6.65	7.17	7.68	8.20
56	59	6.22	6.80	7.38	7.97	8.56

Female						
		Accidental TPD Benefit				
Age Band(L)	Age Band(U)	10,000	20,000	30,000	40,000	50,000
18	25	6.09	6.25	6.43	6.60	6.78
26	30	6.12	6.34	6.56	6.78	7.00
31	35	6.13	6.37	6.62	6.87	7.12
36	40	6.14	6.42	6.72	7.01	7.30
41	45	6.15	6.49	6.84	7.20	7.55
46	50	6.13	6.55	6.98	7.41	7.84
51	55	6.13	6.65	7.17	7.68	8.20
56	59	6.23	6.82	7.42	8.02	8.62

2.3 Educational Support

The Educational Support Benefit is designed to support the educational needs of the Policyholder's beneficiary (ies). The minimum premium for this benefit is GHS200.00. The maximum premium is GH¢ 5000.00. The percentage of premiums allocated to the investment account for each year is shown below.

Payment	Percentage of premium
1st year	90%
2nd year	92%
3rd year	92%
4th year	93%
5th year	94%
6th and subsequent years	95%

Surrender value is available after one year. However, penalties are applied on early surrender and these are:

Year	Surrender penalty (percentages)
1st year	13%
2nd year	10%
3rd year	8%
4th year	6%
5th -9th year	4%
10th year	0%

After 5 years, the maximum allowable withdrawal is 70% of the benefit account. The Policyholder will be allowed to withdraw once every year from the benefit account subsequently.

2.3.1 Death and TPD Waiver of Premium Benefit

Should the Policyholder die or become permanently disabled after six months waiting period, all future premiums at the level at the time of death will be paid by Enterprise Life until the end of the Policy term. No allowance will be made for future updates to sums assured. The Policyholder's named beneficiary (ies) will receive full benefits when the Policy reaches its full term. In the event that the beneficiary (ies) dies, the full cash value of the Policy becomes payable. The monthly premiums payable for the death waiver of premium benefit are as stated in the tables below for the inflation protection update chosen by the Policyholder.

Cost per GHS1000 of annual premium – Inflation Protection 0%

	Age next birthday of premium payer						
	Cost per GHS1,000 of annual premium						
Term	18-25	26-35	36-40	41-45	46-50	51-55	56-59
7-12 years	0.55	0.8	2.03	2.64	3.49	4.78	6.83
13-18 years	0.68	0.98	2.49	3.23	4.28	5.85	8.37

Cost per GHS1000 of annual premium – Inflation Protection 5%

	Age next birthday of premium payer						
	Cost per GHS1,000 of annual premium						
Term	18-25	26-35	36-40	41-45	46-50	51-55	56-59
7-12 years	0.66	0.96	2.44	3.17	4.2	5.74	8.21
13-18 years	0.89	1.28	3.25	4.22	5.59	7.65	10.94

Cost per GHS1000 of annual premium – Inflation Protection 10%

	Age next birthday of premium payer						
	Cost per GHS1,000 of annual premium						
Term	18-25	26-35	36-40	41-45	46-50	51-55	56-59
7-12 years	0.8	1.16	2.95	3.83	5.08	6.95	9.93
13-18 years	1.19	1.72	4.36	5.66	7.49	10.25	14.66

Cost per GHS1000 of annual premium – Inflation Protection 15%

	Age next birthday of premium payer						
	Cost per GHS1,000 of annual premium						
Term	18-25	26-35	36-40	41-45	46-50	51-55	56-59
7-12 years	0.98	1.41	3.59	4.66	6.17	8.44	12.08
13-18 years	1.63	2.36	5.98	7.76	10.28	14.07	20.13

Cost per GHS1000 of annual premium – Inflation Protection 20%

	Age next birthday of premium payer						
	Cost per GHS1,000 of annual premium						
Term	18-25	26-35	36-40	41-45	46-50	51-55	56-59
7-12 years	1.19	1.73	4.38	5.69	7.53	10.31	14.74
13-18 years	2.28	3.3	8.39	10.89	14.42	19.73	28.22

Cost per GHS1000 of annual premium – Inflation Protection 25%

	Age next birthday of premium payer						
	Cost per GHS1,000 of annual premium						
Term	18-25	26-35	36-40	41-45	46-50	51-55	56-59
7-12 years	1.46	2.11	5.37	6.96	9.22	12.62	18.05
13-18 years	3.26	4.71	11.96	15.53	20.57	28.15	40.25

