

अग्रेरिकन लाईफ दन्खोरेन्स क्रम्पनी तिमिटेड कम्पनीको स्पम्न सन् १६६६ मा अमेरिकामा स्वापित मई बीमा ऐन. २०४९ जनशार नेपालमा जीवन बीमा व्यवसाय एनं ईजावत प्राप्ता ward ed # \$70597053

नेपात विवत रशिष्टई कार्यतय : नारायणी कमलेशन, पत्नोक, यो.च.नं. ११४९०, काठमाडी, नेपान । मध्य कार्यसम् : मेटोपोलित साइफ इन्सरेन्स २०० पार्व एकेन्द्र, न्यूबोर्व म्बुकोर्क १०१६६, व.एस.ए.

"लाइफ शील्ड" म्यादी जीवन वीमालेख

अमेरिकन लाइफ इन्स्वोरेन्स कम्पनी (यस पाँव कम्पनी भनिएको) ने वीमित लाई यस वीमानेख अन्तर्गत रक्षावरण गरिएका जोशिमाहरुको साथि यस अन्तर्गतका अपवादहरु, सीमाहरु, प्रावधानहरु र फारामहरुको अधिनमा रहि वीमा गर्दछ ।

वस वीमालेख अन्तर्गतको वीमा, वसैसाथ संतरन लाभारको अनुसुचीमा उत्लेख गरिएका रक्षावरणार र सो वापत उत्लेख गरिएको वीमांकहरु अनुसार हुनेछ ।

वीमालेख वापत तिनंपर्ने, लाभारको अनसचीमा उल्लेखित पर्ग वीमाशत्क अग्रिम रुपमा भक्तानी गरिएको आधारमा यो वीमालेख जारी गरिएको छ । कम्पनीले वा कम्पनीलाई तिनंपने सवै रकमारु वीमालेखको लाभारुको अनस्चीमा उत्लेख भए अनरुपको मद्रामा र वीमालेखको लाभारको अनुसूचीमा उल्लेख भएको भृतानीको देशमा खेको कम्पनीको कार्यासवमा भृतानी गरिने छ ।

वीमावाट प्राप्त हने लाभहर, यस पष्टमा तथा यस पश्चिम पष्टहरमा र यसै साथ संतरन फारामहरूमा उत्सेख भएका प्रावधान तवा शतंत्रर तस्ताधर गरिए सरत पर्धरपमा वसै करारका अंग मानिनेवन ।

यो वीमासेख कम्पनीको अधिकार प्राप्त अधिकृतद्वारा हस्ताक्षर नभए सम्म मान्य हुनेह्नैन ।

वीमालेख लाभारको अनस्पीमा उत्लेख भएको जारी मितिका दिन यसमा उत्लेखित साक्षीररुको रोहवरमा, अमेरिकन लाइफ रुक्योरेक्स क्रम्पनीले यो वीसालेख खाप लगार्ट जारी गरेको छ ।

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American Life Insurance Company (Incorporated in 1668 in the U.S.A.as Limited Company and Registered for Life Insurance Business in Napal under Insurance Act, 2049) Company Regn. No. 6/06/2/662

Registered Office in Nepal: NARAYANI COMPLEX, PULCHOWK G.P.O. BOX: 11590, KATHMANDU, NEPAL

METROPOLITAN LIFE INSURANCE COMPANY 200 Park Avenue, New York New York 10166, U.S.A.

Home Office:

"LIFE SHIELD" TERM LIFE INSURANCE PLAN

AMERICAN LIFE INSURANCE COMPANY, (hereinafter called "the Company")

HEREBY INSURES the Insured against loss covered by this policy, subject to and in accordance with the exceptions, limitations, provisions and forms herein contained.

THE INSURANCE provided under this policy is only with respect to such and so many of the coverages as are indicated by a specific amount set opposite thereto in the Schedule of Benefits attached.

THIS POLICY is issued in consideration of the payment in advance of the total premium Specified in the Schedule of Benefits.

ALL SUMS payable hereunder by or to the Company shall be payable in the currency stated in the Schedule of Benefits and shall be paid at the office of the Company in the country stated in the Schedule of Benefits

THE BENEFITS provisions and conditions set forth on this and following pages and on Forms herein contained are part of this contract as fully as though it appeared over the signatures hereunder affixed.

This Policy shall not be valid unless countersigned by a duly authorized officer of the Company.

IN WITNESS WHEREOF, the Company has affixed its seal and caused this Policy to be executed as of the date of issue stated in the Schedule of Renefits attached thereto.

Countersigned by:

Registrar

Registrar

Vice President and General Manager

रक्क अन्तर्भ विशेष ।

यो पान करन परत्य जन वीयानेस त्रंग त्रंतान तीराको प्रत्य त्याको प्रीवत

may be strain offer some or one most rates - secretarily observe some शंप हरेख र यसको परक करार फाराब गुब्बर, सैमासाबहर र आवश्यक सैमासाब राहिता प्रदेशो ४५४ हिन जिन मैदिनताई तत उत्तरिक्षत वृति भएको असन्याम पेड हतेया।

of common -months, and new meaning and standards of one man and and spay अवस्थामा वैद्यान जसको चोट्रपटक सामीको आधार परचय, लाई अन्य सबै कारण min meson area similer r stireture arealt are mini afert

रुपमा रेखिने प्रमाण भएको शाहितीक साज्योजनाई जनाजने छ । '**डीमांक'** यस परक करारमा जातिको प्रयोग भारतीर अन्तर्यामा प्रातिकार रक्मलाई जनाउने छ ।

weeth on one arrow sales othe words of som your sale विविध्यको श्रांत जन निरन्तर कोन्त्रमा बाज १५० महिनासम्म कास्म खन्छ र जसको 'अर्थि' यस पत्रह कलाया जर्माच्ये प्रयोग था पति , तात र साम्बो सप्रवास्था

लांद्र वा गोलीयांद्रको जोती वा वो बता बांद, यह जील र चेर जीलको रोज बाज स अवस्थे विकास द्वारा प्रसावत सम्पर्क र उपरचीत प्रीवसायक प्रयोगको पर्व तस व पर्व र स्थापी श्रीनसर्थ प्रकारनेस । real y seeds server was one server series, usins on the differs one मा मलाका आर्थन गर्ने कने पीन व्यवसाय मा पैशा गर्न संदेको लागि अवसर्थ

प्रमाणं जनप्रमेशः । nel femane agency are true arrivar rating units strate at the बरार लग मित असोंद्र जनसबै समयम प्रशासीको, औरशोपबार सीरएको बा चिक्तिकीय सामात्र मिद्रीको, आवेशनमा प्रामेख भएको वा नभएको जुनसूके

शारिक अवस्थाताई जनाउरे छ ।

'सिक्सिक' यस परत करारमा जातिके प्रातेख संस्थेत नीमित वा निजयो प्राथमको सपस्य प्राथम औरशोपना र या सर्वती तर्ग वालती सप्ता प्रमानन STOR OPTHALMOLOGY OF OTOLARYNGOLOGY OF POPULARYNGOLOGY OF POPULARYNGOLOGY

प्राप्त व्यक्तिसाई प्रकारनेह । servere, an asse maken majory copies mange out potent by some परा गर्ने निकासमाई सकाउनेत

ा राज्य सा सरकारहरा इजाजत आवश्यक गरिएको अवस्थाना अस्पतासको रकाजन प्राप्त आश्रास्त्र स्थ्या वित्रमी, रोगी च आद्रबोट लागेको व्यक्तिलाई सर्ग गरी

 शिवको चीक्से प्रच्य पंतीकत वा स्वातक वर्धत्रस्थात वर्षित्र सेवा पन्यप्रते. (x) एक वा एकप्रांग की विकास क्रमेंकी सीकी साथ उपनित्त तकें (a) the others a cost attack of contral with contrar after small अध्यानका रुपम क्रिकेट, तरित क्रिकेट यह मा स्वास्थ ताच यह मा त्यांते. patral fram r materarous site suinfi provide surel r अवस्थक द्वाबरण र गाम्बीक्या कक्षको सम्बीचन व्यवस्थ भएको ।

NI-485

क्षण्ड १:- वर्षट्रमाको कारण साम भागम पाउने साथ : पाउनोटको परिपास nest mirror worst any feet fare different area stress and first परक करारको खण्ड २ र ६ अग्तर्गत भक्तानी गरेको वा गरीने रकम घटाई मीमांक रक्ष्य चलाती विशेष paint rice and

वर्षे जात या वृत्ते खुड़ा या वृत्ते आंखा को ज्योती वृत्तेया dista res on एउटा हात र एउटा बड़ा गमेबा.

पीमांक रक्स पर गाउन बात का गाउन क्या र गाउन जीका गाउँचा वर्ष बातको अवग गाली गर्नेमा. distanta वर्त एउटा हात वा खार गमेमा मैमांक रक्त्रको आहा एउटा अभावो ज्योपि प्रदेश वीकांत रक्ष्मको पान हाइको बडी जीता र चोर जीता गरेबा......

यस सुरह अर्लगत उपलेखन श्रीतार मध्ये एक मन्ता नहीं श्रीत भएमा विद्वेत ला प्रतिक अभिन्नो तर्गा प्रकृतिकत ताहकस्त्रो प्रीतासन प्रताक वा अभिन्नस्य वैद्याव

रकम परावर प्रशेष । सम्बद्ध ५- वर्ग स्थामी असलाता लाम : साद्यपोदको परिपास स्थलप र सर्वद्रश rehalt fathe lifes any lies fare differe out a sendt seek wordt werdt weren. र पत्नो अवकात तमातर बाज १६ मोलाको अवदिवयम कारमे रहेमा र पत अर्थांको अल सद्ध या र सम्मी असला आर्थ रहेवा बद्धानी स्थे परस

करारको सुरह ९ र २ अल्लांत भक्तारी गरिएको वा गरिने रकम ग्रहाई वीमांक or an ducke at an others size ducke a such or वींनतको तामना जारी भएको परक करारमा अत्यक्त केवाकै करा विश्वपको भएतापी वर्षत्रमात्री वाला वहे एवं व्यक्ति अवस्थाने लोग तक प्रत्य असानी गोले तक वर्त पांत प्रवासका ते. र. २०,००,००० (वीच ताव) मना बढी हतेहीत । यांकी

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ente a resignad atem ana unas ateix mun ente a relatat efte son मा बाक शहरी गर्ममा" मा सुर्ग्य ३ 'एनं स्थामी अवताता ताथ" का प्रावदाता अवस्थास लाजको चलाती गरितेक्षेत ।

परे बीमांक भारतरी पाउने, कर्न तीकिएको तांत्रज्ञरः भारमा यो बीमानेख अ हरेत तर इस प्रकृतन अन्त्य वीद्वाको अन्य वर्ग अन्य वर्ग देवीन आसी आसी साथ प्रति प्रशंसन तीतत ततेल ।

मत वैमालिको भाग-३ सामान्य अपका प्रावधानको साथै यस पत्त क tephán : ा विदान (Bacterial) संस्थान (पूर्वटनात्मक साउपोटको मात्रमसाट हो Property (परीप्तित संस्था परिक) वा अन्य की रोगको कारण व

(1) TET (AIDS-Acquired Immune Deficiency Syndrome) wit with stance and

यह पहर बरूर अल्पांत्रको दीवा देखिल हरती (४०) वर्ष उद्देश योचा अल्प हरेर र आजंग नर्गाराको बीजानाक रक्त्य स्थानपानिक रूपमा दिलो गरिने छ । यस प्राथतान अनुसार मीनाको अल्प तथा अल्प तथे मिल अपनि नारको गावि प्रा

ACCIDENTAL DEATH, DISMEMBERMENT AND PERMANENT TOTAL DISABILITY MERICAN LIFE MERICA

This Supplementary Contract is an integral part of the Policy to which it is attached and is valid only if the Supplementary Contract Form number, benefit, and appropriate premium is indicated on the Annie after less and Policy or is a networked thereon.

DEFINITIONS

"Injury" wherever used in this Supplementary Contract means accidental bodly injury occurring to the Insured while this Supplementary Contract is in force, effected only by estemal, violent and accidental means of which there is evidence of visible contaising or wound and resulting, directly and independently of all other causes in loss covered by this Supplementary Contract.

"Principal Sum" wherever used in this Supplementary Contract means the amount stated in the Schedule of Benefits. "Permanent" wherever used in this Supplementary Contract

for a period of at least twelve (12) calendar months and at the expiry of this period is beyond hope of improvement.

"Loss" wherever used herein means the Permanent total loss of

functional use or complete and permanent severance:

With reference to hand or foot: at or above the wrist or ankle joint.

With reference to Thumb and Index: at or above the metacarci

 With reference to the sight, hearing or speech: the entire and inecoverable loss of sight, hearing or speech as certified by a learned physician.

"Totally and Permanently Disabled" wherever used in this.

phalangeal joints.

in any occupation or employment for compensation or profit.

"Pre-existing Condition" wherever used in this Supplementary
Contract shall mean any physical condition that was diagnosed.

to the Effective Date of this Supplementary Contract, whether doctaned or not declared or neglociation or health statement.

"Physician" wherever used in this Supplementary Contract means a person legally licensed to practice medicine and/or supery, specializing in Cophthalmology or Collargology office supery, specializing in Cophthalmology or Collargology office than the insured or a member of the Insured's immediate family. "Hospitall" wherever used in this Soutiementary Contact means and the contract of the contract o

an establishment which meets at of the following sequirements. (1) holds a former as a hought if florenging in sequired in the country or governmental jurisdiction, (2) operates primarily for the recording, care and relatested folia, (aligned on present primarily for the recording, (aligned on the state of care in a repairable, (3) provides a Partial seal of care in an engagistic and experimental provides and relative provides and relative provides and relative supplies and relat

Section 1. LOSS OF LIFE ACCIDENT INDEMNITY: When Injury results in loss of life of the Insured within three hundred stoly five (365) days from the date of the accident, the Company will pay the Principal Sum, less any other amount paid or payable under

Section 2. DISMEMBERMENT, LOSS OF SIGHT, HEARING, SPEECH INDEMNITY: When Injury to a the Insured results in any of the following Losses within three hundred skyt five (395) days from the date of the accident, the Company will pay for the Loss of

Both Hands or Both Feet Or Sight of Both Eyes . The Principal Sum One Hand and One Foot . The Principal Sum Ether Hand or Foot and Sight of One Eye. The Principal Sum Haaring of Both Earls . The Principal Sum Speech . The Principal Sum Speech . The Principal Sum Sight of One Eye . One Half The Principal Sum Sight of One Eye . One Half The Principal Sum

In case of occurrence of more than one of the losses specified under this section, the total indemnity payable hereunder is established by adding the indemnity consequenting to each single total of the following of the card of the car

Section 3. PERMANENT TOTAL DISABILITY: When, as the result of high yard contensoring within three hundred skyf live (305) days after the date of the accident, the insured in Ideally and Perminently Disability, and such disability has continued for a period of twelve (12) consecutive months and is total, continuous and Permanent at the end of this period, the Company will pay the Principal Sum less any other amount paid or payable have section 2. The Principal Sum will be paid in one lump sum up to section 2. The Principal Sum will be paid in one lump sum up to

However, and note/thindending anything to the contrary under this policy and/or any other "Personal Accident policy, or supplementary contract issued by the Company for the Insued. the lump sum payment payable by the Company in case of Permanent Total Disability from accident shall not, under any circumstancess, exceed from emilion Nepalase Repeat (NPPE 2,000,000). The balance, if any, will be payable monthly over a particol offliere years.

