SHELL GO+ MEMBER EXCLUSIVE: FREE PERSONAL ACCIDENT INSURANCE

Updated as of January 06, 2025

Benefits Mechanics

- This benefit is open to all Shell Go+ members with an active standing of at least six (6) months.
- To qualify for this benefit, the member must maintain the following average minimum liters purchased from the previous six (6) months:
 - 100 Liters for Shell Go+ Private members
 - o 200 Liters for Drivers of Jeepney, taxi, FX, van, bus and truck Shell Go+ Pro members
 - o 50 Liters for Drivers of tricycle, habal-habal, kuliglig and bangka Shell Go+ Pro members
- All qualified Shell Go+ members are entitled to accident insurance to be carried out by our partner, covering the services found in the "Coverage of Personal Accident Insurance" table below.
- Member may visit https://www.shell.com.ph/freeaccidentinsurance for the full details of the accident insurance coverage.
- For further guidance on the redemption of this benefit, visit your nearest Shell station or reach out the Shell Customer Service by calling +632 8878 8888 (Metro Manila) or 1-800-10000-3333 (outside Metro Manila), or sending an email to generalpublicenquiries-ph@shell.com.
- Any benefit granted under the Program are provided by a third party pursuant to a contract with Shell, Shell shall not be liable for any breach committed or injury caused by said third party.
- If the expense is higher than the guaranteed limit, the excess will be for the account of the member
- The benefit shall have no cash or monetary value and cannot be exchanged for cash.
- Shell and/or the facilitating partner has the right to refuse the claim of a member if it has incomplete requirements, and if the member is not abiding to the conditions of the insurance.
- Shell Go+ Terms and Conditions apply.

Coverage of Personal Accident Insurance

COVERAGE	LIMIT
Accidental Death, Dismemberment, Disablement (AD&D)	PHP 30,000.00
Permanent Dismemberment/Disablement (due to accident)	PHP 30,000.00
Unprovoked Murder or Assault (UM&A)	PHP 30,000.00
Accidental Medical Reimbursement (including UM&A risk)	PHP 10,000.00
Accidental Burial Benefit (including UM&A risk)	PHP 5,000.00
Emergency Room Treatment Due to Illness (maximum of 2 treatments)	PHP 1,500.00 / treatment
Daily Hospital Income Benefit (up to 5 days, due to accident/sickness)	PHP 300.00 / day
Motorcycling Benefit	100%

Standard Shell partner's Personal Accident Insurance provisions and exclusions will apply:

- Coverage extensions: acts of nature, animal and insect bites (except mosquito), accidental food poisoning, accidental drowning, while riding as a passenger of any type of public conveyance licensed to carry a passenger, be it by sea, by land, or by air.
- Pre-existing conditions are not covered by the policy.
- Aggregate limit of PHP 30,000.00 per occurrence / event.

Details of Included Benefits

ACCIDENTAL LOSS OF LIFE BENEFIT

When bodily injury due to an accident results in loss of life of the Insured Person or a Named Insured within one hundred eighty (180) days after the date of the accident, the Company will pay the Loss of Life Indemnity stated in the Schedule. For each Named Insured Child, the accidental loss of life benefit shall not exceed ten percent (10%) of the adult/Insured Person's benefit limit as stated in the Schedule.

PERMANENT TOTAL DISABILITY

When bodily injury due to an accident results in the Permanent Total Disablement of the Insured Person or a Named Insured within one hundred eighty (180) days after the date of the accident the Company will pay the Permanent Total Disablement, Indemnity stated in the Schedule. This amount will be paid less any other amount paid under the Permanent Disablement Benefit. The following definition shall apply: Permanent Total Disablement shall mean disablement which entirely prevents the Insured Person or a Named Insured from attending to any business or gainful occupation, of any and every kind, for compensation or profit for which he is reasonable qualified by reason of his education, training or experience; or if he has no business or occupation from attending to any duties, which would normally be carried out by him in his daily life; Permanent shall mean lasting twelve (12) consecutive months from the date of the accidental bodily injury and at the expiry of the period remain beyond hope of improvement.

PERMANENT PARTIAL DISABLEMENT BENEFIT

When bodily injury due to an accident of the Insured Person or a Named Insured results in one or more injuries as defined in the following Table of Benefits within one hundred eighty (180) days after the date of the accident, the Company will pay an amount equal to the Permanent Disablement Indemnity stated in the Schedule multiplied by the corresponding Percentage of Benefit Amount per the following Table of Benefits.