Cost per GHS1000 of annual premium – Inflation Protection 30%

	Age next birthday of premium payer						
	Cost per GHS1,000 of annual premium						
Term	18-25	26-35	36-40	41-45	46-50	51-55	56-59
7-12 years	1.79	2.59	6.59	8.55	11.32	15.5	22.16
13-18 years	4.71	6.81	17.3	22.45	29.73	40.69	58.2

2.4 Retirement Benefit

This provides the Policyholder with the option to save for retirement. The investment amount payable at the end of the term will be dependent on the premium payments and the investment performance of the underlying assets. In the event of death of the Policyholder, the full cash value of the Policy will be paid to the beneficiary (ies). The minimum premium is GHS200 and the maximum premium is GH¢5000. The minimum term is 5 years. However, at the age of 60 a Policyholder is entitled to all benefits without any penalty. After 5 years, the maximum allowable withdrawal is 50% and thereafter 10% every year.

Surrender value is applicable and these are shown in the table below:

Year	Surrender penalty (percentages)
1st year	10%
2nd year	7%
3 rd year	5%
4 th year	5%
5 th -9 th year	3%
10 th year	0%

2.5 Asset Preservation Benefit

This Policy pays up to 50% of the value of any acquired asset in the event of death, disability or critical illness. The name, location and value of the asset will be provided by the Policyholder. The premium for this Policy will be determined when the Policyholder has given all necessary documentation on the asset. Cover ceases when the sum assured is paid.

2.6 Funeral Cover

2.6.1 Funeral Cover Basic Benefits

- **Death Benefit:** A sum assured is paid out on the death of a covered life – Life Assured and his /her family members. The minimum and maximum ages at entry are:

The minimum and maximum ages at entry are:

MEMBER	MINIMUM AGE	MAXIMUM AGE
Main life	18	No maximum
Spouse	18	No maximum
Children	0	21
Parents	31	No maximum
Siblings Extended family	0	No maximum

The benefits listed below apply to the funeral Cover only

- **Life Swap:** This allows the Policyholder to transfer his benefits as the Insured Life to either his spouse, child sibling, parent or guardian one time during the Policy term provided that relative's age falls within the age brackets of the Insured Life. Upon a transfer, the Policy will pay out 50% of your benefits in favor of the chosen relative whose life is not insured under the Policy. To qualify to swap a benefit, the main life must be below 60 and covered on the policy. The policy must be in an active status position for a minimum of one year from it start date. This benefit is accessible to premium paying clients and excludes policyholders on waiver. After making a claim on the life swap benefit, the main life will have to go through a twelve (12) months waiting period after which the full sum assured will be restored and become available to be claimed in the event of death of the main life.
- **5% Annual Cash Back:** This benefit pays out 5% cash back on risk premiums every year if there is no claim on the policy during the year under consideration.
- **No Lapse Feature:** Provided the first premium has been paid and an acceptance has been made by Enterprise Life, the Policy would not lapse or terminate when payment of premium ceases. The Policy remains active but the payable claim amount would be adjusted. However, this will be limited to the National Insurance Commission's 36months reinstatement rule. (After 3years (36months of non-payment of premiums (inactive payment status) the policy goes beyond reinstatement. The no lapse feature applies to the Funeral cover only.
- **Full Waiver:** After the minimum payment term of the funeral cover, all surviving lives on the policy will remain covered. **OR**
- **100% Premium Refund:** The policy will pay back all the risk premiums paid on surviving lives at the end of the payment term. The policyholder may elect to continue paying commensurate premium for the ages of lives covered. The premium refund will be less Policy fee, any cash back, commission, expenses and any premiums paid on death claims made.

A new payment term will begin after the payment of the 100% risk premium refund.

2.6.2 Cover Levels.

The Funeral plan has 5 options available. These are

Family Members	A Pack	B Pack	C Pack	D Pack	E Pack
Life Assured	10,0000	20,000	30,000	40,000	50,000
Spouse	10,000	20,000	30,000	40,000	50,000
Children	10,000	20,000	30,000	40,000	50,000
Wider Family	10,000	20,000	30,000	40,000	50,000

2.6.3 Waiting Period

The following waiting period applies to non-accidental death (natural death), beginning a day after notice of acceptance of the Policy by Enterprise Life:

Covered Life	Waiting Period
Main Life below 59 years	No waiting period
Main life above 59 to 74 years	6 months waiting period(100% refund of risk premium if death occurs
All other lives up to 74 years	6 months waiting period(100% refund of risk premium if death occurs
Other lives above 74 years	12 months waiting period (up to 30% of death sum assured is payable after 6 months waiting period)