LIMITATIONS AND TERMINATION OF INDIVIDUAL INSURANCE

No indemnity will be paid under any circumstances for more than one of the losses, the greatest for which provision is made in Section 1 "Loss of life Accident Indemnity", or Section 2 "Dismemberment, Loss of Sight, Hearing, Speech Indemnity", or Section 3 "Permanent Total Disability

The occurrence of any specified issulfosses in respect of a covared insured for which the full Principal Sum is payable shall at once terminate his insurance under the Policy, but such termination shall be without prejudice to any claim originating out of the accident.

In addition to the General Exceptions:

In addition to the General Exceptions islated under Part III of
the Pholicy, this Supplementary Contract shall not cover and no
supprants shall be made with respect to any loss caused by or
resulting from:

I. Bacterial infections (except progenic infections which shall
occur through an accidental cut or wound) or any other kind of
disease.

Accident caused by Acquired Intriune Deficiency Syndrome (AIDS)

EXPIRATION OF COVERAGE
The Coverage under this Supplementary Contract will expire when the Inseried addition sensity (20) vester of see and unserned when the Inseried addition sensity (20) vester of see and unserned.

when the tracined, attains serventy (70) years of age and unearned premium will be refunded on pro-sate besits. Expiration of the coverage under this provision shall be with out prejudice to any claim arising before expiration date.

तम अन्तर्गत प्रथम भरांको लागि भूतानी भएको हन्छ अनुसार हर्नेछ ।

STREET, are distributed arms, are mobiled entang squarested and are true करारते निम्न कारण वा ती संग सम्बन्धित कारणते अस्पताल अर्तालाई रखाक

- 1. पर्यक्रम साज्योज के कारणते महिक अन्य कारणबाज भएको अस्पतास भार्ती. ३. समान्य जांच श
- ४. वर्ष प्रेत कारमते र वृत्ते प्राप्ताको लोग आनेत्यसाला (SANATORIUM को यहाई आप्रीतक केन्द्र वा अस्पतालमा जुतसुकै कारण धर्मा वा कृते पीत उपचार ६. पर्व विश्वमान अवस्था,

9 THE (AIDS-Acquired Immune Deficiency Syndrome) wit written

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यक पत्रक करण अल्पांतको सीमा मैडियत पैत्रही (६४) वर्ष उमेर परेमा अल्प हरे। र आर्थन नर्शांताओं क्रीयानाव्य रक्ष्य स्थानपालिक स्थान रिक्रण गरिने वा

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यो परक करार पराराम जल मैमालेख गांग गांतल गरिएको उन्छ त्यसको आँकल भीत वालेख र प्रसानो परस सरार फाराय संदर्भ कीयालाग्रास र भावरायस कीयालाग्रास

वैज्ञाल 'अनसवी' मा उन्लेख गरेगाँड वा उपनत गर्माप गांतन गरेगाँड

weeks forest on one arrow soled only works appear often १४) प्रष्टाको साँग परीकत वित्तवीको स्थम अस्पतासम् कोको व्यक्तिसाई

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अवस्थामा वैधित जसको चोट्यटक सचीको आधार मनाग्र, ताई अन्य सर्व कारण urbs greeces uses existing a extrement arms and the exist offer रुपमा रेखिने प्रमाण भएको शाहितीक साज्योजनाई जनाजने छ ।

वर्ष विक्रमान अवस्था" यस पतन करात्मा जातीसके प्रयोग भएपीत पतन करात orn late and absolvery efecal at belavesta more freing) आवेदनमा प्रामेख भएको वा नभएको जनसङ्गे शाहितीक अवस्थालाई जनाउने छ ।

'विकास के अध्यक्ति' यह परस स्टारमा जहां हुई प्रयोग मह पाँउ different precent stores federateaux avents agreem and offers of विरामी अवस्थालई जनाउनेत. जसको उपयार बोररंग विरामीको रचना गर्रावत र अवर बारक गृहरे भरी बातल विकासको निकाल गरेको उन्छ।

"fufficient" are now across società color acrofo diface at fessal-परिवारको सारस्य बाहेक औषश्रीप्रवार र वा सालेरी गर्न काननी नपमा इज्राजन SER OPTIMAL MOLOGY IS OTTO LARVINGO LOGY IN BEHIND THE प्यक्तिसाई प्रकारनेतः।

प्रशंसन संग्रह तरेख । 'अस्प्रताल' यस परक करारमा जातिको प्रतीख भएपति तत विद्वास को सर्वतर

on of beganné agradus n may at anatomic names attempt at a particular anatomical CHARLE STOR

to strenge east fough hift at recode mital soletoni ani of-रेखरेख र औषश्रीपन्यरको लागि सञ्चालन बराको रिक्को चीक्को काल पंजीवल वा स्थलक सर्वत्रकाल सीवंद केवा प्रजारते. (x) एक वा एकपाना गति विकासक कर्मचाने चीवने प्राप्त उपनिवत साने spener arreit

 तेग प्राचान र प्रमण सर्विकत प्रीक्यात्रको लाग व्यवस्थित स्विधा भएको (c) stronger were finding white figures are at senses and the at reach प्रकारिको जिकाम र आवर्गमा करूपमा बाहेक ग्रम्मिकी प्रथम केन्द्र तथाओ, र शाहरणक उपक्रमा र साम्बीक्या कामो सर्वाचन प्रकास बामो ।

sh una ann mu rèsh ugugan ni rebrah ainmh difan belamaku आवरपकताका लागि विकित्सकको जिल्लार जिल्लामीमा अन्तरंग विरामीको रूपमा अस्त्रालाका क्षानी सामानिका अनामनिका उपलेखा क्षान अनामानो सामानिक लाक मैपित बर्ज रहेको प्रापेक हाराको तहिए, जनसमीचा प्राणेख बर जनसरको तरन अवीर (वर्तका) को लाले शहरूने ५२ (वाजल क्षण क्षक व्यक्तिने सन्तरी गर्भेड ।

बीर बैमिन एक राजाबाचा कम अबोहको लॉप बार्च ग्रोमा, ताल अबीह परचात trice feralt min proving must a a arm award of his

This Supplementary Contract is an integral part of the Policy to which it is attached and is valid only if the Supplementary Contract Form number, benefit, and appropriate premium are indicated on

"In-Patient" wherever used in this Supplementary Contract means a person who is confined in a Hospital as a registered bed patient for at least twenty-four (24) hours.

"Imjury" whenever used in this Supplementary Contract means accidental boddy injury occurring to the Insured while this Supplementary Contract is in force, effected only by external, violent and accidental means of which there is evidence of visible contasion or wound and resulting, directly and independently of all other causes in loss convenid by this Supplementary Contract

"Pre-existing Condition" wherever used in this Supplementary Contract means any physical condition that twis treated, or or which a physician was consulted at any time prior to the Supplementary Contract Effective Date, whether declared or undeclared in application or health statement.

"Medical Necessity" wherever used in this Supplementary Confract means that the medical condition of the Insured requires confinement according to a treating physician report confirming that a safe and effective treatment cannot be provided to the Insured as an Octobalent.

"Physician" wherever used in this Supplementary Contract means a person legally licensed to practice medicine andice surgery, specializing in Ophshalmology or Oblampology other than the Insured or a member of the Insured's immediate family. "Hospital" wherever used in this Supplementary Contract means an establishment which meets all of the following requirements:

(1) hotics a license as a hoopital, if licensing is required in the country or governmental justication, (2) operates primarily for the reception, care and treatment of sicil, alting or rejured persons as implaints; (3) provides 24-hour a desyrazing service by registered or graduate nurses(; 4) has a staff of one or more physicians was available at all firms (5) provides or agranized facilities of religencies and major surgical procedures; (6) a not primarily a clinic, nursing, not or convisioned here the surgical procedures; (6) and primarily a clinic, nursing.

(7) maintains necessary equipment and operating room facilities.

When, as the result of Injury while this Supplementary Contract is inforce, the Insured shall be for medical necessity confined within a Hospital as an in-patient under the continuous attendance of a physician; the Company will pay the Weekly Benefit stated in the Schedule, for each week that the Insured shall be confined therein, up to fifty-time (32) weekly.

If the Insured is confined for a portion of a week, one seventh (1/7) of the Weekly Benefit shall be payable for each day of confinement subject to the Elimination Period.

CESSIVE PERIODS OF HOSPITAL CONFINEMEN

If, following a period of Hospital confinement for which indemnity is paid or payable under this Supplementary Contract, the Insured shall be readmitted and confined as an inputative, due to the same or related causes, the Company's liability for the entire period shall be subject to the limitations applicable of this Supplementary Contract. under which the original period of confinement was

EXCEPTIONS

In addition to the General Exceptions lated in Part II of the Policy, this Supplementary Contract shall not cover Hospital confinement resulting from or related to:

(1) hospital confinement except as may be solely as a result of injury;

- cr injury.

 (2) Direct consequence of pregnancy, childbirth, abortion miscamiege

 (3) general check-ups; or
- stay in sanatoriums for whatever reason and whatever treatment;
 stay in sanatoriums for whatever reason and whatever treatment in an Avurvedic Center or Hospital for whatever.
 - reason and whatever treatment; (6) Pre-Existing conditions; (7) Accident caused by Acquired Immune Deficiency

EXPIRATION OF COVERAGE

The coverage under this Supplementary Contract will expire when the Insured, statins skip-(Mrv (B3) years of a age and unsured premium will be refunded on pro-rate basis.

Expiration of the coverage under this provision shall be with out prejudice to any claim arising before expiration date.

के पान कार प्राथम जा बीमानेख कंप बांतान गौराको तथा त्यवको अभिन

वीमालेख 'अनलबी'मा उत्लेख गरेपाँड वा उपलंड सम्पाद संतरन गरेपाँड माप

'**साउनोड**' यस परक करारमा जहांसके प्रयोग भएपाँग यो परक करार ताल रहेको constructificat sensit alcourse reduct soors used not use of soon यात्रेक मतरुपमा पात्रच, सांश्रातिक र सांह्रशास्त्रक कारणते माच तारोको, याहिरी म्प्या शिवने प्राच्य ब्राच्ये शाहितीय माराचीत्रवारं जनाउने छ ।

nel femore season" un una arrivar serbali unha serale disches ma मित अगर्व औरक्षोपकार गरिएको वा विकासकीय गालाह रिर्मूपको, आवेदरस्य प्रातिक प्रात्वी वा स्थापनी जनकर साहित्व प्रवस्तानन जनपाने स "man a messaril" on the second soled trial strain different अवस्थाताई आवश्यक उपचार, उपचार सामग्री या उपचार सेवाओ तारि मन्तानी

या प्रचार सेवाको प्रचलित तरमना यही हतेहित र बीमा तमारको अवस्थामा ofek aráze urbaub ará sunter oferali alte mé sescrita i with the the mean writing that made graphs reserved solves. अलारी योग नवाको अवस्थान, अरमचीना उलेख का अरमारको वीनिर्णा व्यक्ति वर्त सर्व वर श्रीनार्त वक्तारते स । वस्त्री स्वय र २०००, स अन्तर्वीया

प्रातेख गरिएको मध्य जन कम तन्त्र सीति तनेछ । 'श्रीवद्रीयकार क्रवंडर' यस परस करारमा जातिको प्रचेग भारती राईटरा भारती दिवित्तरे जीवा हुन दिन प्राप्त प्राप्त के विद्यालया स्टब्स वित्तराच्या जारे प्राप्तराज्ञ था विकास, राज्योंक्या, एक्स-रे को लागी एम्बलेग्स सेखा, अस्पतास, तसिङ्ग प्रपत्तर छ । तर मैमित अन्य विकासबाद पर्ण सा अधिक सूर्च बोद्धभर्ग पाउने अवस्थाना acceptate entere secondari of of the see beautier second are east

भागा गढ़ी भएको सूर्य तक्य सम्म मात्र सीमित तहते छ । 'सिक्सिक' यस परत करारमा जातिके प्रतीव संस्थी नीमित वा निजको प्राथमको सप्तर प्राथम औरशोपना र पा सर्वती तर वालती सप्ता प्रमानत MEN OPTHALMOLOGY WI OTOLARYNGOLOGY WI WHERE MEN

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ा राज्य सा सरकारहरा इजाजत आवश्यक गरिएको अवस्थाना अस्पतासको CHEST STOR आवारभत स्थमा वित्तमी, रोगी वा आद्रबोट लागेको व्यक्तिलाई भनां गरी hate r shadoward offe mount west

 हिनको चीक्की प्रच्या पंतीकत वा स्थातक वर्षत्रव्याग वर्षित्र क्षेत्रा प्रचारते x) me at meant of helpine agreet dital non relian ret (a) star allegar a agus salaigus alexanesa) mile aguitean salaon gceal

 आव्रत्यत रुपम क्लिक, तर्वत क्रिक्ट क्रिक्ट मा मा स्वास्थ्य ताथ मा मा मा त्यांने patral fram r materarous site suinfi provide surel r अवस्थक द्वाबरण र गाम्बीक्या कक्षको सम्बीचन व्यवस्थ भएको ।

व्यक्त काल औरश्रोपकार वर्ष वोश्रमत

ये परक करार ताम रहेको अवस्थामा वीचितताई तामेको प्राप्तचेदको परिपास स्वर को की रक्त (क्षेत्र भर) भना नहीं हर आहते रक्त करवतीले लोहानता हिनेहा. तर त्याची शोजदानी राज्य प्रतासकीया उपलेखित स्तरी राज्य वर्षायताको परिसाद स्वरूप हुने खुर्चको सोहभूमां सीमा भूना गुड़ी हुने हिन ।

मत बीमात्रिको भाग-४ सामान्य अपबाद प्रावधानको साथि यस परक करार असा योजनार्थ विश्वविक परियास स्वरूप हते शति (क) किटान् (Bacterial) संसमन (एडंटमान्सक प्राप्तनीटको मात्रमना

ते Propenic (परीत्पीतक शंकमत गारेक) या अन्य कर्त तेत or on som socializat out are misses at arbein our (2) secretioner furtisest six seafers black secret unbasit are fution (4) यात काले गार्टकारण प्रमान गार्टकार का गार्टकारको काला बार को और

(x) आपनीहरू, जीइनदी र एक्सरेनर प्रश्चार (ii) TOPE (AIDS-Auguired Immune Deficiency Syndrome) wit ware भागो वर्षहरा

रशावरणको अन्त

यह परक करत अन्तर्गतको सीमा मीमित सत्तरी (४०) वर्ष उमेर परेमा । abo e state enteral dissense pass apprentive exp. bort of the c

we were ween dural over oil over all lafe with until oth the प्रशंसन संगत प्रतिह ।

AMERICAN LIFE INSURANCE COMPANY

of any one accident.

the Application for said Policy or is endorsed thereon.

"Injury" wherever used in this Supplementary Contract means violent and accidental means of which there is evidence of visible contusion or wound and resulting, directly and independently of all other causes in loss covered by this Supplementary Contract.

"Pre-existing Condition" wherever used in this Supplementary for which a physician was consulted at any time prior to the Supplementary Contract Effective Date: whether declared or

Reasonable and Customary" wherever used in this Supplementary Contract means any medical charge which is necessary to treat the Insured's condition and does not exceed the usual level of charges for similar treatment, supplies or medical services in the locality where the expenses are incurred; and does not include charges that would not have been made if no

Deductible: wherever used in this Supplementary Contract payable. Such amount will be Rs. 500 or as stated in the schedule.