INJURY	COVERAGE
Permanent and Incurable Paralysis of All Limbs	100%
Permanent Total Loss of Sight of Both Eyes	100%
Permanent Total Loss of Sight of One Eye	100%
Loss of or the Permanent Total Loss of Use of Two Limbs	100%
Loss of or the Permanent Total Loss of Use of One Limb	100%
Loss of Speech and Hearing	100%
Permanent Total Loss of Hearing in Both Ears	75%
Permanent Total Loss of Hearing in One Ear	25%
Permanent and Incurable Insanity	100%
Loss of Speech	50%
Permanent Total Loss of the Lens of One Eye	50%

INJURY	COVERAGE
Loss of or the Permanent Total Loss of Four Fingers and Thumb of Right Hand	70%
Loss of or the Permanent Total Loss of Four Fingers and Thumb of Left Hand	50%
Loss of or the Permanent Total Loss of Use of Four Fingers of Right Hand	40%
Loss of or the Permanent Total Loss of Use of Four Fingers of Left Hand	30%
Loss of or the Permanent Total Loss of Use of One Thumb Both Right Phalanges	30%
Loss of or the Permanent Total Loss of Use of One Thumb One Right Phalanx	15%
Loss of or the Permanent Total Loss of Use of One Thumb Both Left Phalanges	20%
Loss of or the Permanent Total Loss of Use of One Thumb One Left Phalanx	10%
Loss of or the Permanent Total Loss of Use of Fingers Three Right Phalanges	10%
Loss of or the Permanent Total Loss of Use of Fingers Two Right Phalanges	7.5%
Loss of or the Permanent Total Loss of Use of Fingers One Right Phalanx	5%
Loss of or the Permanent Total Loss of Use of Fingers Three Left Phalanges	7.5%
Loss of or the Permanent Total Loss of Use of Fingers Two Left Phalanges	5%
Loss of or the Permanent Total Loss of Use of Fingers One Left Phalanx	2%
Loss of or the Permanent Total Loss of Use of Toes All of one Foot	15%
Great, Both Phalanges	5%
Great, One Phalanx	3%
Fractured Leg or Patella with Established Non-Union	10%
Shortening of Leg by at least 5 cm	7.5%

In the event of partial loss of any member or members specified above a proportionately lower percentage of compensation shall be payable.

If the Insured Person or a Named Insured is left-handed the percentages relating to the right arm or right hand shall apply to the left hand or left arm respectively and the percentages relating to the left arm or left hand shall apply to the right arm or right hand respectively.

When more than one infirmity arises from one accident the Company shall pay only one loss being the greatest one. The following definitions shall apply: Permanent shall mean lasting twelve (12) calendar months from the date of Accident and at the expiry of that period being beyond hope of improvement; Loss of Sight of Eyes shall mean the entire and irrecoverable loss of sight; Loss of Speech shall mean the disability in articulating any three of the four sounds which contribute to the speech such as the Labial sounds, the Alveolabial sounds, the Palatal sounds and the Velar sounds or total loss of vocal cord or damage of speech center in the brain resulting in Aphasia; Loss of Hearing means permanent irrecoverable loss of hearing; Loss of Limb means loss by physical severance of a hand at or above the wrist or of foot above the ankle; Loss of Fingers or Toes means complete severance through or above the metacarpophalangeal joints or metatarsophalangeal joints; Loss of Use means total functional disablement/loss of use of a limb or organ and is treated like the total loss of said limb or organ.

INCLUSION OF UNPROVOKED MURDER OR ASSAULT

(Applies only to the Insured as stated in the Application under Schedule).

When, by reason of death or permanent disablement caused by murder or assault or any attempt thereat provided such murder or assault shall not have been provoked by the assured and provided such murder or assault shall not have been occasioned by or shall not have happened through:

War, Invasion, Act of Foreign Enemy, Hostilities (whether war be declared or not), Civil war, Rebellion, Revolution, Insurrection, Mutiny, Military or Usurped Power, Riots, Strikes, Military or Popular Rising.

However, there shall be no recovery hereunder in any of the following cases:

- 1. If the Insured, at the time of loss due to such unprovoked murder or assault is:
 - a. holding any government position; or
 - b. engaging activity in political activities; or
 - c. performing investigative, security or political function.
- 2. If the unprovoked murder or assault occurs in any of the following places:
 - a. Lanao del Norte
 - b. Lanao del Sur
 - c. South Cotabato
 - d. North Cotabato
 - e. Maguindanao
 - f. Sultan Kudarat
 - g. Sulu Archipelago
 - h. Zamboanga Sibugay Municipalities
 - i. Zamboanga del Sur Municipalities (except Zamboanga City)
 - j. Zamboanga del Norte Municipalities

The maximum liability of the Company hereunder for loss caused by unprovoked murder or assault is deemed limited to Php100,000.00 only per person.