2.6.4 Riders on Funeral Cover

- 7 days' pre-burial rites** – Thirty percent (30%) of that member's burial cover would be payable if the Policyholder opts for this benefit. Payment would be made after Enterprise Life has confirmed death of the life covered.
- 40-day celebration** – Fifty percent (50%) of that member's burial cover would be made payable if the Policyholder opts for this benefit. Payment would be made after Enterprise Life has confirmed death of the life covered.
- Memorial Benefit** - It provides the payment of fifty percent (50%) of that member's burial cover, one year after the death, if the Policyholder opts for this benefit.
- Double Accidental Benefit (Main Life Only)** - This benefit pays an amount twice the value of the sum assured to the beneficiaries if the Policyholder dies through an accident. If the death is from non-accidental causes the double sum assured will not be paid. This benefit applies to the Policyholder only.

2.6.5 Funeral Cover Waiver of Premium benefit

If any family members are covered under the Policy and the Policyholder attains the age of 60 or dies before the Policy anniversary preceding the 60th birthday, all premium payments would be waived for all lives covered under the Policy. All automatic premium updates will cease on the first day of the month preceding the 60th Birthday or at the date of death. This benefit will not be payable if the Policyholder was above age forty-nine (49) at the start of the Policy or dies within the six month waiting period. Memorial cover benefit, 7-day benefit, and 40-day benefit if taken is also applicable.

A. POLICY FEATURES

Minimum / Maximum Term

Benefit	Maximum age at entry	Maximum cover cease age
Option 1: Standalone Death	70 ANB	80
Option 2: Standalone TPD	55 ANB	60 ANB, which is the normal retirement age
Option 3: Standalone CI	70 ANB	80
Option 4: Accelerated Death, TPD & CI	55 ANB	60 ANB, which is the normal retirement age
Option 5: Accelerated Death & TPD	55 ANB	60 ANB, which is the normal retirement age
Option 6: Accelerated Death & CI	70 ANB	80

1. Minimum / Maximum Ages at Entry

The minimum age at entry is 18.

The maximum age at entry is 70.

The basic cover for death and Critical Illness ceases at 80, but Total Permanent Disability ceases at age 60. This limit also defines the maximum term available for each age e.g. for a 55-year-old, the maximum cover term is 15 years but payment term for 10 years.

2. Policy Fee

A Policy fee of GHS1.00 per month will be added to the premium.

3. Premium Payment

The benefits under this Policy are based on the assumption that these premiums will be paid regularly and the onus is on the Policyholder to ensure that the premiums due reach the company as and when they are due. Premium payment frequency options are

- Monthly
- Quarterly
- Bi-annually or
- Annually – Annual payments will 10% discount on the risk. This discount will not apply to savings related optional benefits.

B. GENERAL CONDITIONS

1. Start of Cover

Cover will commence on the day following the Acceptance Date of the application and is subject to Enterprise Life having received the first premium payment as specified in the schedule.

2. Misstatement Of Age

If the age of any of the Lives Assured is incorrect any benefit that becomes payable will be recalculated. The amount of benefit payable will be adjusted to the amount of insurance that the premiums paid would have provided had the Policyholder's age been stated correctly. This condition is not applicable to ages outside the entry age limits. Benefits are not payable if the actual age of any life assured is not within the age limit at entry.

3. Premium Payments

Unless otherwise stated in the Policy, premiums are payable to Enterprise Life until:

- Enterprise Life admits a death or waiver claim on the Principal Life Assured; or
- The Policy is cancelled

4. Lapse Rule

- A Policy will lapse when 4 consecutive premiums are missed.
- After lapsing, the Policyholder can reinstate the Policy within 3 calendar years from the lapsed date.
- Policyholders will be subjected to a new total underwriting and also the following conditions:
 - Policyholder will pay a month's premium to reinstate the Policy
 - The Policy will be reinstated by restoring it to the premium and benefit status it was before the Policy went into lapse
- There will be a waiting period for the funeral option when selected on the Policy as per the table below:

Reinstatement within One (1) Year of Lapse	6 Months Waiting Period
Reinstatement after one (1) year of lapse	12 months waiting period

There is no cover during the lapse period.

5. Notification

It is advisable to notify Enterprise Life of any death claim within one year of the occurrence of the event to enable prompt claim payment. Delay in notification is likely to cause delay in document verification and claim processing.