"Medical Expenses" wherever used in this Supplementary physician, surpeon, nurse, hospital and / or ambulance service for medical, surgical, X-ray, hospital or nursing treatment, including in the event of the insured becoming entitled to a refund of all or part of such expenses from any other source, the Company

such other source and within the limits provided in the Schedule. "Physician" wherever used in this Supplementary Contract means a person legally licensed to practice medicine and/or surgery, specializing in Ophthalmology or Otolaryngology other

"Hospital" wherever used in this Supplementary Contract means an establishment which meets all of the following requirements: (1) holds a license as a hospital, if licensing is required in the country or governmental jurisdiction; (2) operates primarily for the reception, care and treatment of sick, alling or injured persons as inpatients: (3) provides 24-hour a day nursing service by registered or graduate nurses: (4) has a staff of one or more physicians and major surgical procedures: (6) is not primarily a clinic, nursing. rest or convalescent home or similar establishment and is not other than incidentally, a place for alcoholics or drug addicts; and (7) maintains necessary equipment and operating room facilities.

ACCIDENT MEDICAL EXPENSE REIMBURSEMENT

When as the result of Injury occurring to the Insured while this Medical Expenses the Company will reimburse the necessary. Responsible and Customary Medical Expenses, 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 EXCEPTIONS

In addition to the Exceptions listed in Part III of the Policy, this made for expenses incurred in connection with:

(1) Loss caused directly or indirectly, wholly or partly by: (a) becterial infections (except pyopenic infection

shall occur through an accidental cut or wound) or any other kind of disease; (b) medical or surgical treatment except as may be necessary solely as a result of injury

(2) Dental care or surgery except to sound natural teeth as occasioned by Injury (3) Direct consequence of Pregnancy, childbirth, abortion or miscamage (4) Avuryedic, herbal and acupuncture treatment. (5) Accident caused by Acquired Immune Deficiency

EXPIRATION OF COVERAGE

The coverage under this Supplementary Contract will expire why the Insured, attains severity (70) years of age and unearne

Expiration of the coverage under this provision shall be with out prejudice to any claim arising before expiration date.

"Affire" on dignings seried upon on the st digninest orie united femal surum to sel the at sel mur city worsh selectur collises प्रशासिक मैपिकार्य प्रसादने छ ।

असामी" र "आवेदम" यस वीमानेश्वमा जातंत्रके प्रयोग भएपीन यस वीमानेश्वको

states no dischesi soled soles wrote massel userdis-प्रमोख भएको गरिवाई पकाउनेछ ।

भाग २-साम मैंना प्रत्यन भए परचात मैंना बहात रोको अबोह भित्र मैनितको मात्र भएमा

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there was the time taken in the fire present quiltle root fundatable and

free arms at altalt almost state air offs -कः जानाजान आण्डेद्राना राजदूरको साद्धभीद, आत्महत्या या त्यस्तो विशेषसको छ। यह, उत्तिकसण, विदेशी सैन्य कारबारी, वैसनस्थता वा यह जसता कार्यवारी

an offer at artifer arrain; light ter mean made wifer विराय आतंकवारी विवादताय गोला बाला आकारण, पाता मार्च, तुरार तथा न्यानो प्रवर्शना सबै वाल्याविक्या संसार लोको अवस्या वा वैदिय सालित वा यद्भ करेपीर अवस्थाना करी देशको सैरिक, प्राप्ती वा अन्य सरक्षा सेवाना

El argant feather y share at shall often save trans

বিদ্যু সম্মন্ত্রনা এই প্রতি कः वैद्यान बात-४ जनान स्थापसम्बद्धा निर्देश्य गरेको क्रोफ अन्य करे बावपान वा वाषप्रकान प्रचलनमा प्रकान गर्छ as differe expending as not expending ask sindor shows facusaments भाग तिवाको अवस्थाना या इतिस्पर्धातर, वीदातर, इन्द्र, स्थान, बाद या जात

giveriterers previous Pot Holine, Paraelidine, Bunece Jameine. अन्तरप वैधितते यस वीमातेख अन्तर्गत रावे गांतरको श्रांत करेपाँन विशेषमते अप्रसादक अल्लांन प्रतिक्षित अल्लो अस्त्रात्वक स्व कल्लाक वर अल्लो

होइन मनी प्रमाण देश गर्नपर्नेख । भाग ४-उद्याग रक्षावरण

उद्यान रक्षाचरण, मीमित चातक, चातक रतको सरस्य नथई एर्गरपमा मानको

sprantise argitatore studies all leafan releas some at last तातिकाको, क्रिकेच वा चारटाई र प्रमाणित पाइतटहारा, स्थापित र व्यवस्थित संबक्त राज्य अमेरिकाको जिलिहरी एवर शिक्ट कमाण्ड वा त्यसी प्रकारको

बार पाताबात विकिसको बारचात

মান হ-রামান হাকরাকার वर्ष सम्बोतः-वरिकांकरः ये गैमानेवः गैमा आंशान काराम जसको प्रतिनिध पाराम, परक करार, र सम्पोद्ध समेतवाद पर्ग सीमा सम्बीता परेखा।

बन्धरीको क्ले अधिकतद्वारा स्वीकत भई यह मैन्सरोखमा त्यस्तो स्वीकती color or since market warm offer all the three warm sinder. करे ऑबक्टांलई से बैसलेख परिवर्तन गर्न स सवका करे प्रकार छट विने अदिकार हुने ग्रेन ।

अप्रैय अन्तर्गी अरको अरक्षाया जाने गरिएको छ । क्रमार्थितार अधिक स्थानार वर्ष असर वर्षी क्षत्रै प्रति तथा वीवित्तारा समानावा

वा प्रोपणामा भारत विकास विरूपको पाईएमा कम्पनीते श्रीमातेषाताई तार fafetfig & per miles :

me fafe, st dranke semetar politice our fafe life our elec-तार भई सकेरोड यो वीमानेख त्रीवकरत मित सम्म बतात त्रातेख र उत्तरस्था ment operat alams, channelly rejet, a capitatan, menters mass पाल रात सक्तेष्ठ । पीमाका समै अर्थाहरू मीमितको आवासमा विद्यालको no on selt little and it some after a

afterent "abstract water" e um discheser une mit eré i प्रकार को अंतरमा और कम्परीको सहमारिया, त्रीवकरणको सम्प्रमा ता अंद्रम मलानी पने लॉक्सको अबोहको लॉप यो पीमानेख लॉफ्करण गर wint or the order original algorithm apparent represent respect to अंतरमा यो गीमानेख गीमाराज मतारी भएको अर्थात्रको समाधिमा अध्य

plement audio utile solutile e lantes d'animent ette que मैमाराक परपात बक्येता इत आहते प्रत्येक मीमा राज्य मस्तातीका सांच matien un ferrat phonesis quie freits i un suficar d'ambs 'रह' हरे प्रावदान अन्तर बीमानेख रह नगरिएको भए बीमानेख लग रहा

त । तर प्रोक्ताको अवित विव तत्त्वाका तत्त्वाको वर्त और भ्राप्त त्वाच व्यव वक्यीला खेको बीमा गान्व गानी भक्तानी गता घटछोनेछ । शामीको सकता: मैमानेखद्वात स्थापरण गरिएको वने श्रांत भएमा शामीकं मनावित्र माण्डिक को सको चोडो समयोगर कम्परीताई रिनपर्ने छ । यह रूपना रिनर्पने हा। वैधिनहान सा निजयो तर्रायाई वैधितासई परिचान गराइने

या करणीको कने ऑडकार प्राप्त ऑडकारीलाई विश्वके सचनालाई करणीला ferral man africa : and margame entitude event work worden according entities of extendi प्रमाण देश गर्न आवश्यक पूर्व कालमाल प्रचान्ध्र ग्रहापूर्व छ।

हानी पाराम कराइने म्याह: पर्गलपा मोताबो हानी प्रात्मावक र आंच्ये Infer your raph of your latest the (so, for far accepts यसाइन परेंद्र । यस्त्री समय दिन प्रमाण प्रस्तत गर्न संसव नशाको कारणां बक्रा एक कर्माबाच्या सभी बार बने वा सरने तेन । तर और असवी सदस्य तीत वर्ष प्रीव समाईते करी प्रमाण सामात्मतमा स्वीकार - गरिते क्षेत्र ।

 सभी अलागीको अर्थाहः यस मीमानेस अर्थाता विकासको अलागी जो plenat me min abut ster are tree me accetant men जनक हते श्रीतको प्रमाण प्राप्त हताताच मलाती विद्वतेष्ठ । किरतावणी मलाती ait offe area over ait all muses oftent linker commit sticker रीर माधिक रुपमा भक्तानी विष्टतेखा र बीमाको अल्पमा करे भक्तानी बक्बील क्षेत्रा कम्पनीलाई सलीपजनक हुने लिखन प्रमाण प्राप्त भएसी भक्तरनी गरिनेखः।

सामात काराई मतानी हर गैमितनो माप गापा पार्टन ताम गीमा आवेदनाय वा नान्यन्यान कार्यनी ताल और तरिवाको क्रेसे अनुप्रोत्तया वीर्यक्रमे इच्छाएको व्यक्तिने पाउने छ । अन्यस मीमा ऐन २०४९ को तका ३० अन्य

an mane wear agreem enterenal wears alread at th भक्तरीते क्यारीवाई भक्तरीको हर सम्म समित्रकाट मक नगउनेछ।

PART I - DEFINITIONS ured" wherever used in this policy means the propose insured as stated in the Application and who is more than

eighteen (18) years and not more than fifty nine (59) years of

recreedure and "Application" wherever used in this Policy manny the Application and the Schedule of Barwitis or Dolog Specification Schedule which are attached hereto and which form

Principal Sum" wherever used in this Policy means the amount

PART II - BENEFIT

LOSS OF LIFE - If the Insured named in this Policy dies after the Policy commencement date and with in the term of this policy. the face amount will be paid as per the provision and condition

PART III - GENERAL EXCEPTIONS

This policy does not cover or no payment shall be made in respect to: 1) Any loss caused by or resulting from

a) Intentionally self-inflicted injury, suicide or any attempt thereat. white same or insame; b) If involved in war invasion, art of foreign anomy hostilities or warlike operations (whether war be declared or not), mutiny, riot, civil commotion strike civil war schellon revolution insurrection: Assault or murder; terrorism act, shelling, sniping, ambushes, and all acts of similar nature; or any period, the Insured is serving in the Armed Forces of any country, whether in peace or war

c) Congenital anomalies and conditions arising out of or resulting d) Pre-existing Conditions:

a) The Insured is flying in any aircraft or device for perial nevigation b) The Insured is participating in any organized sporting activity including professional or semi-professional aports: or nountain climbing or pot holing, paragliding, bungee jumping,

parachuting or scube diving The Insured shall, if so required, and as condition precedent to way arise under or through any of the excepted circumstances

or causes under this Policy PART IV - FLYING COVERAGE

Coverage as respects flying is limited to loss occurring while the Insured is riding solely as a passenger, not as an operator or crew member, in, boarding, or alighting from:

1 - certified passenger aircraft provided by a commercial airline flight, and operated by a properly certified pilot flying between duly - any transport type aircraft operated by the Military Airlift

air transport service of duly constituted governmental authority of the recognized government of any nation anywhere in the world. PART V - UNIFORM PROVISIONS

1 - ENTIRE CONTRACT - CHANGES: This Policy, together with the Application, a copy of which is attached hereto and made a

No change in this Policy shall be valid until approved by an officer of the Company and unless such approval be endorsed hereon or attached hereto. No agent has authority to change this Policy or to waive any of the provisions of this Policy.

declarations made in the Application for insurance, and in consideration of the payment in advance of the premium specified Concealment of facts or false statements in the deci made by the insured which affect the acceptance of the risk

by the Company shall invalidate the Policy from its inception. 3 - EFFECTIVE DATE: This Policy takes effect on the Eff

Date stated on the Schedule of Benefits. After taking effect this Policy shall continue in effect until the Renewal Date and may continue in effect thereafter subject to the "Grace Period" and shall begin and end at 12:01 A.M. at the residence of the Insured.

4 - RENEWAL CONDITIONS: This Policy may be renewed with premium shall be at the Company's premium rate in force at the time of renewal, subject to the "Grace Period" and all other term and conditions of this Policy. Unless renewed as herein provided

premium has been paid, subject to the "Grace Period" 5 - GRACE PERIOD: A grace period of thirty one days (31) day on annual, semi-annual and quartely policies will be granted for

the Policy has been cancelled in accordance with "Cancellation" However, if loss occurs within the Grace Period, any premium then due and unpaid will be deducted in settlement 6 - NOTICE OF CLAIM: Written notice of claim must be given

to the Company within ten (10) 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 to the Company. Written notice of claim given by or on behalf of the Insured to the Head Office of the Company, or to any authorize official of the Company with information sufficient to identify the Insured shall be deemed as notice to the Company.

7 - CLAIM FORMS: The Company, upon receipt of a notice of claim, will furnish to the claiment such forms as are usually 8 - TIME FOR FILING CLAIM FORMS: Completed claim form

and written proof of loss must be furnished to the Company within proof within the time required shall not invalidate nor reduce any claim if it was not possible to give proof within such time. However generally no proof will be accepted if furnished later than three 9 - 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 upon receipt of due written prop of such loss satisfactory to the Company. Subject to due written proof of loss all accrued benefits for loss for which this Police provides periodic payment will be paid monthly and any balance remaining unpaid upon the termination of liability will be paid upon receipt of due written proof satisfactory to the Company 10 - TO WHOM INDEMNITIES ARE PAYARI E- Indumnity if

any, for loss of life of the insured is payable to the Beneficiary for such Insured named in the Application or in any subsquen Endorsement issued by the Company, otherwise to the legal hei of the Insured as per Section 38 of the Insurance Act 2049.