ACCIDENT MEDICAL EXPENSE REIMBURSEMENT

(Applies only to the Insured as stated in the Application under Schedule).

When, by reason of bodily injury due to an Accident, and commencing within thirty (30) days after the date_of the accident the Insured Person or any Named Insured shall require treatment by a Physician, use of_Hospital facilities, or the employment of a licensed or graduate nurse while at the Hospital, the Company_will pay the Reasonable and Customary medical expenses necessarily incurred within fifty-two (52)_weeks from the date of the accident for such Physician's treatment, Hospital charges and nurses' fees,_which are in excess of the deductible (if any) stated in the Schedule, but not to exceed the amount_payable stated in the Schedule as the result of any one accident.

BEREAVEMENT ASSISTANCE

(Applies only to the Insured as stated in the Application under Schedule).

When by reason of death due to accident or sickness, the policy extends to cover bereavement assistance_in addition to all other benefits. However, this benefit shall not be payable in case of death due to murder or_assault, whether provoked or unprovoked and any pre-existing conditions.

ACCIDENTAL DEATH BURIAL EXPENSE

(Applies only to the Insured as Stated in the Application Under Schedule).

If bodily injury due to an Accident should result in accidental death of the Insured Person or any Named_Insured, the Company will, in addition to all other benefits payable under this Policy, pay for all actual burial_expenses incurred, subject to the maximum amount of reimbursement stated in the Schedule.

ACCIDENT DISABILITY INCOME

(Applies only to the Insured as stated in the Application under Schedule).

When, as the result of injury and commencing within ninety (90) days after the date of the accident, the Insured is totally disabled and prevented from performing each and every duty pertaining to his occupation, the Company will pay periodically the Weekly or Daily Benefit stated in the Schedule, for a maximum period of fifty-two (52) weeks, or until the Insured attains seventy-two (72) years of age, whichever occurs first and during which time the Insured shall continue to be totally disabled commencing immediately following the elimination Period (if any).

MOTORCYCLING INCLUSION

(Applies only to the Insured as stated in the Application under Schedule).

Notwithstanding anything contained herein to the contrary, motorcycling coverage is deemed extended to the insured person (s) under this policy while operating, riding, or alighting from a motorcycle, except while participating in any form of racing, competition, pace making, reliability trial or speed testing. The maximum liability of the company under this benefit provision is deemed limited to 25% of the applicable amounts stated in the policy schedule.

Flying Coverage

Coverage as respect flying is limited to loss occurring while the Named Insured is riding solely as a passenger, not as an operator or crew member, in, boarding, or alighting from: a certified passenger aircraft provided by a commercial airline on any regular, scheduled or non- scheduled, special or chartered flight, and operated by a properly certified pilot flying between duly established and maintained airports.

Scope of Coverage

The Insured Person/s named herein is/are protected against all covered risks, 24 hours a day, 365 days a year, whether at home or at play, anywhere in the world. It includes while the Insured/s is/are traveling as fare-paying passenger in any air, land or sea transport licensed to carry passengers between two established port or terminal.

Exclusions

The Company will not pay any benefit if the Insured Person or any other Named Insured shall suffer bodily injury due to an Accident resulting from:

- a) war, invasion, act of foreign enemy, hostilities or warlike operations (whether war be declared or not), including action in hindering, combating or defending against an actual, impending or expected attack (a) by government or sovereign power (dejure or de facto) or by any authority maintaining or using military, naval or air forces or (b) by military, naval, or air forces; or (c) by an agent of any such government, power, authority or force; any weapon of war employing atomic fission or radioactive force whether in time of peace or war, whether or not its discharge was accidental; insurrection, mutiny, civil commotion assuming the proportion of or amounting to a popular rising, rebellion, revolution, sabotage, civil war, usurped power, or action taken by the government authority in hindering, combating, or defending against such an occurrence, seizure, or destruction; any act of one or more persons, whether known or unknown and whether or not agents of a sovereign power, for terrorist purposes; Hijacking or any unlawful seizure or wrongful exercise or control of any mode of transportation, including but not limited to aircraft, watercraft, trucks(s), train(s) or automobile(s), including any attempt, seizure of control, made by any person or persons.
- b) AIDS or any illness or disability in the presence of a sero-positive test for HIV. "AIDS "or "Acquired Immune Deficiency Syndrome" wherever used in this policy shall have the meanings assigned to it by the World Health Organization. A copy of the definition is maintained in the Company's Head Office in the country of issue of the policy. AIDS includes Opportunistic Infection, Malignant Neoplasm or any disease or sickness in the presence of sero-positive test for HIV. "Opportunistic Infection" shall include but not be limited to pneumocystic carinii pneumonia, organism or chronic enteritis, virus and/or disseminated fungi infection. "Malignant Neoplasm" shall include but not be limited to Kaposi's sarcoma, central nervous system lymphoma and/or other malignancies now known or which become known as immediate causes of death, an illness, or disability, in the presence of Acquired Immune Deficiency. "Acquired Immune Deficiency Syndrome" shall include HIV (Human Immune Deficiency Virus) encephalopathy (dementia) and HIV (Human Immune Deficiency) Wasting Syndrome.
- any loss or expense in which a proximate cause was the Insured Person's or Named Insured's attempted commission of or willful participation in any crime punishable under the Revised Penal Code of the Philippines except crimes of reckless imprudence as defined in Article 365 or under similar laws of any country in which the crime was attempted, or resistance to lawful arrest;
- d) any loss or expense sustained while the Insured Person or a Named Insured is flying except as a fare paying passenger in any properly licensed private or commercial aircraft or device for aerial navigation;
- e) any loss or expense sustained during any period the Insured Person or Named Insured is serving in the Armed Forces of any country or international authority, whether in peace or war, and in such an event the Company, upon written notification by the Insured Person or Named Insured(s), shall return the pro-rata premium for any such period of service;
- f) intentionally self-inflicted injury, suicide or any attempt thereat or from deliberate exposure to exceptional danger (except in an attempt to save human life), while sane or insane;
- g) driving or riding in any kind of race involving motorized vehicles and/or while engaged in the use of motorcycles for the purpose of professional use; engaging in motorcycle riding or driving, without a sidecar;
- h) sickness or disease of any kind, any gradually operating cause, naturally occurring condition or degenerative process;
- osteoporosis (porosity and brittleness of the bones due to loss of protein from the bone matrix) or pathological fracture (any fracture in an area where pre-existing disease has caused weakening of the bone) if the osteoporosis or bone disease was diagnosed prior to the Effective Date of this Policy;
- j) pregnancy, childbirth, miscarriage or any complications related thereto, whether due to accidental bodily injury or sickness:
- k) alcoholism or drug addiction or any loss or expense sustained while under the influence of alcohol or unprescribed drugs or medications;
- I) congenital anomalies and conditions arising therefrom;
- m) any bacterial infections, except pyogenic infections which occurred through accidental cut or wound;
- n) any medical or surgical treatment, except such is necessary in the treatment of injuries covered by the policy:

- o) plastic or reconstructive surgery, unless as a result of an accidental bodily injury;
- p) poison or any poisonous substances accidentally or otherwise taken, administered, absorbed or inhaled;
- q) routine eye test, dental treatment or other examination or test not incidental to treatment or diagnosis of an insured injury;
- r) any dental treatment except for the repair or alleviation of damage caused solely by accidental injuries covered by the policy;
- s) any loss or expense sustained consequent on the Insured Person or Named Insured engaging in a sport in a professional capacity or where the Insured Person or Named Insured could or would earn income or remuneration from engaging in such sport; Insured is engaging in hunting, racing, of all kinds, steeple chasing, polo playing, mountaineering, winter sports, ice hockey, football, motorcycle racing or yachting;
- t) any loss or expense resulting from hernia;
- u) underground exploration, or underwater activities involving the use of compressed air or gas;
- v) any pre-existing conditions.

Sabotage and Terrorism Exclusion

The Policy does not cover loss or damage to the Insured caused by, or resulting from, contributed to_aggravated by any of the following perils, whether such loss or damage is accidental or intentional, intended_or unintended, direct or indirect, proximate or remote or in whole or in part caused by, contributed to or_aggravated by any perils insured by the Policy.

- 1) War, hostile or warlike action in time of peace or war, whether or not declared, including action in hindering, combating or defending against an actual, impending or expected attack;
 - a. by government or sovereign power (dejure or de facto) or by any authority maintaining or using military, naval or air forces; or
 - b. by military, naval, or air forces; or
 - c. by an agent of any such government, power, authority or force.
- 2) Any weapon of war employing atomic fission or radioactive force whether in time of peace or war, whether or not its discharge was accidental;
- Insurrection, mutiny, civil commotion assuming the proportion of or amounting to a popular rising, rebellion, revolution, sabotage, civil war, usurped power, or action taken by the government authority in hindering, combating, or defending against such occurrence, seizure or destruction;
- 4) Any act of one or more persons, whether known or unknown and whether or not agents of a sovereign power, for terrorist purposes;
- 5) Hijacking or any unlawful seizure or wrongful exercise or control of any mode of transportation, including but not limited to aircraft, watercraft, truck (s), train (s), or automobile (s), including any attempt, seizure, of control, made by any person or persons.