Should Enterprise Life reject or decline any claim, such claim will lapse and be of no force or effect unless an action has been started against Enterprise Life within two years of the claim arising.

6. Incontestability Clause

Enterprise Life may contest the validity of the insurance contract on the grounds of a material misrepresentation in the application/proposal within **two (2) years**. A material misrepresentation in an application for life insurance is a misrepresentation that is relevant to the insurer's evaluation of the proposed insured by Enterprise Life. The misrepresentation is material when, if the truth had been known, the insurer would not have issued the Policy or would have issued the Policy on a different basis, such as a higher premium or a lower sum assured.

7. Surrender Benefit

A surrender benefit which is a percentage of the risk premium (less policy fee) will be payable upon the surrender of the policy by the policyholder provided no claim has been made under the policy. This is applicable to active lives at the point of surrender. The non-risk benefits provide maturity and surrender benefits payable to the Policyholder on maturity or termination of the policy. This is however subject to the policy terms and conditions. The percentages payable are stated in the table below:

Policy Duration	Percentage of Premiums Payable
Year 1 to Year 5	5%
Year 6 to Year 10	10%
Year 11 onwards	15%

8. Amendments

Enterprise Life must be advised in writing of any change of Nominated Lives Assured or of any additional relative of the Policyholder. Any deletion of a nominated life or appointment of a Trustee must be brought to the notice of the Insurer in like manner.

9. Conditions applicable to all Policy benefits

- I. If the age of any person is incorrect any benefit that becomes payable will be recalculated
- II. The benefit payable will be subjected to a deduction of any indebtedness to Enterprise Life
- III. If the contract is surrendered benefits will automatically cease.
- IV. If the contract is cancelled benefits will automatically cease.

10. Medical Clause

Enterprise Life reserves the right to request for full disclosure of any information concerning the health of the Policyholder from any doctor or medical facility, which may be in possession of any such information. The Policyholder hereby agrees to the disclosure of such details from his/her doctor, medical facility about his state of health even after the demise of the Policyholder. This information shall remain in the STRICTEST confidence of Enterprise Life.

11. Currency

This contract is issued in, and subject to the laws of the Republic of Ghana. All monies payable in respect hereof whether by or to Enterprise Life are payable in the lawful currency of the Republic of Ghana.

12. Exclusions

Enterprise Life will not recognize any claim occasioned or accelerated by any of the following causes:

- I. Suicide, attempted suicide or any self-inflicted injury whether the Principal Life Assured is sane or insane within the first 2 years after acceptance.
- II. Any act committed by the Principal Life Assured which constitutes a violation of criminal law;

III. Excessive use of alcohol, wilful inhalation of gas, wilful exposure to radioactivity or the wilful taking of poison or drugs (except as prescribed by a medical practitioner);

IV. Any act of war, military action, terrorist activities (whether war be declared or not), riots, strikes, civil commotion or insurrection, in all cases whether as an active participant or not;

V. Active participation in mountaineering, horse riding, motor cycle racing, hunting, any speed contest other than a speed contest on foot, or fighting (except in self-defence);

VI. Participation in any form of aviation other than as a fare-paying passenger on a scheduled air service over an established passenger route;

VII. Military service or training in the armed forces of any country and for this purpose "military service" includes army, naval and air force service;

VIII. Military combat outside of Ghana or military action intended to influence or overthrow the ruling Ghanaian government.

13. Trustee

The Policyholder may by notifying Enterprise Life in writing, appoint, change or cancel the appointment of a Trustee at any time. Trustees receive the benefits of the Policy in respect of a claim arising from the death of the Policyholder under the Policy where the beneficiary is a minor.

The appointment of a new Trustee will automatically cancel the prior appointment of a Trustee. The appointment of a Trustee will be ineffective if the said Trustee dies before the Policyholder. If the Policyholder fails after such lapsing, or after the cancellation of the appointment of a Trustee to appoint a new Trustee, the proceeds of the Policy will be payable to the estate of the Policyholder. No provision in any Will and Last Testament executed by the Policyholder will have the effect of cancelling the appointment of a Trustee. The Trustee can access the Policy only after the death of the Policyholder.

14. Beneficiary

Enterprise Life will pay the benefits from this Policy to the Policyholder, or the Beneficiary in the event that the Policyholder dies. If the Beneficiary is a minor, the benefit will be paid to the nominated Trustee for the benefit of the Beneficiary. In the event that the Beneficiary or Trustees cannot be found, Enterprise Life will pay the benefit to the estate of the Policyholder.