Any payment made by the Company in good faith pursuant to

- er frammet auftragt manife de diamine processes mit example aufer. we diamine all mateurs diamona perch manut accord diaminest accord परिवर्तन गर्न या बीमानेसमा अन्य कने परिवर्तन गर्न इच्छाएको व्यक्तिको सहस्रोत आपरयक होग्रीत ।
 - १२. इच्छाइएको व्यक्ति परिवर्ततः बन्यगीओ सहस्रोत अनुसार औपचारिक स्थान कम्परीको अहिक्तद्वारा अनुमोदन नगरिएसम्म यस मीमानेख अर्लगत इच्छाइतको व्यक्ति परिवर्तन गरिएको क्रा कम्पनीलाई बंध्यास्थक हरेछैन ।
 - 15. कामृत्री कारकाही: यस मीजानेख अन्तर्गत सभी सञ्चनी कृते वरतनी या न्यांयक कार्यकारी गर्नपूर्व बीम्स छैन २०४९ अनवार हरेखा।
 - १४. उमेर डाईमा: मीनिजनो उमेर गतत उलेख गीराको पाईएमा मन मैपालेख
 - गामने स्त्री प्रमेरको लागि खान्ने सन्बन्धित रचन अनसार हरेख । गीनितको उद्देश काला उपलेख बालको अवस्ताहरू र वर्षि वैरोहरूको सारी उद्देश बालका यस मीमानेख अन्तर्गतका जीविम त्यापतम ताले मामा या मीमानाज वा distributed with the state of t बीरम नतीको अर्थादका लागि कम्पनीको सामित्व त्यानी तक्षावरण नगरिएको रिकार वर्त सम्ब मात्र सीमित हरेखा
- १<u>८. हम्मान्तरमः</u> यस वीमानेस् अन्तर्गत वर्तयोग हरतान्तरम्, हरतान्तरमको सिक्षतको मूल वा प्रतिनिधि कम्परीमा तबुकाहर सम्म कम्परीको तथि बारमान्यक हरेक्केन । क्रम्परीते हस्तान्तरमको फेइना सम्बन्धी करे पाँत विम्मेकारी तिले क्रिन ।
 - १६. देशासा परिवर्तन: वैधिताको देशासा होने वने योग परिवर्तन को अस्तिकार्यनको appfred allege areast force or ole different appfiel बढ़ी खतरापणे पेशाको स्थाना वर्षिकरण गरेको पेशामा पेशा परिवर्तन गरे प्रश्वान का आजंकको तर्गत त्याको बोर्गकन करे देशा संदर्शन कर्य तथा भारको श्रांतको लागि यस बीमानेख अन्तर्गत पाउने लाम को त्यो अंश मात्र पेशाको लागि निर्धारित बीमालान वर अनवार कायम हत आहते छ र जन

acceptant besites been fare and accepts a

- als dilards where publics word better applied white कम खुलरनाक पेकामा परिवर्तन गरेमा र कम्पनीताई त्याली परिवर्तनकी प्राचन प्रथम प्राप्ता कारणीये सीति श्राप्तान वीद्यानात प्राप्ताने स र वेना परिवर्तन भएको मिति वा त्यस्तो प्रमाण प्राप्त भएको मिति पश्चि समति आहते र कम्पनीते कमाई नसकेको समानपातिक बीमानाक दिलो गर्नेछ ।
- यो प्रावदान ताल गयां कम्पनीते श्रतिपति गर्नपर्ने घटना-सटन अगादि at their ofergriesh upon order light uses write over rival their बर्विकरण र बीमालान्य वर अनुवार गरिने हा ।
- १७. बीमानेस प्रमानस्थाने पातमः गीमान्त्रो तर्शनात यस मीमानेसमा अने प्रीत प्रधानक जानजान पातन नदापा यस अन्तांत्रस सहै सम्बद्ध प्रदा प्रते 12.1

- 1c. बीमारिक्सी अपन te to all alternities freezencia selecte service facilitate service orbits can 'मोतलाको अर्थात' प्रावतानको प्यक्तमा बाहेक वीमानूनक मृताली भएको अव्योको अनिय विस्ता र का नीवितको नीमा समान हते सबैदना
- efemal fateur i te.२ अमेरिकन लड्डक इन्प्लेटिना कमानी, नेपाल शाखालाई लाग हने नेपालको प्रचलित करे कालर या अन्य करे देशको प्रचलित कारतको प्रोत्सका लागि आवस्यक परेको खन्द्रमा प्रात्कको अमेरिकीमा निर without filters (US or Non -US Status) worst green वीमा करत रह गर्न सकोछ । विशिष्ट स्थ्या नेपालको प्रचीतत कारताते वीमानेख खाताबाद रकम भक्तानी शेक्स तथन निषेत्र गरेको वा खाताको feare some finbs that a result settle account or orie. प्राप्त वर्ग नव्यक्तिको अवस्थामा बीमको त्यवती कता रह भएको fafeit our for fax front durinest wer are our on of

बाता रूप गर्न वसेतः।

- भागा तत्त्वस्थात कम्पतीते विराजी विकास अतसार कम्पतीञ्चल वीजाताक भूतारी स्वीवार र वीमानेख प्रशंगरमते गर्ध मानो प्रशंगरमको मित परचात भएको पाद्रचीट या अस्वस्थताको परिणाम स्वरूप हते श्रीतको मात्र बीमानेख प्रत्यंगरण एतं वर्षिनेछ ।
- बालनको पालक: पीमानेख लग मिरिया यस पीमानेखास को प्रावहात digning such air result under generate affectual affectual property प्रयोजन कानन समेरियम होने गरी संबोधन गरिनेख ।

विशेष प्रावदानस

(परक करारताको लाहि पुत्रसल सन्दर्भस लाह हरे।

- साम मिति स्थान: वर्ग पाँत पतक करार शरू हो मितिया मैथित अस्पताल मत्रां रहेको जरान्य जाको सा सन्दे साथी जन्मानी पाप गरी रहेको अवस्थापा स्रो परक करत तामाने क्रिन : बीमितनो अस्पतात भनो, असलात वा ग्रामी भलानी त्यसतो परक करार लाग हरेछ ।
- सामात करवाई भक्तानी हो। गींमतको मात्र गांचा पाईने वने साथ गीमा आहेरत्या वा लग्जन्यान व्यवसी वात आहे तरिवालो को अन्योगन्या वीदिन्तरे इंब्ह्याको व्यक्तिने पाउने छ । अत्यस मीमातको मीमा रेन २०४९ को एका 1# वर्षात्रम् जनगीवसस्थि प्रजनेत । अप स्त्री सादनम् वैद्यानसर्थ क्रमानी गरिनेख ।
 - यस व्यवस्था अनुसार कम्पनीहार सर्वाचनसम्बो आहरमा गौरएको वनै पनि प्रस्तरीते व्यवस्थातं प्रस्तरीको वद स्वय स्वीक्ष्यक यस सम्प्रतेत ।
 - fullecenter after an standar series ark and forester risk अवस्थामा कम्परीते आफर्त सूर्वमा पैतिमताई पातेको बस्तत र प्यवातिक स्ट्रा अवश्यक का अनवार प्रस्कृतक अधि तराज सबीत र प्राप्त वराव कारतारे रिफेश तपरेको अवस्थामा शाव परिश्राण समेत गराइत सब्बेख । रह: बम्प्लीले क्ले पॉन समस्या रह साम हते मिति प्रालेख भएको लिखत
 - क्षणा बीमानेख माणिकार्य पुराएए वा बन्मीको अस्तिख अन्तरको देशानामा पद्धार बन्दारको वा पद्धारको विशेषो कर्मीमा ५४ विन पद्धि विश्व लाकाने तरि को पान करूर अल्प तर्न सक्तेत । वीका रह बारको अक्तवाका कम्मीते अनंत गरी तक्षेत्रो वीमितते चनाएको वीमानान समानपांत्रक बरमा प्रधानिक चानी दिल्ली वर्तिन स । ब्रह्मानिक प्रत्य बराउनी रह सर्व त्याती रह हत अन्या असमें प्रत्यान हते कते सभी पाँत प्रयोगहरोहत हतेग्र ।
- मीबत प्रश करे पाँत सबस्या परक करार रह गरिएवा आर्थित मैजा शाक सो समस्या प्रयोशन कम्पनी को Short rate table को आधारमा गणना गरिने

11 - CONSENT OF BENEFICIARY: Consent of the Beneficiary, if any, shall not be requisite to assignment of this Policy, or to change of beneficiary or to any other changes in this Policy.

12 - CHANGE OF BENEFICIARY: No change of beneficiary under this Policy shall bind the Company, unless consent thereto

is formally endorsed thereon by an officer of the Company.

13 - LEGAL ACTIONS: Legal action will comply Subject to

4.4 MISTATEMENT OF AGE: If the age of any, Insured has been mastated, at amounts payable under the Privity shall be such as the premium paid by the Insured would have purchased at the conered age, in the sevent the age of the Insured has been mastated, and if according to the correct age of the Insured, the course provided by the Policy would not take become effective, or operations, then the lacked by of the Company charge has the limited to the Insured, the Insured, the Insured in the Insured in one of the Insured in the Insured in one digible for converge shall be limited to the Insured in one digible for converge shall be limited to the

refund, upon written request, of all premiums paid for the period not covered by the Policy.

15 - ASB(SMEET: No assignment of interest under this Policy shall be binding upon the Company unless and until the written original or a duplicable thereof is filed with the Company. The Company does not assume any responsibility for the validaty of

16 - CHANGE OF OCCUPATION: If the Insured sustains a loss other having changed occupation to one classified by the Corpeyor as more hazardess than that stated in the Application or white doing, for companisation, amylting partitioning to an occupation oc classified, the Corpeyor with pay only such portion of the indiminishal provided in this Policy as the previous partition of indiminishal provided in this Policy as the previous partition of the indiminishal provided in this Policy as the previous partition of the Company for such more hazardesid occupation;

If the Invaried charges occupation to one classified by the Company sales has hazalous than that stated in the Application, the Company, upon mosely of proof of such charge of occupation, the Company, upon mosely of proof of such charge of occupation proportion of the company of the company of the company of the proportion of the company of the company of the company of the form of the company of the company of the company of the the promise makes the company of the proposition and the presented makes the company of the properties of the properties of the occupation of the present of the loss for which the Company of the the company of the properties of the properties of the occupation of the loss for which the company of the company of the company of the properties of the properties of the company of the properties the the properties the the properti

occupation.

17 - COMPLIANCE WITH POLICY PROVISIONS: If the Insured intentionally fails to comply with any of the provisions contained in this Policy shall invalidate all claims hereunder.

18 - TERMINATION OF POLICY:

18.1 This Policy will terminate on the earliest of the following dates: (a) the last day for which premium has been paid except as provided by "Grace Period", and (b) the latest date of expiration of coverage of the Insured when applicable.

18.2 The Insurer can larminate this insurance contract in the event that the client is not providing the appropriate proofs residued to US or cours! Status when required for the purpose under the prevailing laws of Nepal or any other country subjections, in the course of the propriate properties of the propriate properties of the propriate properties of without the properties of the account or prohibits to forward that details of the account and not in the position to clean the waiter of such local laws the insurer will gay the Paid-Up Walas of the policy white 15 days from the said or cleanable given of the policy white 15 days from the said or cleanable given the properties of the properties of the properties of the properties of the policy white 15 days from the said or cleanable given the properties of the proper

19 - REINSTATEMENT OF POLICY: When this Policy terminates by reasons of non-payment of premium, may subsequent of company and at the Company's option, shall only cover loss resulting from injury sustained or sichness commencing after the ability of the premium of the company and the co

20 - CONFORMITY WITH STATUTES: Any provision of this Policy which, on the Policy effective date, is in conflict with the statutes of the jurisdiction in which this Policy is delivered in hereby amended to conform to the minimum newspaneths of such statutes.

SPECIAL PROVISIONS

(SUPPLEMENTARY CONTRACTS WHEREVER APPLICABLE)

 POSTPONEMENT OF EFFECTIVE DATE: No insurance provided by any Suppliamentary Contract shall biscome effective if the Insurant is hospital confined, disabled, or sensiving payment for a claim when such insurance would otherwise take effect. The coverage on such prescribed title effect thing-one (31) days after such hospital confinement or disability terminates, or payment of claim casses, which even it the later.

2.TO WHOM INDEMNITIES ARE PAYABLE: Indemnity, if any, for loss of life of the Insured is poyable to the Bendiclaryles) for such incaused named in the Application or in any subsequent Endorsment issued by the Company, otherwise to the legal heir of the Insured as per Section 36 of the Insurance Act 2049. All other Indemnities of the Supplementary Contract, are payable to the Insured, if firing.

Any payment made by the Company in good faith pursuant to this provision shall fully discharge the Company to the extent of the payment.

MEDICAL EXAMINATION: The Company, at its own expense, shall have the right and opportunity to examine the insused when and as others 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.

4.CANCELLATION: The Company may cancel this Succlementary

Control of any time by written rottle delivered to the Course, or maled to the last address as shown by the records of the Course, stating when, not less than fitten (15) days thoreofte, such cancellation shall be effective. In the event of cancellation the correpany will return promptly the pro-value unearmed previous protion of any premium exclusity proble by the Insured. Cancellation of this Dopplementary Contract by the company shall be without psyclicia to any claims originating therein.

In the event this Supplementary Contract is cancelled at any time by the Insured, the earned premium shall be computed in accordance to the short rate table used by the Company at the time of cancellation.

दुर्घटना मृत्यु, अंगभंग दृष्टि श्रवण वा वाक् शक्ति गुमेको र पूर्ण स्थायी अशक्तता लाभ (आजीवन आय)

अमेरिकन लाईफ इन्स्योरेन्स कम्पनी (ALICO) द्वारा जारी गरिएको

यो पूरक करार फाराम जुन बीमालेख संग संलग्न गरिएको हुन्छ त्यसको अभिन्न अंग हुनेछ र यसको पूरक करार फाराम नम्बर, बीमालाभहरु र आवश्यक बीमाशुल्क बीमालेख "अनुसूची" मा उल्लेख गरेपछि वा उपयुक्त सम्पुष्टि संलग्न गरेपछि मात्र बैध हुनेछ ।

परिभाषाहरु

"मासिक लाभ" यस पूरक करारमा जहाँसुकै प्रयोग भएपिन अनुसूचीमा उल्लेखित मासिक लाभ रकमलाई जनाउनेछ ।

"धाउचोट" यस पूरक करारमा जहाँसुकै प्रयोग भएपनि यो पूरक करार लागु रहेको अवस्थामा बीमित जसको चोटपटक दावीको आधार बन्दछ, लाई अन्य सबै कारण बाहेक मूलरुपमा बाह्य, सांघातिक र दुर्घटनात्मक कारणले मात्र लागेको, बाहिरी रुपमा देखिने प्रमाण भएको शारिरीक घाउचोटलाई जनाउने छ ।

"स्थायी" यस पूरक करारमा जहाँसुकै प्रयोग भएपिन पूर्ण रुपमा उपचार नहुने किसिमको क्षति जुन निरन्तर कम्तिमा बान्ह (१२) महिनासम्म कायम रहन्छ र जसको यस अवधिको समाप्ती पश्चात पिन सुधार हुने कुनै सम्भावना रहदैंन, लाई जनाउनेछ ।

"क्षति" यस पूरक करारुमा जहाँसुकै प्रयोग भए पनि - हात र खुटाको सम्बन्धमाः नाडि वा गोलीगाँठाको जोनी वा सो भन्दा माथि, बुढी औंला र चोर औंलाको सम्बन्धमाः हत्केला र औंलाको जोनी वा सोभन्दा माथि, दृष्टि, श्रव्य र वाक् सम्बन्धमाः दृष्टि, वाक् वा श्रव्यको चिकित्सक द्वारा प्रमाणित सम्पूर्ण र अपुरणीय प्रक्रियात्मक उपयोगको पूर्ण इास वा पूर्ण र स्थायी क्षतिलाई बुकाउनेछ ।

"पूर्ण र स्थायी असक्त" यस पूरक करारमा जहाँसुकै प्रयोग भए पनि बीमित आय वा मुनाफा आर्जन गर्ने कृनै पनि व्यवसाय वा पेशा गर्न असमर्थ हनलाई जनाउनेछ ।

"पूर्व विद्यमान अवस्था" यस पूरक करारमा जहाँसुकै प्रयोग भएपनि यो पूरक करार लागु मिति अगांडि जुनसुकै समयमा पत्तालागेको, औषधोपचार गरिएको वा चिकित्सकीय सल्लाह लिईएको, आवेदनमा उल्लेख भएको वा नभएको जुनसुकै शारिरीक अवस्थालाई जनाउने छ।

"चिकित्सक" यस पूरक करारमा जहाँसुकै उल्लेख भएपनि बीमित वा निजको परिवारको सदस्य वाहेक औषधोपचार र/वा सर्जरी गर्न कानूनी रुपमा इजाजत प्राप्त OPTHALMOLOGY वा OTOLARYNGOLOGY मा विशेषज्ञता प्राप्त व्यक्तिलाई वृक्ताउनेछ ।

"अस्पताल" यस पूरक करारमा जहाँसुकै उल्लेख भएपिन तल दिइएका सबै शर्तहरु पूरा गर्ने निकायलाई बुभाउनेछ

- (९) राज्य वा सरकारद्वारा इजाजत आवश्यक गरिएको अवस्थामा अस्पतालको इजाजत प्राप्त.
- (२) आधारभुत रुपमा विरामी, रोगी वा घाउचोट लागेको व्यक्तिलाई भर्ना गरी रेखदेख र औषधोपचारको लागि सञ्चालन भएको,
- (३) दिनको चौविसै घण्टा पंजीकृत वा स्नातक नर्सहरुद्वारा नर्सिङ्ग सेवा पुऱ्याउने,
- (४) एक वा एकभन्दा वढी चिकित्सक कर्मचारी चौविसै घण्टा उपस्थित रहने व्यवस्था भएको.
- (५) रोग पहिचान र प्रमुख सर्जिकल प्रक्रियाहरुको लागि व्यवस्थित सुविधा भएको,
- (६) आधारभुत रुपमा बिलिनिक, नर्सिङ्ग, बिश्राम गृह वा स्वास्थ्य लाँभ गृह वा त्यस्तै प्रकृतिको निकाय र आकस्मिकरुपमा वाहेक दुर्व्यसनी उपचार केन्द्र नभएको, र
- (७) आवश्यक उपकरण र शल्यिकया कक्षको समृचित व्यवस्था भएको ।