Such loss or damage is excluded regardless of any cause, event or intervention that contributes concurrently or in any sequence to the loss or damage.

Terrorist purpose means the use or threatened use of any unlawful means, including the use of force or_violence against any person (s) or property (s) or property (s), for the actual apparent purpose of intimidating, coercing, punishing or affecting society or some portion of society or government.

Postponement of Effective Date

In no event shall any insurance provided by this Policy shall become effective as to an Insured Person if such Insured Person or any Named Insured is confined to a hospital, disabled, or receiving payment for a claim when such insurance

would otherwise take effect according to the effective date stated in the Application. The coverage on such person shall take effect thirty-one (31) days after such hospital confinement or disability terminates, or payment of claim ceases, whichever is the latest.

Other Provisions

NOTICE OF CLAIM

Written notice of claim must be given to the Company within thirty (30) days after the occurrence or commencement of any loss covered by the policy, or as soon thereafter as is reasonably possible. In the event Accidental Death is covered by this policy, immediate notice thereof must be given to the Company. Written notice of claim given by or on behalf of the Named Insured to the Home Office of the Company, or to any authorized official of the Company with information, sufficient to identify the Named Insured shall be deemed as notice to the Company

CLAIM FORMS

The Company, upon receipt of a notice of claim, will furnish to the claimant such forms as are usually required by the Company for filing proofs of loss.

TIME FOR FILING CLAIM FORMS

Completed claim forms and written proof of loss must be furnished to the Home Office of 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 and that the same was given as soon as it was reasonably possible.

TIME OF PAYMENT OF CLAIM

Benefits payable under this policy for any loss other than loss for which this policy provides any periodic payment will be paid immediately upon receipt of due written proof of such loss. Subject to due written proof of loss, all accrued benefits for loss for which this policy provides periodic payment will be paid monthly and any balance remaining unpaid upon the termination of liability will be paid immediately upon receipt of due written proof.

TO WHOM INDEMNITIES ARE PAYABLE

Indemnity, if any, for loss of life of a Named Insured is payable to the beneficiary of such Named Insured named in the Application provided such Beneficiary survives the Named Insured, otherwise to the estate of the Named Insured. All other indemnities of this policy are payable to the Insured. Any payment made by the Company in good faith pursuant to the provision shall fully discharge the Company to the extent of the payment.

CONSENT OF BENEFICIARY

Unless irrevocably designated, consent of the Beneficiary shall not be requisite to surrender or assignment of this policy, or to change of beneficiary or to any other changes in this policy.

MEDICAL EXAMINATION

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

SUIT AGAINST COMPANY CLAUSE

If a claim be made and rejected and an action or suit be not commenced either in the Insurance Commission or any Court of competent jurisdiction within twelve (12) months from receipt of notice of such rejection or in case of arbitration taking place as provided herein, within twelve (12) months after due notice of the award made by the arbitrator or arbitrators or umpire, then the claim shall for all purposes be deemed to have been abandoned and shall not thereafter be recoverable hereunder.

MISSTATEMENT OF AGE

If the age of any Named Insured has been misstated, all amounts payable under this policy shall be such as the premium paid would have purchased at the correct age. In the event of age of the Named Insured has been misstated, and if according to the correct age of the Named Insured, the coverage provided by the policy would not have become effective, or would have ceased prior to the acceptance of such premium or premiums, then the liability of the Company during the period the Named Insured is not eligible for coverage shall be limited to the refund of all premiums paid for the period not covered by the policy.

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 policy.

ADDITIONS

Any person becoming eligible after the effective date of this policy may be added from time to time as a Named Insured upon application by the Insured, proof of eligibility and insurability satisfactory to the Company, and payment of the required additional premium. Insurance coverage for the Named Insured shall commence on the date such application has been approved by the Company subject to any limitations set forth in the attached forms.

SETTLEMENT OF CLAIM CLAUSE

The amount of any loss or damage for which the Company may be liable under this policy shall be paid within thirty (30) days after proof of loss is received by the Company and ascertainment of the loss or damage is made either by agreement between the Insured and the Company or by arbitration; but if such ascertainment is not had or made within sixty (60) days after such receipt by the Company of the proof of loss, then the loss or damage shall be paid within ninety (90) days after such receipt.