The death of a Beneficiary before the death of the Policyholder would render the appointment of the Beneficiary invalid and the Policyholder in that circumstance is required to appoint another Beneficiary. Should the Policyholder fail to appoint another Beneficiary after such incident or after the cancellation of the appointment of a Beneficiary, the benefit under the Policy will be payable to the estate of the Policyholder. No provision in any Will and Last Testament executed by the Policyholder will have the effect of cancelling the appointment of a Beneficiary or of appointing a new Beneficiary. The Beneficiary can exercise rights to this Policy only when the Policyholder is late.

15. Residence and Travel

No restrictions apply as far as travel or residence is concerned. However, at the time of taking up the Policy all Lives Assured must be resident in the Republic of Ghana.

No life cover benefits will be paid for any Policyholder who is a permanent resident in a foreign country. This provision may be waived at the sole discretion of Enterprise Life.

16. Assignments

The basic cover-death, total permanent disability and critical-illness can be transferred by the owner to a third party having notified Enterprise Life at any of its offices in writing. Upon request of any such transfer Enterprise Life will issue a deed of transfer to the new Policyholder. Enterprise Life will not assume responsibility as to the validity of any such transfers neither will Enterprise Life waive nor abandon any right arising out of a valid assignment.

17. Communication

The Policyholder may only regard communications with Enterprise Life as received if sent by hand, through e-mails or any electronic platform as advertised or acknowledged in writing by Enterprise Life.

18. Policyholder review / Cancellation

The Policyholder has the right to review and cancel this Policy within 30 days from the Acceptance Date and receive all premiums paid, provided that no benefit has yet been paid or claimed or an insured event occurred. This cancellation must be communicated in terms of paragraph 17 above by the Policyholder.

After completion of the 30-day period mentioned above, the Policyholder may give notice in writing to Enterprise Life to cancel the Policy. The cover will cease on the date of cancellation. Cancellation of the Policy leads to the loss of benefits and all premiums paid before cancellation but any premiums paid after Enterprise Life receives notice of cancellation will be refunded.

19. Claims Settlements

Submit written notification of the death to Enterprise Life within one (1) year of occurrence. Complete a claim form at any Enterprise Life Branch office. Provide the following documents.

- I. A properly completed claim form
- II. Proof of the occurrence of the covered event for which the benefit is claimed such as death certificate, cause of death etc
- III. The legal capacity of the claimant(s) to receive the benefit and evidence of the age of the Policyholder.
- IV. All beneficiary appointments and cancellations thereof where applicable
- V. In the event of unnatural death, we will require Police Statement / Officer's (Road) Accident Report.

Enterprise Life reserves the right not to pay a claim covered under this Policy until all requirements, as specified by Enterprise Life, have been met.

Please note that a delay in notification of death and submission of relevant documents may cause a delay in the claim payment.

20. Inflation Protector

When the Policy reaches an anniversary date, the premium, excluding the Policy fee, will be increased by the percentage selected by the Policyholder. For each year that the premium is increased because of the update facility, the cover will also increase by the corresponding percentage. Where the family burial benefit is applicable, the cover of all lives assured will increase by the applicable benefit update rate as specified below. The update facility may be cancelled or reduced by a written request to Enterprise Life.

AUTOMATIC PREMIUM UPDATE	BENEFIT UPDATE
0.00%	0.00%
5.00%	3.75%
10.00%	7.50%
15.00%	11.25%
20.00%	15.00%
25.00%	18.75%
30.00%	22.50%

The inclusion of this benefit in the Policy will depend on the selection you made on your application. When selected or included in the application, they will reflect automatically on your Schedule of benefits.

21. Pre-Existing Condition Clause

No Disablement Benefit or Critical Illness Benefit shall be payable under this Policy during the first twelve (12) months following the Policyholder's entry date if in the opinion of Enterprise Life, the claim arises from any disease or condition which the Policyholder was diagnosed with, treated for or displayed symptoms of within six (6) months prior to the Policyholder's entry date.

Any contract resulting from payment of the premium will be void within the first five years of the Policy if at the time of signing the application on which this contract has been based the insured does not disclose:

- any illness or injury suffered, consultation of any physician or surgeon or any medical advice received, with respect of such illness; or

- Any other Policy application on the life of the Policyholder which has been declined, discouraged, or accepted on terms different from the standard terms or the Policyholder engaging in any fraudulent activity in relation to the Policy.