लाभहरु

खण्ड १:- दुर्घटनाको कारण मृत्यु भएमा पाउने लाभ : घाउचोटको परिणाम स्वरुप, दुर्घटना भएको तीन सय पैंसठ्ठी (३६४) दिन भित्र वीमितको मृत्यु भएमा कम्पनीले यसै पूरक करारको खण्ड २ र ३ अन्तर्गत भुक्तानी गरेको वा गरीने रकम घटाई यसै पूरक करारको लाभको अवधी खण्डमा उल्लेख भएवमोजिम मासिक लाभ भुक्तानी दिईनेछ ।

खण्ड २:- अंगभंग, दृष्टि, श्रवण वा वाक् शक्ति गुमेमा : घाउचोटको परिणाम स्वरूप, दुर्घटना घटेको तीन सय पैसठ्ठी (३६४) दिन भित्र बीमितलाई तल उल्लेखित क्षति भएको अवस्थामा कम्पनीले यसै पूरक करारको लाभको अवधी खण्डमा उल्लेख भए बमोजिम निम्नानुसार भुक्तानी दिनेछ ।

दुवै हात वा दुवै खुट्टा वा दुवै आँखा को ज्योती गुमेमा	मासिक
एउटा हात र एउटा खट्टा गुमेमा	मासिक

एउटा हात वा एउटा खुट्टा र एउटा आँखा गुमेमा	. मासिक
लाभ दुवै कानको श्रवण शक्ती गुमेमा	मासिक
लाभ बाक् शक्ती गुमेमा लाम	मासिक
कुनै एउटा हात वा खुट्टा गुमेमा मासिक लाभ एक आँखाको ज्योति गुमेमा मासिक लाभ हातको बुढी औला र चोर औला गुमेमा मासिक लाभको ए	को आधा

खण्ड ३:- पूर्ण स्थायी असक्तता लाभ : घाउचोटको परिणाम स्वरूप र दुर्घटना घटेको मिति देखि तीन सय पैंसष्टी (३६५) दिन भित्र बीमित पूर्ण र स्थायी रुपले असक्त भएको अवस्थामा र यस्तो असक्तता लगातार बान्ह (१२) महिनाको अवधिसम्म कायमै रहेमा र यस अवधिको अन्त सम्म पूर्ण र स्थायी अशक्तता जारी रहेमा कम्पनीले यसै पूरक करारको खण्ड २ अन्तर्गत भुक्तानी गरिएको वा गरीने रकम घटाई मासिक लाभको रकम भुक्तानी दिइनेछ ।

सीमाहरु

खण्ड १ "दुर्घटनाको कारण मृत्यु भएमा पाउने लाभ" खण्ड २ "अंगभंग, दृष्टि, श्रवण वा वाक् शक्ती गुमेमा" वा खण्ड ३ "पूर्ण स्थायी असक्तता लाभ" का प्रावधानहरु अन्तर्गत अधिकतम लाभको व्यवस्था भएको एक भन्दा बढि क्षतिको लागि कुनै पनि अवस्थामा लाभको भक्तानी गरिनेद्धैन ।

लाभको अवधि

यस पूरक करारको 'लाभहरु'को खण्ड २ र ३ अर्त्तगतका लाभ प्राप्त गर्न वीमित स्वयं जीवित भएमा निज जीवित रहेसम्म वा कम्तीमा दुइ सय चालिस (२४०) मासिक लाभ भुक्तानी गरिने छ । यदी वीमित २४० मासिक लाभ प्राप्त गर्न जीवित नरहेमा २४० मासिक लाभवाट वीमितले भुक्तानी लिइसकेको मासिक लाभ घटाई बाँकी मासिक लाभ निजको उत्तराधिकारीलाई भुक्तानी दिइने छ ।

यस पूरक करारको 'लाभहरु' को खण्ड १ अन्तर्गतको दावी हुने घटना घटेको मितिमा इच्छाइएका व्यक्तिको उमेर १६ वर्ष पुगेको भएमा इच्छाइएको व्यक्ति जीवित रहेसम्म वा कम्तीमा दुईसय चालिस (२४०) मासिक लाभ भुक्तानी गरिनेछ । यदी इच्छाइएको व्यक्ति दुईसय चालिस (२४०) मासिक लाभ प्राप्त गर्न जीवित नरहेमा दुईसय चालिस (२४०) मासिक लाभ प्राप्त गर्न जीवित नरहेमा दुईसय चालिस (२४०) मासिक लाभ मध्य बाँकी रहेको मासिक लाभ निजको उत्तराधिकारीलाई भुक्तानी दिइनेछ ।

इंच्छाइएको व्यक्ति, क्षति भएको मितिमा अठार (१८) वर्ष उमेर नपुगेको भए कम्पनीले दुईसय चालिस (२४०) महिनाको मासिक लाभ कानूनी संरक्षक मार्फत उ अठार वर्ष नपुगेसम्म भुक्तानी दिनेछ । इंच्छाइएको व्यक्ति अठार (१८) वर्ष पुगि सकेपछि दुईसय चालिस (२४०) महिना मध्ये बाँकी रहेको मासिक लाभको भुक्तानी सिधै इंच्छाइएको व्यक्तिलाई गरिनेछ । यदि इंच्छाइएको व्यक्ति दुईसय चालिस (२४०) मासिक लाभ भुक्तानी प्राप्त गर्न जीवित नरहेमा बाँकी मासिक लाभहरु निजको उत्तराधिकारीलाई भुक्तानी गरिनेछ ।

अपवादहरू

मूल बीमालेखको भाग-३ सामान्य अपवाद प्रावधानको साथै यस पूरक करार अन्तर्गत निम्न क्षति रक्षावरण गरिने छैन र निम्न अवस्थाको लागि कृनै भुक्तानी दिईनेछैन :

- (१) किटाणु (Bacterial) संक्रमण (दुर्घटनात्मक घाउचोटको माध्यमबाट हुने (Pyogenic (पूर्योत्पत्तिक) संक्रमण बाहेक) वा अन्य कुनै रोगको कारण वा परिणाम स्वरुप भएको क्षति
- (२) एड्स (AIDS-Acquired Immune Deficiency Syndrome) को कारणले भएको दुर्घटना,

बीमाको अन्त्य

पुरै मासिक लाभ भुक्तानी गर्नु पुर्ने कुनै क्षति हुनासाथ यो पूरक करारको अन्त्य हुने छ । तर यस्तो समाप्ती जुन दुर्घटनाको कारण क्षति भएको हो त्यसबाट उत्पन्न हुने कुनै दाबी प्रति पूर्वाग्रह रहित हुनेछ ।

यस पूरक करार अन्तर्गतको बीमा बीमित सत्तरी (७०) वर्ष उमेर पुग्नासाथ समाप्त हुनेछ र आर्जन नगरिएको बीमाशुक्क रकम समानुपातिक रुपमा फिर्ता गरिनेछ ।

ACCIDENTAL DEATH, DISMEMBERMENT AND PTD ANNUITY (Life Time Income - LTI)

ISSUED BY

AMERICAN LIFE INSURANCE COMPANY

This Supplementary Contract is an integral part of the Policy to which it is attached and is valid only if the Supplementary Contract Form number, benefit, and appropriate premium are indicated on the Application for said Policy or are endorsed thereon.

DEFINITIONS

"Monthly Benefit" wherever used in this Supplementary Contract means the monthly benefit amount stated in the Schedule of Benefits.

"Injury" wherever used in this Supplementary Contract means accidental bodily injury occurring to the Insured while this Supplementary Contract is in force, effected only by external, violent and accidental means of which there is evidence of visible contusion or wound and resulting, directly and independently of all other causes in loss covered by this Supplementary Contract.

"Permanent" wherever used in this Supplementary Contract means total irremediable loss which has continued uninterruptedly for a period of at least twelve (12) calendar months and at the expiry of this period is beyond hope of improvement

"Loss" wherever used herein means the Permanent total loss of functional use or complete and permanent severance:

- With reference to hand or foot: at or above the wrist or ankle joint.
- With reference to Thumb and Index: at or above the metacarpi phalangeal joints.
- With reference to the sight, hearing or speech: the entire and irrecoverable loss of sight, hearing or speech as certified by a licensed physician specializing in Ophthalmology or Otolaryngology.

"Totally and Permanently Disabled" wherever used in this Supplementary Contract means the Insured is unable to engage in any occupation or employment for compensation or profit.

"Pre-existing Condition" wherever used in this Supplementary Contract shall mean any physical condition that was diagnosed, treated, or for which a physician was consulted, at any time prior to the Effective Date of this Supplementary Contract; whether declared or not declared on application or health statement.

"Physician" wherever used in this Supplementary Contract means a person legally licensed to practice medicine and/or surgery, specializing in Ophthalmology or Otolaryngology other than the Insured or a member of the Insured's immediate family.

"Hospital" wherever used in this Supplementary Contract means an establishment which meets all of the following requirements:

(1) holds a license as a hospital, if licensing is required in the country or governmental jurisdiction; (2) operates primarily for the reception, care and treatment of sick, ailing or injured persons as inpatients; (3) provides 24-hour a day nursing service by registered or graduate nurses; (4) has a staff of one or more physicians available at all times; (5) provides organized facilities for diagnosis and major surgical procedures; (6) is not primarily a clinic, nursing, rest or convalescent home or similar establishment and is not, other than incidentally, a place for alcoholics or drug addicts; and (7) maintains necessary equipment and operating room facilities.

BENEFITS

Section 1. LOSS OF LIFE ACCIDENT INDEMNITY: When Injury results in loss of life of the Insured within three hundred sixty five (365) days from the date of the accident, the Company will pay the Monthly Benefit less any amount paid or payable under Sections 2 and 3 of this Supplementary Contract in accordance with Benefit Period Provision given hereunder.

Section 2. DISMEMBERMENT, LOSS OF SIGHT, HEARING, SPEECH INDEMNITY: When Injury results to the Insured in any of the following Losses within three hundred sixty five (365) days from the date of the accident, the Company will pay for the following losses in accordance with Benefit Period Provision given hereunder:

ı	Both Hands or Both Feet or Sight of Both Eye	.The Monthly Benefit
ı	One Hand and One Foot	.The Monthly Benefit
l	Either Hand or Foot and Sight of One Eye	The Monthly Benefit

Hearing of Both Ears	The Monthly Benefit
	The Monthly Benefit
Either Hand or Foot	One Half the Monthly Benefit
Sight of One Eye	One Half the Monthly Benefit
Thumb and Index Finger	One Quarter the Monthly Benefit

Section 3. PERMANENT TOTAL DISABILITY: When, as the result of Injury and commencing within three hundred sixty five (365) days from the date of the accident, the Insured is Totally and Permanently Disabled, and such disability has continued for a period of twelve (12) consecutive months and is total, continuous and permanent at the end of this period, the Company will pay the Monthly Benefit less any other amount paid or payable under Sections 2 of this Supplementary Contract as a result of the same accident.

LIMITATIONS

No indemnity will be paid under any circumstances for more than one of the losses, the greatest for which provision is made in Section 1 "Loss of Life Accident Indemnity" or Section 2 "Dismemberment, Loss of Sight, Hearing, Speech Indemnity", or Section 3 "Permanent Total Disability". The monthly benefit shall not exceed the monthly benefit amount stated in the schedule of benefits.

BENEFIT PERIOD

The Monthly Benefits under Section 2 "Dismemberment, Loss of sight, Hearing, Speech indemnity" or Section 3 Permanent Total Disability of this Supplementary Contract shall be paid to the Insured as long as he lives, or atleast Two Hundred Forty (240) monthly benefits.

If the Insured does not survive to receive Two Hundred Forty (240) monthly benefits, the remaining Two Hundred Forty (240) monthly benefits will be paid to his legal heir.

If the beneficiary has attained eighteen (18) years of age on the date of loss occurred, the monthly benefit under Section 1 "Loss of Life Accident Indemnity of this Supplementary Contract shall be paid as long as the beneficiary lives or atleast Two Hundred Forty (240) monthly benefits as long as he lives.

If the beneficiary does not survive to receive Two Hundred Forty (240) monthly benefits, the monthly benefit will be paid to the estate of the beneficiary for the remainder of the Two Hundred Forty (240) months.

When the beneficiary is a child, under eighteen (18) years of age at the date of loss, the Company will pay the monthly benefits for the period of Two Hundred Forty (240) months to the child beneficiary through the child's legal guardian until the child attains eighteen (18) years of age. When the child beneficiary attains eighteen (18) years of age the Company will pay the monthly benefits for the remainder of the two hundred forty (240) months directly to the beneficiary.

If the child beneficiary does not survive to receive Two Hundred Forty (240) monthly benefits, the monthly benefits will be paid to the estate of the child beneficiary for the remainder of the Two Hundred Forty (240) months.

EXCEPTIONS

In addition to the Exceptions listed in Part III of the Policy, this Supplementary Contract shall not cover and no payment shall be made with respect to:

- (1) loss caused by or resulting from bacterial infections (except pyogenic infections which shall occur through an accidental cut or wound) or any other kind of disease:
- (2) Acquired Immune Deficiency Syndrome (AIDS)

EXPIRATION OF COVERAGE

The occurrence of any specific loss for which the full Monthly Benefit is payable under this Supplementary Contract shall at once terminate all insurance under this Supplementary Contract, but such termination shall be without prejudice to any claim originating out of the accident causing such loss.

Coverage under this Supplementary Contract will expire when the Insured attains seventy (70) years of age and unearned premium will be refunded on pro - rata basis.

SICKNESS IN-HOSPITAL INCOME

This Supplementary Contract is an integral part of the Policy to which it is atatched and is valid only if the Supplementary Contract Form number, benefit, and appropriate premium are indicated on the Application for said Policy or are endorsed thereon.

DEFINATIONS

"In-Patient" wherever used in this Supplementary Contract means a person who is confined in a Hospital as a registered bed patient for at least twenty-four (24) hours.

"Sickness" wherever used in this Supplementary Contract means sickness or disease first manisfested and contracted and commencing after the Coverage Commencement Date of this Supplementary Contract as to the Insured whose sickness is the basis of claim.

"Pre-existing Condition" wherever used in this Supplementary Contarct means any physical condition that was diagnosed, treated, or for which a physician was consulted, or the existence of symptoms of any illness or disease at any time prior to this Supplementary Contract Effective Date or the last Coverage Commencement Date, whichever is later; wheather declared or undeclared on application or health statement.

"Coverage Commencement Date" wherever used in this Supplementary Contract means the thirty one (31) day after: (a) the Policy Effective date; (b) the date stated in the relevant endorsement when subsequent changes are made to the coverage; or (c) the date of reinstatement of the Policy in case of any reinstatement, whichever is later.

"Medical Necessity" wherever used in this Supplementary Contract means that the medical condition of the insured requires confinement according to a treating physician report confirming that a safe and effective treatment cannot be provided to the insured as an Outpatient.

"Elimination Period" wherever used in this Supplementary Contract means the first one (1) day (24 hours) the insured is confined in Hospital, for which no benefits are payable.

"Physician" wherever used in this Supplementary Contract means a person legally licensed to practice medicine and/or surgery, specializing in Opthalmology or Otolaryngology other than the insured or a member of the insured's immediate family.

"Hospital" wherever used in this Supplementary Contract means an establisment which meets all of the following requirements: (1) holds a license as a hospital, if licensing is required in the country or governmental jurisdiction; (2) operates primarily for the reception, care and treatment of sick, ailing or injured persons as inpatients; (3) provides 24-hour a day nursing service by registered or graduate nurses; (4) has a staff of one or more physicians available at all times; (5) provides organized facillities for diagnosis and major surgical procedures; (6) is not primarily a clinic, nursing, rest or convalescent home or similar establisment and is not, other than incidentally, a place for alcoholics or drug addicts; and (7) maintains necessary equipment and operating room facilities,

BENEFITS

When, as the result of Sickness, and while this Supplementary Contract is in force, the insured shall be for medical necessity confined within a Hospital as an in-patient under the continuous attendance of a physician, the Company will pay the Weekly Benefit stated in the Schedule, for each week that the insured shall be confined therein, up to fifty-two (52) weeks, commecing immediately following the Elimination Period (if any) stated in the Schedule.

If the Insured is confined for a portion of a week, one seventh (1/7) of the Weekly Benefit shall be payable for each day of confinement subject to the Elimination Period.

SUCCESSIVE PERIODS OF HOSPITAL CONFINEMENT

If, following a period of Hospital confinement for which indemnity is paid or payable under this Supplementary Contract, the insured shall be readmitted and confined as an inpatient, due to the same or related causes, the Company's liability for the entire period shall be subject to the limitations applicable of this Supplementary contract under which the original period of confinement was indemnified.

EXCEPTIONS

In addition to the General Exceptions listed in Part III of the Policy, this Supplementary Contract shall not cover Hospital confinement resulting from or related to:

- (1) Direct consequence of pregnancy, miscarriage, abortion, childbirth, or any Sexually Transmitted Disease (STD);
- (2) general check-ups; or
- (3) cosmetic or plastic surgery;
- (4) any mental or nervous disorder resulting from or related to psychiatric or psychological condition;
- (5) stay in sanatoriums for whatever reason and whatever treatment;
- (6) Pre-Existing conditions;
- (7) Tonsils, adenoids, hernia, or disk diseases until the person undergoing such Hospital confinement has been contineously covered under this Supplementary Contract for a period of one hundred twenty (120) days immediately preceding such Hospital confinement and the symptoms of said ailments manifested itself after a period of one hundred twenty (120) days from the Policy Effective Date or date of reinstatement of the Policy in case of any reinstatement. which ever is later; or
- (8) Dental care or surgery;
- (9) Treatment in an Ayurvedic Center or hospital for whatever reason and whatever treatment.
- (10) Sickness caused by Acquired Immune Deficiency Syndrome (AIDS)

EXPIRATION OF COVERAGE

The coverage under this Supplementary Contract will expire when the insured attains sixty-five (65) years of age and unearned premium will be refunded on pro-rata basis.

Expiration of the coverage under this provision shall be with out prejudice to any claim arising before expiration date.

वृत-४ (ख) अस्वस्थताको कारण अस्पताल भर्ना लाभ

यो पूरक करार फारम जुन बीमालेख संग संलग्न गरिएको हुन्छ त्यसको अभिन्न अंग हुनेछ र यसको पूरक करार फारम नम्बर, बीमालाभहरु र आवश्यक बीमाशुल्क बीमालेख "अभिलेख" मा उल्लेख गरे पिछ वा उपयुक्त सम्पुष्टि संलग्न गरेपिछ मात्र वैध हुनेछ।

परिभाषाहरु

- "अन्तरंग बिरामी" यस पूरक करारमा जहाँ सुकै प्रयोग भएपिन कम्तीमा चौबिस (२४) घण्टाको लागि पंजीकृत विरामीको रुपमा अस्पतालमा बसेको व्यक्तिलाई बुक्ताउनेछ।
- "अस्वस्थता" यस पूरक करारमा जहाँ सुकै प्रयोग भएपनि बीमित जसको अस्वस्थता दाबीको आधार बन्दछ, लाई रक्षावरण लागु मिति पश्चात पहिलो पटक बिरामी भएको वा रोग लागेको अवस्थालाई जनाउनेछ।
- "पूर्व विद्यमान अवस्था" यस पूरक करारमा जहाँसुकै प्रयोग भएपिन पूरक करार लागू मिति अगावै औषधोपचार गरिएको वा चिकित्सकीय सल्लाह लिईएको वा लक्षण देखिएको रोग वा विरामी अवस्था आवेदनमा उल्लेख भएको वा नभएको जुनसुकै शारिरीक अवस्थालाई जनाउने छ।
- "रक्षावरण लागु मिति" यस पूरक करारमा जहाँसुकै प्रयोग भएपिन (क) पूरक करार लागू हुने मिति, (ख) रक्षावरणमा गरिएको कुनै परिवर्तन सम्बन्धी अनुमोदनमा उल्लेखित मिति वा (ग) पुनर्जागरण गरिएको भए बीमालेख पुनर्जागरण मिति, मध्ये सबभन्दा पि आउने मिति पि किको एकतीसऔं (३१ औं) दिनलाई जनाउने छ।
- "चिकित्सकीय आवश्यकता" यस पूरक करारमा जहाँसुकै प्रयोग भए पिन बीमितलाई उपचारमा संलग्न चिकित्सकको अनुसार अस्पताल भर्ना हुनै पर्ने त्यो विरामी अवस्थालाई जनाउनेछ । जसको उपचार वाहय विरामी को रुपमा सुरक्षित र असर कारक नहुने भनी संलग्न चिकित्सकले निक्यौंल गरेको हुन्छ ।
- "लुप्त अवधि" यस पूरक करारमा जहाँसुकै प्रयोग भएपिन अनुसुचीमा उल्लेख भए अनुसार बीमित अस्पताल भर्ना भएको पहिलो एक (१) दिन (२४ घण्टा) जसको लागि कृतै लाभ दिईने छैन, लाई जनाउने छ ।
- "चिकित्सक" यस पूरक करारमा जहाँ सुकै उल्लेख भएपिन बीमित वा निजको परि वारको सदस्य वाहेक औषधोपचार र∕वा सर्जरी गर्न कानूनी रुपमा इजाजत प्राप्त OPTHALMOLOGY वा OTOLARYNGOLOGY मा विशेषज्ञता प्राप्त व्यक्तिलाई बुक्ताउनेछ।
- **"अस्पताल"** यस पूरक करारमा जहाँ सुकै उल्लेख भएपिन तल दिइएका सबै शर्तहरु पुरा गर्ने निकायलाई बुकाउनेछ
- (१) राज्य वा सरकारद्वारा इजाजत आवश्यक गरिएको अवस्थामा अस्पतालको इजाजत प्राप्त.
- (२) आधारभृत रुपमा विरामी, रोगी वा घाउचोट लागेको व्यक्तिलाई भर्ना गरी रेखदेख र औषधोपचारको लागि सञ्चालन भएको,
- (३) दिनको चौविसै घण्टा पंजीकृत वा स्नातक नर्सहरुद्वारा नर्सिङ्ग सेवा पुऱ्याउने,
- (४) एक वा एकभन्दा बढी चिकित्सक कर्मचारी चौविसै घण्टा उपस्थित रहने व्यवस्था भएको
- (५) रोग पहिचान र प्रमुख सर्जिकल प्रिक्रयाहरुको लागि व्यवस्थित सुविधा भएको,
- (६) आधारभूत रुपमा क्लिनिक, निर्सिङ्ग, विश्राम गृह वा स्वास्थ्य लाभ गृह वा त्यस्तै प्रकृतिको निकाय र आकस्मिकरुपमा वाहेक दुर्व्यसनी उपचार केन्द्र नभएको, र
- (७) आवश्यक उपकरण र शल्यित्रया कक्षको समुचित व्यवस्था भएको ।

लाभहरु

यो प्रक करार लागु रहेको अवस्थामा कुनै बीमित अस्वस्थताको कारण चिकित्सकीय आवश्यकता अनुरुप चिकित्सको निरन्तर निगरानीमा कुनै अस्पतालमा भर्ना भई बस्नु परेमा, कम्पनीले अनुस्चीमा उल्लेख भए अनुसारको साप्ताहिक लाभ बीमित भर्ना रहेको प्रत्येक हप्ताको लागि, अनुस्चीमा उल्लेख भए अनुसारको लुप्त अविध (कुनैभए) को लगत्तै शुरुभई ५२ (वाउन्न) हप्ता सम्म भुक्तानी गर्नेछ। यदि बीमित एक हप्ताभन्दा कम अविधिको लागि भर्ना रहेमा, लुप्त अविधि पश्चात प्रत्येक दिनको लागि साप्ताहिक लाभको १/७ भाग भुक्तानी गरिनेछ।

भेणीबद्ध अस्पताल भर्ना अवधि

यदि, अस्पताल भर्नाको एउटा अविध जसको लागि पूरक करार अन्तर्गत लाभ भुक्तानी भै सकेको वा हुनुपर्ने भएमा, बीमित सोहि कारणले वा त्यसैसंग सम्बन्धित कृतै कारण पुनः भर्ना भई अन्तरंग विरामीको रुपमा अस्पताल बस्नुपर्ने भएमा कम्पनीको दायित्व पुरै अविधिको लागि यस पूरक करारका लागि भुक्तानी हुनृ वन्देजहरु जस अन्तर्गत प्रथम भर्नाको लागि भुक्तानी भएको हुन्छ अनुसार हुनेछ।

अपवादहरु

मूल बीमालेखको भाग-३ मा उल्लेखित सामान अपवादहरुको साथै यस पुरक करारले निम्न कारण वा तीसंग सम्बन्धित कारणले अस्पताल भर्तीलाई रक्षावरण गर्ने छैन:

- मूल रुपले गर्भावस्था, गर्भपात, गर्भक्षय, प्रसव वा अन्य कुनै यौन क्रियाकलापबाट सर्ने रोगको कारण बाट हुने क्षति,
- २. सामान्य जाँच वा
- ३. कस्मेटिक वा प्लाष्टिक सर्जरी,
- ४. मनोरोग वा मनोवैज्ञानिक कारणले हुने कुनै मानिसक वा स्नायु (Nervous) सम्बन्धि गडबढी,
- प्र. कुनै पनि कारणले र कुनै उपचारको लागि आरोग्यशाला (SANATORIUMS) को बसाई,
- ६. पूर्व विद्यमान अवस्था,
- ७. टिन्सल (Tonsil), एडेन्वाईड (Adenoide), हर्निया (Hernia) वा डिस्क रोग (Disc Disease) को उपचार वा शल्यिकयाको लागि अस्पताल भर्ना:- त्यस्तो अस्पताल भर्ना रही उपचार वा शल्यिकया त्यस्तो भर्ना हुनु अगाडि यस पूरक करार अन्तर्गत निरन्तर रुपमा एकसय वीस (१२०) दिन बीमित रहिसकेको र त्यस्तो विमारीको लक्षणनै बीमालेख लागु मिति वा कुनै पुनर्जागरण गरिएको भए पुनर्जागरण मिति मध्ये पिछल्लो मिति देखि एकसय बीस (१२०) दिन पिछ मात्र देखा परेको अवस्थामा वाहेक रक्षावरण गरिनेछैन,
- द. दन्त चिकित्सा वा शल्यक्रिया,
- ९. आयुर्वेदिक केन्द्र वा अस्पतालमा जुनसुकै कारणले गराईएको उपचार,
- १०. एड्स (AIDS-Acquired Immune Defiemcy Syndrome) को कारणले भएको अस्वस्थता

रक्षावरणको अन्त्य

यस पूरक करार अन्तर्गतको बीमा बीमित पैसठ्ठी (६४) वर्ष उमेर पुगेमा अन्त्य हुनेछ र आर्जन नगरिएको बीमाशुल्क रकम सामानुपातिक रूपमा फिर्ता गरिने छ । यस प्रावधान अनुसार बीमाको अन्त्य हुँदा अन्त्य हुने मिति अगावै भएको दावि प्रति पूर्वाग्रह रहित हुनेछ ।

ACCIDENT DISABILITY INCOME 52 WEEKS ISSUED BY

AMERICAN LIFE INSURANCE COMPANY

This Supplementary Contract is an integral part of the Policy to which it is attached and is valid only if the Supplementary Contract Form number, benefit, and appropriate premium is indicated on the Application for said Policy or is endorsed thereon.

DEFINITIONS

"Injury" wherever used in this Supplementary Contract means accidental bodily injury occurring to the Insured while this Supplementary Contract is in force, effected only by external, violent and accidental means of which there is evidence of visible contusion or wound and resulting, directly and independently of all other causes in loss covered by this Supplementary Contract.

'Pre-existing Condition" wherever used in this Supplementary Contract means any physical condition that was treated, or for which a physician was consulted at any time prior to the Supplementary Contract Effective Date; whether declared or undeclared in application or health statement.

"Elimination Period" wherever used in this Supplementary Contract means the number of Seven (7) consecutive days as stated in the Schedule, commencing with the first day the Insured is confined in Hospital, for which no benefits are payable.

"Totally Disabled" wherever used in this Supplementary Contract means the Insured is unable, due to Injury, to engage in any and every business or occupation for compensation or profit.

"Physician" wherever used in this Supplementary Contract means a person legally licensed to practice medicine and/or surgery, specializing in Ophthalmology or Otolaryngology other than the Insured or a member of the Insured's immediate family.

"Hospital" wherever used in this Supplementary Contract means an establishment which meets all of the following requirements: (1) holds a license as a hospital, if licensing is required in the country or governmental jurisdiction; (2) operates primarily for the reception, care and treatment of sick, ailing or injured persons as inpatients; (3) provides 24-hour a day nursing service by registered or graduate nurses; (4) has a staff of one or more physicians available at all times; (5) provides organized facilities for diagnosis and major surgical procedures; (6) is not primarily a clinic, nursing, rest or convalescent home or similar establishment and is not, other than incidentally, a place for alcoholics or drug addicts; and (7) maintains necessary equipment and operating room facilities.

BENEFIT

When, as the result of Injury and commencing within thirty (30) days from the date of the accident, the Insured is Totally Disabled as defined herein, the Company will pay periodically the Weekly Benefit stated in the Schedule, for a maximum period of fifty-two (52) weeks, or until the Insured attains seventy (70) 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).

If the Insured is Totally Disabled for a portion of a week, one seventh (1/7) of the Weekly Benefit shall be payable for each day the Insured is Totally Disabled, subject to the Elimination Period.

LIMITATION

Notwithstanding anything to the contrary in this policy, the following limitations apply to this Supplementary Contract:

This benefit shall automatically cease and the Company shall not be liable to pay any Weekly Benefit, upon the occurrence of any of the specified loss / losses under Section 1 "Loss of life Accident Indemnity", or Section 2 "Dismemberment, Loss of Sight, Hearing, Speech Indemnity", or Section 3 "Permanent Total Disability" of Supplementary Contract form number 60 – F, in respect of the Insured for which the Principal Sum, becomes payable.

If at the time of claim, the Weekly Benefit stated in the Schedule of Benefit exceeds seventy five percent (75%) of the Insured's actual weekly income, the Company will reduce the Weekly Benefit to an amount equal to seventy five percent (75%) of the Insured's actual weekly income as at the time of claim, and will return or adjust the premium paid for the excess Weekly Benefit from the premium due date immediately preceding the date of the accident which is the basis of the claim.

The Insured shall, if so required, as condition precedent to payment of this Accident Disability Income Benefit, prove that the Weekly Benefit amount does not exceed 75% of his /her weekly income at the time of claim.