22. Grace Period

The Policy shall allow a Policyholder a grace period of 30 days to pay renewal premiums following a premium due date. During this grace period, life insurance coverage shall continue in force. If the Policyholder dies during the grace period, Enterprise Life may deduct the amount of any unpaid premium from the death benefit payable.

Appendix A

Definition and Conditions of Contingent Events

A. CRITICAL ILLNESS

The benefit shall be payable on the confirmed diagnosis meeting the specified condition definitions below, to the satisfaction of Enterprise Life.

1. STROKE

Any cerebrovascular incident producing neurological sequelae including

- infarction of the brain tissue,
- haemorrhage into the brain tissue,
- embolisation from an extra-cranial source.

Evidence of permanent neurological deficit correlating to the findings of radiographic investigations must be produced.

Transient ischaemic attacks are specifically excluded.

Benefit: 100% of benefit amount.

2. CARDIOVASCULAR BENEFIT GROUP

2.1. Heart Attack

The death of a portion of the heart muscle as a result of inadequate blood supply. The diagnosis will be based on

- a history of typical clinical symptoms including chest pain
- with new ECG changes in keeping with heart attack and elevation of specific cardiac enzymes or cardiac markers as follows:
 - Troponin T greater than 1,0 ng/ml or Troponin I greater than 0,5 ng/ml; or
 - CK-MB level is 2 times the normal values in the immediate phase or 4 times normal in the after-intervention phase

Benefit: 100% of benefit amount

2.2. Coronary Artery Disease Requiring Surgery

The undergoing of heart surgery to correct narrowing or blockage of two or more coronary arteries with bypass grafts in persons with ischaemic heart disease, but excluding percutaneous coronary interventions such as balloon angioplasty or laser relief of an obstruction.

Benefit: 50% of benefit amount.

2.3. Heart Valve Replacement

The replacement of one or more valves due to stenosis or incompetence, or combination of these conditions.

Benefit: 50% of benefit amount.

2.4. Surgery of the Aorta

The undergoing of surgery to correct any narrowing, dissection or aneurysm of the thoracic or abdominal aorta.

Benefit: 50% of benefit amount.

2.5. Valvotomy

The surgical cutting through of a heart valve to relieve obstruction caused by a stenosed valve.

Benefit: 10% of benefit amount.

2.6. Coronary Angioplasty and Stenting

The stretching and opening up of a coronary artery by the inflation of a balloon introduced into it, or the insertion of a stent by cardiac catheterisation under X-ray monitoring. Procedure was considered medically necessary by a Cardiologist. An unlimited number of procedures per person are covered.

Benefit: 10% of benefit amount.

3. CANCER

The presence of a malignant tumour characterized by the uncontrolled growth and spread of malignant cells with the invasion of normal tissue. Unequivocal histological evidence of invasive malignancy must be produced.

This includes leukaemia (other than chronic lymphocytic leukaemia) and malignant melanoma with depths greater than 1mm on histology; but excludes non-invasive cancers in situ, Kaposi's sarcoma, tumors in the presence of any human immunodeficiency virus and any skin cancer other than malignant melanoma.

3.1 Solid cancers:

Localized and regional cancer including lymph node(s) involvement corresponding to stage 1 or 2;

Cancer of the blood system: Leukaemia (blood cell cancer) of Rai stage II

or Binet stage B;

Lymphoma (solid cancers of the blood system) of Ann Arbor stage II or Low intermediate risk on International Prognostic Index, or equivalent thereof.

Brain tumour: WHO Grade II tumour, which has intermediate malignancy tendency to invade.

Benefit: 50% of benefit amount.

3.2 Solid cancers:

Where the cancer has spread to neighbouring tissues or to distant organs corresponding to stage 3 or 4:

Cancer of the blood system: Leukaemia (blood cell cancer) of Rai stage III

or IV, or Binet stage C.

Lymphoma (solid cancers of the blood system) of Ann Arbor stage III or IV; or an International Prognostic Index of high-intermediate risk or high risk; or equivalent thereof.

Brain tumour: WHO Grade III or IV tumour, which has high tendency to invade and spread.

Benefit: 100% of benefit amount.

4. PARALYSIS

Paralysis of one leg or one arm, resulting in the permanent loss of the use of these limbs.

Benefit: 50% of benefit amount.

Paralysis of, either both legs or both arms, or one leg and one arm, resulting in the permanent loss of the use of these limbs.

Benefit: 100% of benefit amount.

5. MAJOR ORGAN TRANSPLANT

5.1 Kidney Failure

Chronic irreversible total failure of both kidneys as a result of which regular renal dialysis is instituted.