RECURRENT DISABILITY

If, following a period of Total Disability for which indemnity is paid or payable under this Section, the Insured shall resume a regular occupation, or any occupation for which the Insured is reasonably fit, and shall perform the duties thereof for a continuous period any subsequent disability resulting from or contributed to by the same cause or causes shall be deemed a continuation of the same disability and the Company's liability for the entire period shall be subject to the limitations applicable in this Supplementary Contract, indemnified.

EXCEPTIONS

In addition to the Exceptions listed in Part III of the Policy, this Supplementary Contract shall not cover and no payment shall be made with respect to:

- (1) loss caused by or resulted from bacterial infections (except pyogenic infections which shall occur through an accidental cut or wound) or any other kind of disease;
- (2) Direct consequence of pregnancy and resulting childbirth, abortion or miscarriage.
- (3) Accident caused by Acquired Immune Deficiency Syndrome (AIDS).

EXPIRATION OF COVERAGE

The coverage under this Supplementary Contract will expire when the Insured, attains seventy (70) years of age and unearned premium will be refunded on pro - rata basis.

Expiration of the coverage under this provision shall be with out prejudice to any claim arising before expiration date.

५२ हप्ते दुर्घटना अशक्तता आय

अमेरिकन लाईफ इन्स्योरेन्स कम्पनी (ALICO) द्वारा जारी गरिएको

यो पूरक करार फाराम जुन बीमालेख संग संलग्न गरिएको हुन्छ त्यसको अभिन्न अंग हुनेछ र यसको पूरक करार फाराम नम्बर, बीमालाभहरु र आवश्यक बीमाशुल्क बीमालेख "अनुसूची"मा उल्लेख गरेपछि वा उपयुक्त सम्पुष्टि संलग्न गरेपछि मात्र वैध हुनेछ ।

परिभाषाहरु

"घाउचोट" यस पूरक करारमा जहाँसुकै प्रयोग भएपिन यो पूरक करार लागु रहेको अवस्थामा बीमित जसको चोटपटक दावीको आधार बन्दछ, लाई अन्य सबै कारण बाहेक मूलरुपमा बाह्य, सांघातिक र दुर्घटनात्मक कारणले मात्र लागेको, बाहिरी रुपमा देखिने प्रमाण भएको शारिरीक घाउचोटलाई जनाउने छ ।

"पूर्व विद्यमान अवस्था" यस पूरक करारमा जहाँसुकै प्रयोग भएपनि बीमालेख लागु मिति अगावै औषधोपचार गरिएको वा चिकित्सकीय सल्लाह लिईएको, आवेदनमा उल्लेख भएको वा नभएको जुनसुकै शारिरीक अवस्थालाई जनाउने छ ।

"लुप्त अवधि" यस पूरक करारमा जहाँसुकै प्रयोग भएपिन अनुसूचीमा उल्लेख भए अनुसार बीमित अस्पताल भर्ना भएको पिहलो दिन देखि शुरुभई लगातार सात (७) दिनको संख्या जसको लागि कुनै लाभ दिईने छैन, लाई जनाउने छ।

"पूर्ण अशक्त" यस पूरक करारमा जहाँसुकै प्रयोग भएपिन बीमित घाउचोटको कारणले आर्जन वा नाफाको लागि कुनै पिन किसिमको व्यवसाय वा पेशामा संलग्न हन नसक्ने अवस्थालाई जनाउने छ।

"चिकित्सक" यस पूरक करारमा जहाँसुकै उल्लेख भएपनि वीमित वा निजको परिवारको सदस्य वाहेक औषधोपचार र/वा सर्जरी गर्न कानूनी रुपमा इजाजत प्राप्त OPTHALMOLOGY वा OTOLARYNGOLOGY मा विशेषज्ञता प्राप्त व्यक्तिलाई बुभाउनेछ ।

"अस्पताल" यस पूरक करारमा जहाँसुकै उल्लेख भएपिन तल दिइएका सवै शर्तहरु पुरा गर्ने निकायलाई बुभाउनेछ

(१) राज्य वा सरकारद्वारा इजाजत आवश्यक गरिएको अवस्थामा अस्पतालको इजाजत प्राप्त,

(२) आधारभुत रुपमा विरामी, रोगी वा घाउचोट लागेको व्यक्तिलाई भर्ना गरी रेखदेख र औषधोपचारको लागि सञ्चालन भएको,

(३) दिनको चौविसै घण्टा पंजीकृत वा स्नातक नर्सहरुद्वारा नर्सिङ्ग सेवा प्ऱ्याउने,

(४) एक वा एकभन्दा बढी चिकित्सक कर्मचारी चौविसै घण्टा उपस्थित रहने व्यवस्था भएको,

(४) रोग पहिचान र प्रमख सर्जिकल प्रक्रियाहरुको लागि व्यवस्थित सविधा भएको.

(६) आधारभुत रुपमा क्लिनिक, निर्सिङ्ग, विश्वाम गृह वा स्वास्थ्य लाभ गृह वा त्यस्तै
 प्रकृतिको निकाय र आकस्मिकरुपमा वाहेक दृब्यसनी उपचार केन्द्र नभएको, र

(७) आवश्यक उपकरण र शल्यिक्रिया कक्षको समुचित व्यवस्था भएको ।

लाभहरु

घाउचोटको परिणाम स्वरुप र दुर्घटना भएको मिति देखि तीस (३०) दिन भित्र बीमित यसमा उल्लेख भए अनुसार पूर्ण अशक्त भएमा कम्पनीले अनुसूचीमा उल्लेख भए अनुसार साप्ताहिक लाभ बढीमा बाउन्न (५२) हप्ता वा बीमित ७० वर्ष उमेर पुग्ने दिन मध्ये पहिला आउने दिनसम्म भुक्तानी दिनेछ। तर उक्त अवधिभर बीमित लुप्त अवधिको तत्काल पश्चात शुरु भई पूर्ण अशक्त भईरहेकै हुनुपर्दछ।

यदि बीमित हप्ताको कुनै अंशको अवधिसम्म मात्र पूर्ण अशक्त रहेमा लुप्त अवधिको अधिनमा रहि साप्ताहिक लाभ को १/७ भाग बीमित पूर्ण अशक्त रहेको प्रत्येक दिनको लागि भ्क्तानी दिईने छ ।

बन्देज

यस बीमालेखमा अन्यथा जेसुकै उल्लेख भएपिन यस पूरक करारको लागि निम्न बन्देजहरु लागु हुनेछन्:

बीमित रक्षावरण गरिएको, पूर्ण बीमांक भुक्तानी पाईने, पूरक करार नं. ६०-च को खण्ड-१ अन्तर्गतको "दुर्घटना मृत्यु लाभ" वा खण्ड-२ अन्तर्गतको "अंगभंग, दृष्टि, श्रवण, वाक् शक्ति गुमेको लाभ" वा खण्ड-३ अन्तर्गत "पूर्ण स्थायी अशक्तता" मध्ये कुनै क्षति(हरु) भएमा यस अन्तर्गतको लाभ स्वतः रोकिने छ र कम्पनीले कुनै साप्ताहिक लाभ भुक्तानी गर्नुपर्ने छैन ।

यदि दावीको समयमा अनुसूचीमा उल्लेख भएको साप्ताहिक लाभ बीमितको वास्तविक साप्ताहिक आयको ७५ प्रतिशत भन्दा बढी हुन गएमा कम्पनीले साप्ताहिक लाभलाई बीमितको दावीको समयको वास्तवीक साप्ताहिक आयको ७५ प्रतिशत हुने गरि घटाउने छ र बढी साप्ताहिक लाभको लागि भुक्तानी गरिएको बीमाशुल्क दावीको आधार हुने दुर्घटना मिति पछि लगत्तै आउने बीमाशुल्क भुक्तानी मिति देखि फिर्ता वा पछिल्ला बीमाशुल्कमा समायोजन गर्नेछ।

दुर्घटना अशक्तता आय भुक्तानीको लागि परिस्थितीको माग अनुसार आवश्यक देखिएमा बीमितले साप्ताहिक लाभ रकम निजको दावीको समयमा साप्ताहिक आयको ७५ प्रतिशत भन्दा बढी छैन भन्ने क्रा प्रमाणित गर्नपर्ने छ ।

दोहोरिने अशक्तता

यस अन्तर्गत लाभ भुक्तानी भइसकेको वा दिनुपर्ने भईसकेको अशक्तताको अविध पिछ वीमित एउटा नियमित पेशामा वा अन्य कुनै पेशा जसको लागि वीमित व्यवहारिक रुपमा सक्षम छ मा फर्केर आफ्नो दायित्व अनुसारको कार्य एउटा अटुट अविधसम्म गरेपछि पुनः पहिलेकै कारण(हरु) वा सोको परिणाम स्वरुप अशक्त भएमा यस्तो अशक्ततालाई पहिलाकै निरन्तरता मानिने छ र कम्पनीको दायित्व पुरै अविधिको लागि यस पूरक करारको लागि लागु हुने बन्देजहरुको अधिन निर्धारण हुनेछ ।

अपवादहरु

मूल बीमालेखको भाग-३ मा उल्लेखित अपवादहरुको साथै यस पूरक करार अन्तर्गत निम्न अवस्थामा रक्षावरण गरिने छैन र यसका लागि क्नै भ्क्तानी दिईने छैन:

- किटाणु (Bacterial) संक्रमण (दुर्घटनात्मक घाउचोटको माध्यमबाट हुने Pyogenic (प्योत्पत्तिक) संक्रमण बाहेक) वा अन्य कुनै रोग,
- २. मूल रुपेले गर्भावस्था, प्रसव, गर्भक्षय वा गर्भपतनको कारण बाट हुने क्षति,
- ३. एड्स (AIDS-Acquired Immune Deficiency Syndrome) को कारणले भएको दुर्घटना

रक्षावरणको अन्त्य

यस पूरक करार अन्तर्गतको बीमा बीमित सत्तरी (७०) वर्ष उमेर पुगेमा अन्त्य हुनेछ र आर्जन नगरिएको बीमाशुल्क रकम समानुपातिक रुपमा फिर्ता गरिने छ ।

यस प्रावधान अनुसार बीमाको अन्त्य हुदाँ अन्त्य हुने मिति अगावै भएको दावि प्रति प्वाग्रह रहित हुनेछ ।

वृत-४ ऐच्छिक

दुर्घटना र अस्वस्थताको कारण अस्पताल भर्ना शल्यिऋया खर्च

यो पूरक करार फाराम जुन बीमालेखसँग संलग्न गरिएको हुन्छ त्यसको अभिन्न अंग हुनेछ र यसको पूरक करार फाराम नम्बर, वीमालभहरु र आवश्यक वीमाशुल्क वीमालेख "अनुसूची" मा उल्लेख गरे पछि वा उपयुक्त सम्पृष्टि संलग्न गरेपछि मात्र वैध हनेछ ।

परिभाषाहरु

- "अस्वस्थता" यस पूरक करारमा जहाँ सुकै प्रयोग भएपिन वीमित जसको अस्वस्थता दावीको आधार बन्दछ, लाई रक्षावरण लागु मिति पश्चात पहिलो पटक विरामी भएको वा रोग लागेको अवस्थालाई जनाउनेछ ।
- "घाउचोट" यस पूरक करारमा जहाँसुकै प्रयोग भएपिन यो पूरक करार लागू रहेको अवस्थामा वीमित जसको चोटपटक दावीको आधार बन्दछ, लाई अन्य सबै कारण वाहेक मूलरुपमा वाह्य, सांघातिक र दुर्घटनात्मक कारणले मात्र लागेको, बाहिरी रुपमा देखिने प्रमाण भएको शारिरीक घाउ चोटलाई जनाउने छ ।
- "रक्षावरण लागु मिति" यस पूरक करारमा जहाँसुकै प्रयोग भएपनि (क) पूरक करार लागू हुने मिति, (ख) रक्षावरणमा गरिएको कुनै परिवर्तन सम्बन्धी अनुमोदनमा उल्लेखित मिति वा (ग) पुनर्जागरण गरिएको भए बीमालेख पुनर्जागरण मिति, मध्ये सबभन्दा पिछ आउने मिति पिछुको एकतीसौँ (३१औँ) दिनलाई जनाउने छ ।
- "पूर्व विद्यमान अवस्था" यस पूरक करारमा जहाँसुकै प्रयोग भएपनि यस पूरक करार लागू मिति वा अन्तिम रक्षावरण सुरु मिति मध्ये अन्तिम आउने मिति अगावै औषधोपचार गरिएको वा चिकित्सकीय सल्लाह लिईएको वा रोगा वा विरामीको लक्षण देखिएको आवेदनमा उल्लेख भएको वा नभएको जुनसुकै शारिरीक अवस्थालाई जनाउने छ ।
- "अतरंग विरामी" यस पूरक करारमा जहाँ सुकै प्रयोग भएपिन कम्तीमा चौविस (२४) घण्टाको लागि पंजीकृत विरामीको रुपमा अस्पतालमा वसेको व्यक्तिलाई बुकाउनेछ ।
- "अधिकतम लाभ" यस पूरक करारमा जहाँसुकै प्रयोग भए पनि अनुसूचिमा उल्लेख भएको रकमलाई बुकाउने छ ।
- "वीमालेख वर्ष" यस पूरक करारमा जहाँसुकै प्रयोग भएपिन अनुसूचीमा उल्लेखित लागु मिति देखि शुरु भई प्रत्येक तीनसय पैंसट्टी (३६४) दिनको अवधिलाई जनाउने छ ।
- "जायज र चलनचल्ती" यस पूरक करारमा जहाँसुकै प्रयोग भएपिन वीमितको अवस्थालाई आवह्यक उपचार, उपचार सामाग्री वा उपचार सेवाको लागि भुक्तानी गिरिएको कुनै खर्च रकम जनु खर्च गिरएको ठाउँमा त्यस्तै उपचार, उपचार सामग्री वा उपचार सेवाको प्रचलित दरभन्दा बढी हुनेछैन र वीमा नभएको अवस्थामा गिरने खर्चहरू बाहेकको खर्च समावेश गिरिउको हुँदैनलाई जनाउनेछ ।
- "चिकित्सक" यस पूरक करारमा जहाँसुकै उल्लेख भएपिन वीमित वा निजको परिवारको सदस्य बाहेक औषधोपचार र/वा सर्जरी गर्न कानूनी रूपमा इजाजत प्राप्त OPTHALMOLOGY वा OTOLASARYNGOLOGY मा विशेषज्ञता प्राप्त व्यक्तिलाई बुकाउने छ ।
- "अस्पताल" यस पूरक करारमा जहाँसुकै उल्लेख भएपिन तल दिइएका सबै शर्तहरु पुरा गर्ने निकायलाई बुक्षाउने छ ।
- (१) राज्य वा सरकारद्वारा इजाजत आवश्यक गरिएको अवस्थामा अस्पतालको इजाजत पाप्त
- (२) आधारभुत रुपमा विरामी, रोगी वा घाउचोट लागेको व्यक्तिलाई भर्ना गरी रेखदेख र औषधोपचारको लागि सञ्चालन भएको,
- (३) दिनको चौविसै घण्टा पंजीकृत वा स्नातक नर्सहरुद्वारा नर्सिङ्ग सेवा पुऱ्याउने,
- (४) एक वा एकभन्दा बढी चिकित्सक कर्मचारी चौविसै घण्टा उपस्थित रहने व्यवस्था भएको,
- (४) रोग पहिचान र प्रमुख सर्जिकल प्रिक्रयाहरुको लागि व्यवस्थित सुविधा भएको,

- (६) आधारभुत रुपमा क्लिनिक, नर्सिङ्ग, विश्राम गृह वा स्वास्थ्य लाभ गृह वा त्यस्तै प्रकृतिको निकाय र आकस्मिकरुपमा बाहेक दुर्व्यसनी उपचार केन्द्र नभएको, र
- (७) आवश्यक उपकरण र शल्यिकया कक्षको समुचित व्यवस्था भएको ।

लाभहरू

बीमित घाउचोट वा अस्वस्थताका कारण अन्तरंग विरामीको रूपमा अस्पतालमा भर्ना भई बसेमा र चिकित्सकद्वारा गरिएको शल्यिकयाको लागि शुल्क भुक्तानी गर्नु परेको अवस्थामा शल्यिचिकत्सकको शुल्क, उनस्थेटिष्टको शुल्क, शल्यिकया कक्षको भाडा कम्पनीले शल्यिकया अनुसूचीमा उल्लेखित सम्बन्धित शल्यिकयाको लागि तोकिएको अधिकतम लाभ प्रतिशतमा नबद्देन गरि जायज र चलनचल्तीको शुल्क शोधभर्ना दिइने छ ।

बन्देजहरू

- रक्षावरण गरिएको कुनै शल्यिकयाको लागि सोही बीमालेख वर्षमा सोहि शल्यिकया
 जित पटक गरेपनि एकपटक मात्र लाभ भुक्तानी गरिनेछ ।
- कुनैपिन बीमालेख वर्षमा शल्यिकया लाभको दोब्बर भन्दा बढी लाभ कुनै पिन अवस्थामा भुक्तानी गरिने छैन ।
- एउटै शल्यिक्रियाको वेला एक भन्दा बढी शल्यिक्रियाहरु गरिएमा त्यस्तो प्रकृयाको लागि लागू हुने शल्यिक्रिया लाभहरु मध्येको अधिकतम लाभ प्रतिशत रकम मात्र सबै प्रकृयाहरुको लागि भुक्तानी गरिनेछ ।

अपवादहरुः

मूल बीमालेखको भाग-३ मा उल्लेखित समान अपवादहरुको साथै यस पूरक करारले निम्न अवस्थालाई रक्षवरण गर्ने छैन र सोको लागि कुनै भुक्तानी दिईने छैन :

- 9. टिन्सल(Tonsil), एडेन्वाईड(Adenoide) र हर्निया (Hemia) को उचार वा शल्यिकया:-त्यस्तो उपचार वा शल्यिकया गराई रहेको व्यक्ति त्यस्तो उपचार वा शल्यिकया गराउनु अगाडि यस पूरक करार अन्तर्गत निरन्तर रुपमा एकसय बीस (१२) दिन वीमित रिहसकेको हुँदैन र त्यस्तो विमारीको लक्षणनै बीमालेख लागु मिति वा कुनै पुनर्जागरण गरिएको भए पुनर्जागरण मिति मध्य पछिल्लो मिति देखि एकसय बीस (१२०) दिन पछि मात्र देखा अवस्थामा वाहेक रक्षावरण गरिनेछैन ।
- कुनैपिन घाउ चोट वा अस्वस्थता जसको लागि सरकारी कानून वा योजना अन्तर्गत सोधभर्ना प्राप्त हुनेछ वा जसको लागि कुनै उपचार अन्य बीमालेख अन्तर्गत लाभ प्राप्त नभएको बढी खर्च रकम कम्पनीले शोधभर्ना दिनेछ,
- ३. आयुर्वेदिक केन्द्र वा अस्पतालमा जुनसुकै कारणले गराईएको उपचार
- ४. क) मूल रुपमा गर्भावस्था, गर्भपात, गर्भक्षय, प्रसव वा अन्य कुनै यौन क्रियापलापवाट सर्ने रोगको कारणबाट हुने क्षति,
 - ख) फोक्सो सम्बन्धि क्षयरोग,
 - ग) घाउचोटको कारण बाहेक अन्य प्रकारको कस्मेटिक वा प्लाष्टिक सर्जरी,
 - घ) घाउचोटको परिणाम स्वरूप विग्रेकोमा प्राकृतिक स्वरूप दिन गरिने बाहेकको दन्त चिकित्सा वा शल्यिकिया
 - ङ) एड्स (AIDS-Acquired Immune Deficiency Syndrome) को कारणले भएको शल्यिकया

रक्षावरणको अन्त्य

यस पूरक करार अन्तर्गतको बीमा बीमित पैसही (६५) वर्ष उमेर पुगेमा अन्त्य हुनेछ र आर्जन नगरिएको बीमाशुल्क रकम समानुपातिक रुपमा फिर्ता गरिने छ ।

यस प्रावधान अनुसार बीमाको अन्त्य हुँदा अन्त्य हुने मिति अगावै भएको दावि प्रति पूर्वाग्रह रहित हुनेछ ।

ACCIDENT AND SICKNESS IN-HOSPITAL SURGICAL EXPENSE

This Supplementary Contract is an integral part of the Policy to which it is attached and is valid only if the Supplementary Contract Form number, benefit, and appropriate premium are indicated on the Application for said Policy or are endorsed thereon.

DEFINITIONS

"Sickness" wherever used in this Supplementary Contract means sickness or disease first manifested and contracted and commencing after the Coverage Commencement Date of this Supplementary Contract as to the Insured whose sickness is the basis of calaim.

"Injury" wherever used in this Supplementary Contract means accidental bodily injury occurring to the Insured while this Supplementary Contract is in force, effected only by external, violent and accidental means of which there is evidence of visible contusion or wound and resulting, directly and independently of all other causes in loss covered by this Supplementary Contract.

"Coverage Commencement Date" wherever used in this Supplementary Contract means the thirty first (31) DAY After: (a) the Effective date of this Supplementary Contract: (b) the date stated in the relevant endorsement when subsequent changes are made to the coverage; or (c) the date of reinstatement of the Policy in case of any reinstatement, whichever is later.

"Pre-existing Condition" wherever used in this Supplementary Contract means any physical condition that was diagnosed, treated, or for which a physician was consulted, or the existence of symptoms of any illness or disease at any time prior to this Supplementary Contract Effective Date or the last Coverage Commencement Date, whichever is later; whether declared or undeclared on application or health statement.

"In-Patient" wherever used in this Supplementary Contract means a person who is confirmed in a Hospital as a registered bed patient for at least one (1) day.

"Maximum Benefit" wherever used in this Supplementary Contract means the amount stated in the Schedule of Benefits.

"Policy Year" wherever used in this Supplementary Contract shall mean periods of three hundred sixty-five (365) days each, commencing from the Effective date stated in the Policy Schedule of Benefits or endorsed thereto.

"Reasonable and Customary" wherever used in this Supplementary Contract means any medical charge which is charged for treatment, supplies or medical services medically necessary to treat the Insured's condition and does not exceed the usual level of charges for similar treatment, supplies or medical services in the locality where the expenses are incurred; and does not include charges that would not have been made if no insurance existed.

"Physician" wherever used in this Supplementary Contract means a person legally licensed to practise medicine and/or surgery, specializing in Ophthalmology or Otolaryngology other than the Insured or a member of the Insured's immediate family.

"Hospital" wherever used in this Supplementary Contract means an establishment which meets all of the following requirements:

- holds a license as a hospital, if licensing is required in the country or governmental jurisdiction;
- (2)Operates primarily for the reception, care and treatment of sick, ailing or injured persons as inpatients;

- (3) Provides 24-hour a day nursing service by registered or graduate
- (4) has a staff of one or more physicians available at all times;
- (5) Provides organized facilities for diagnosis and major surgical procedures;
- (6)is not primarily a clinic, nursing, rest or convalescent home or similar establishment and is not, other than incidentally, a place for alcoholics or drug addict; and
- (7) maintains necessary equipment and operating room facilities.

BENEFITS

When, by the reason of Injury or Sickness, the Insured is confined in a Hospital as an In-patient and is charged for a surgical procedure performed by a Physician, the Company will reimburse the reasonable and customary charge made for the surgeon's fee, the anaesthetist's feee and the operating room rent, not exceed the Percentage of Maximum Benefit as set forth in the Surgical Schedule for the surgical procedure performed.

Limitations

- Benefit in respect of a Covered Surgery is payable only once during a Policy Year irrrespective of the number of same Covered Surgery performed, if any, during the said Policy Year.
- No indemnity will be paid in any circumstances for more than double the Surgery Benefit during any one Policy Year.
- If more than one surgical procedure is performed during the same operative session, the highest Percentage of Surgery Benefit applicable to such procedure will be the only amount payable for the all procedure performed.

EXECEPTIONS

In addition to the General Exceptions listed in Part III of the Policy, this Supplementary Contract shall not cover and no payment shall be made with respect to:

- (1) treatment or surgery for tonsils, adenoids or hernia until the person undergoing such treatment or surgery has been continuously covered under this Supplementary Contract for a period of one hundred tweenty (120) days immediately preceding such treatment or surgery and the symptoms of said ailments manifested itself after a period of one hundred twenty (120) days from the Policy Effective Date or date of reinstatement of the Policy in case of any reinstatement. which ever is late;
- (2) any Injury or Sickness for which compensation is payable under any government law or program, or for which benefits are payable under any other medical assistance insurance policy; except to the extent that such charges are not reimbursed by such laws, programs or other policies.
- (3) Treatment in an Ayurvedic Center or hospital for whatever reason and whatever treatment;
- (4) (a) Direct consequence of pregnancy, miscarriage, childbirth, or Sexually Transmitted Diseases (STD):
 - (b) pulmonary tuberculosis after diagnosis as such;
 - (c) cosmetic or plastic surgery, except as a result of injury;
 - (d) dental care or surgery except to sound natural teeth as occasioned by Injury.
 - (e) Surgery caused by Acquired Immune Deficiency Syndrome (AIDS).

EXECEPTION OF COVERAGE

The coverage under this Supplementary Contract will expire when the Insured, attains sixty-five (65) years of age and unearned premium will be refunded on pro - rata basis.

Expiration of the coverage under this provision shall be with out prejudice to any claim arising before expiration date.

SURGICAL SCHEDULE (Including Female Disorders)

Description of	% of	Description of	% of
Surgical Operation	Maximum Benefit	Surgical Operation	Maximum Benefit
ABDOMEN - Appendectomy		Repair of perineal or vaginal laceration not	
Resection of bowel	75.00	Immediately post partum, including cystocele and rectocele	37 50
Gastro-enterostomy		Removal of fibroid tumors, without abdominal	
Removal of gall-bladder	75.00	approach	20.00
Cutting into abdominal cavity for diagnosis treatment of	r removal of one	GOITER-Removal of Thyroid, including all	75.00
or more organs therein except	50.00	stages of operative procedure	/5.00
as otherwise herein provided		HEART - Heart operations Catheterization	30.00
abdominal incision will be considered as one operation	e same	Angioplasty	
ABCESS - Inccision of superficial abscess, bo		Bypass Sugery	
one or more	2.50	Open Heart	100.00
Treatment of carbuncle or absecess requiring hospitalia		HERNIA - Injection treatment, complete course-	10.75
one or more		Single hernia Double hernia	
AMPUTATION OF - Fingers or toes, each Hand, forearm or foot at ankle		Radical operation, including injection treatment	25.00
Leg arm or thigh	37 50	for cure of -	
BREAST - Amputation of one or both, radical wit	h resection into	Single hernia	
axilla	75.00	Double hemia	50.00
Amputation of one or both, simple	37.50	18.7525.0037.5050.00 JOINTS AND DISLOCATIONS	
CHEST - Complete thoracoplasty		Laminectomy	75 00
Cutting into thoracic cavity for diagnosis, or treatment of	of organs therein	Incision into joint for disease and disorder,	
tapping excepted		except as herein otherwise provided and except	70,972,072,072,0
Removal of pus, tapping exepted		tapping	12.50
Artificial pneumothorax	12.50	Incision into shoulder, elbow, hip or knee joint, tapping excepted	37 50
Refills - each but not more than six		Excision, fixation by cutting operation,	31.30
BRONCHOSCOPY - Diagnostic		disarticulation or arthroplasty on - shoulder	37.50
Operative, excluding biopsy COSMATIC OR PLASTIC SURGERY	12.30	Hip or spine	75.00
As a r esult of injury	15.00	Knee, elbow, writ, or ankle	20.00
EAR - Cutting ear drum	5.00	Dislocation of - fingers or toes each	2.50
Mastoidectoy - radical-one side		Lower jaw NOSE - Antrum puncture	
Mastoidectomy-radical-both sides	62.50	Intranasal sinus operation	
Fenestration, one or both sides ESOPHAGUS - Operation for stricture	100.00	Extranasal sinus operation	37.50
Use of gastroscope		Polypus, removal one or more	5.00
EYE- Removal of foreign body, from cornea	2.50	Submucous resection	
Detached retina-multiple fusions	100.00	Turbinectomy OBSTETRICAL	
Cateract		PARACENTESIS - Tapping of-	
Glaucoma		Abdomen	6.25
Removal of Pterygium		Chest or bladder, catheterization excepted	3.75
Incision of stye or chalazion		Ear drum, hydrocele, joints or spine	5.00
FRACTURES, treatment of - Simple		RECTUM - Radical resection for malignancy, all stages, including colostomy	100.00
Collar bone, shoulder blade, or forearm, one bone		Hemorrhoids, external only, excision-complete procedu	
Coccyx, tarsals, metatarsals or os calcis	5.00	Hermorrhids, internal or internal and external	
Thigh Upper arm or leg, one bone		including -	
Fingers or toes, each, or rib		prolapsed rectum, total for excision	20.00
Forearm - two bones, knee cap, or pelvis, not requiring t		complete injection treatment Fistula in ano	
		Fissure in ano	
Leg, two bones		Other cutting operations on rectum	17.50
Jaw, lower		Skull-Cutting into cranial cavity trephining	400.00
Pelvis, requiring traction		and tapping excepted	
Vertebrae, transverse processes, each		Removal of bone, trephining or decompression THROAT-Tonsillectomy or tonsillectomy. and	31.23
Vertebrae, compressiion fracture, one or more	37.50	adenoidectomy-Adults and children 15 years	
Wrist	6.00	of age and older	17.50
Compound - open For a compount fracture increase the above by one - h	alf	Children under 15 years of age	12.50
For a fracture requiring an open operation including		Use of Laryngoscope for diagnosis TUMORS-surgical removal of	5.00
bone splicing, double the above percentage except th		Malignant tumors except those of the mucous	
benefit shall not exceed		membrance, skin and subcutaneous tissue	50.00
GENITO-URINARY TRACT -Removal of kidney		Malignant tumors of the mucous membrane,	
Fixatioin of kidney	75.00	skin and subcutaneous tissue	
Removal of tumors or stones in kidney, ureter, or bladder-by cutting operation	62.50	Pilonidal sinus or cyst, cutting operation	
By cauterization or endoscopic means	20.00	Benign tumors of the testicle or breast	
By lithotripsy mean		Warts or moles	
Stricture or urethra-open operation		Benign tumors, one or more, except as	
Intra-urethral cutting operation	15.00	otherwise herein provided -	1942 BAR
Prostrate-entire removal of open operation-complete	75.00	requiring hospital residence	
procedure Partial removal-by endoscopic means		Not requiring hospital residence	5.00
By other cutting operation		ot the above listed tumors, the maximum benefit	
Orchidectomy or epididymectomy	25.00	payable for the entire course of treatment	
Hydrocele or varicocele	12.50	including surgical removal	
Hysterectomy, radical for cancer	75.00	shall be that provided for its surgical removal	
Hysterectomy with complete removal of tubes and		VEINS, Varicose - Complete procedure on all veins	20.00
without appendectomy	02.50	Cutting operation-one leg Cutting operation-Two leg	
Puerperal	10 00	Injection treatment-one leg	
Dilation and cursttage, non-puerperal		Injection treatment-Two legs	
		784 J.M.	