Benefit: 100% of benefit amount.

5.2 Major Organ Transplant

The actual undergoing, as a recipient, of a heart, lung, heart and lung, liver, pancreas, kidney or bone marrow transplant.

Benefit: 100% of benefit amount.

6. MAJOR BURNS

Third degree burns covering at least 20% of the body surface area.

Benefit: 50% of benefit amount.

B. PERSONAL ACCIDENT

1. Total Permanent Disability

- a. In case of permanent disablement
 - I. By injury specified in the Permanent Disability Scale – such percentage (indicated on the Permanent Disability Scale) of Benefit as specified in the terms & conditions.
 - II. By injury not specified in the Permanent Disability Scale causing permanent loss of or reduction in the earning capacity of the Insured in any business or occupation – such percentage of Benefit should be consistent with the Benefit in the terms and conditions having regard to the degree of permanent disablement.
- b. In case of temporary total disablement of the insured from attending to or following any business or occupation – Benefit per week during such disablement should not exceed Benefit in the terms and conditions.
- c. In case of medical expense (including operation fees cost of surgical appliances and nursing home or hospital charges necessarily incurred) – the amount of such expenses but not exceeding benefits in the Terms and Conditions.

PROVIDED THAT

“Loss” of a limb or member or part thereof shall mean loss by actual physical severance or total permanent loss of use.

The total sum payable under clause (A) shall not exceed Benefit specified in the Terms and Conditions.

The total sum payable under clause (A) in respect of injury to more than one portion of a limb or member or part thereof shall not exceed the sum payable in respect of such injury to the whole of that limb or member or part thereof

Any sum payable under clause (A) shall be reduced by the total of any payment made under clause (B) in respect of the same bodily injury.

Payment shall not be made under clause (B) for more than 104 weeks from the date of the bodily injury.

Payments under clause (B) may be made at intervals in arrears during the period of disablement at the discretion of the Company but the Company shall reserve the right to withhold such payments if it so wishes until the total amount due to the Insured shall have been ascertained and proved to the satisfaction of the Company.

C. AUTO-IMMUNE BENEFIT GROUP

C.1 LUPUS

A chronic multi-systemic inflammatory disease with variable features, frequently including fever, weakness and fatigability, joint pains or arthritis, skin lesions on the face, neck, or upper extremities, and often affecting the kidneys, spleen, and various other organs. Also called disseminated lupus erythematosus.

Benefit: 30% of benefit amount

C.2 RHEUMATOID ARTHRITIS

A chronic auto immune disease that causes inflammation and deformity of the joints. Other problems throughout the body (systemic problems) may also develop, including inflammation of blood vessels (vasculitis), the development of bumps (called rheumatoid nodules) in various parts of the body, lung disease, blood disorders, and weakening of the bones (osteoporosis).

Benefit: 50% of benefit amount

C.3 THYROIDITIS

Thyroiditis is inflammation of the thyroid gland, a butterfly-shaped organ next to the windpipe.

Benefit: 50% of benefit amount

C.4 CROHN'S DISEASE

A type of inflammatory bowel disease (IBD), resulting in swelling and dysfunction of the intestinal tract.

Benefit: 50% of benefit amount

C.5 ULCERATIVE COLITIS

A form of inflammatory bowel disease (IBD). It causes swelling, ulcerations, and loss of function of the large intestine.

Benefit: 50% of benefit amount

C.6 DIVERTICULITIS

Inflammation of a diverticulum, especially inflammation involving diverticula of the colon. Weakness of the muscles of the colon, sometimes produced by chronic constipation, leads to the formation of diverticula, small blind pouches that form in the lining wall of the colon. Inflammation may occur as a result of collection of bacteria or other irritating agents trapped in the pouches.

Benefit: 50% of benefit amount

C.7 LYME DISEASE

An infection transmitted by the bite of ticks carrying the spiral-shaped bacterium *Borrelia burgdorferi*. The disease can be long-term and disabling unless it is recognized and treated properly with antibiotics.

Benefit: 50% of benefit amount

C.8 CHRONIC CELLULITIS

A spreading bacterial infection just below the skin surface. It is most commonly caused by *Streptococcus pyogenes* or *Staphylococcus aureus*.

Benefit: 50% of benefit amount

C.9 UVEITIS

An inflammation of the uveal tract, which lines the insides of the eye behind the cornea.

Benefit: 50% of benefit amount

C.10 OPTIC NEURITIS

A vision disorder characterized by inflammation of the optic nerve.

Benefit: 50% of benefit amount

C.11 ALLERGIC RHINITIS

This is more commonly referred to as hay fever. It is an inflammation of the nasal passages caused by allergic reaction to airborne substances.

Benefit: 50% of benefit amount

D. IMPORTANT DEFINITIONS

1. Acceptance Date

Is the date on which Enterprise Life approves your application.

2. Beneficiary

Is the person who is nominated under this Policy for the benefits specified in this Policy.

3. Cancellation

The Policyholder can cancel the Policy at any time by giving notice to Enterprise Life. It is important to remember that cancellation does not entitle you to a refund of premiums except where expressly stated, and normally leads to loss of valuable benefits and should therefore be avoided where possible.

4. Claim

A valid claim occurs when the event/s that the Policy was intended to cover occurs within the term of the Policy.

5. Inflation Protector

Since inflation reduces the value of premiums and benefits, premiums are adjusted upwards by the percentage that you selected in order that your benefits keep up with the cost of living.

6. Issue Date

Where you have selected to pay premiums by Stop Order or Debit Order, Enterprise Life considers the issue date of the Policy to be the first day of the month following receipt of the first premium.

Where premiums have commenced later than expected, the issued date will also commence later than expected, to accordingly.

7. Policyholder

This is the owner of the Policy and is the person who pays the premium.

8. Asset Preservation Benefit

A Policy option which pays the value of an acquired asset in the event of the death, TPD or CI of the Policyholder.

9. Retirement

The situation where a person ceases to work completely after attaining a predetermined age, or voluntarily.

10. Hospitalization

This shall mean admission to a recognized In-patient treatment facility whereby the insured member stays overnight at the facility for a minimum of 2 nights and is treated while in residence there by a medical personnel. Outpatient treatment, whether or not it is related to a period of inpatient treatment shall not qualify for a claim under this policy.

Recognized inpatient treatment facility

Shall mean a facility that is either: as an approved private or public inpatient treatment facility by the Ghana Health Service.

11. Trustee

A person named by the Policyholder to administer the policy in the event of the death of the Policyholder. The Trustee is not a beneficiary but in the event of death, claims notification and payment is administered by the Trustee for the benefit of beneficiaries.

E. Permanent Disability Scale

Injury	Percentage	Injury	Percentage
Loss of both hands at or Above wrist	100	Loss of ring finger - Three phalanges Two phalanges One phalanx	5 4 1
Loss of both feet at or Above the ankles	100	Loss of little finger - Three phalanges Two phalanges One phalanx	2 4 3 2
Loss of one hand at or above the wrist and of one foot at or above the ankle	100	Loss of metacarpals - First or second (additional) Third fourth or fifth (additional)	3 2
Loss of all fingers and thumbs of both hands	100	Loss of Leg – At hip Between knee and hip Below knee	70 50 35
Total and irremediable blindness in both eyes	100		
Total and irremediable paralysis	100	Loss of ankle - Loss of all toes both feet	32.5 15
Loss of arm – At shoulder Between elbow and shoulder At elbow Between wrist and elbow	60 50 47.5 45	Loss of great toe - Both phalanges One phalanx	5 2
Loss of hand at wrist	42.5	Loss of toe other than great toe (provided more than one toe is lost) – each	1
Loss of four fingers and thumb of One hand	42.5	Loss of one whole eye or total and Irremediable blindness in one eye	30
Loss of four finger	35	Irremediable loss of sight (except Perception of light) in one eye	30
Loss of lens of one eye	20		
Loss of thumb – Both phalanges One phalanx	25 10	Total and irremediable deafness – both ears one ears	50 7
Loss of index finger – Three phalanges Two phalanges One phalanx	10 8 4	Loss of middle finger Three phalanges Two phalanges One phalanx	6 4 2

F. IMPORTANT INFORMATION

On the death of the Policyholder, Enterprise Life requires the following documents:

- Original or a certified copy of death certificate
- Original medical certificate of cause of death
- Original or certified copies of the beneficiaries and deceased's identity document.
- Claim form fully completed by the beneficiary.

Other requirements

- Death is within the terms and conditions of the Policy document.
- Proof that Life Assured and deceased are the same person
- Policy must be active.

Complaints

We value your comments. If you are not satisfied with our sales or services please contact our Customer Service Centre on T: 0307084444 F: 0302677073 or customerservice.life@enterprisegroup.com.gh For:

- Policy enquiries
- Policy changes
- Claim enquiries
- Premium enquires