







Basic Accidental Death & Dismemberment Insurance Plan

For: Samuel, Son & Co. Ltd. Policy No.: BSC 9023596

Why You Need Accident Insurance

A serious accidental injury or death can have tremendous consequences. A serious injury may prevent you from meeting your financial obligations and your loss of life may leave your spouse with insufficient financial resources to fulfill their financial responsibilities.

Your Employer has provided you with Accident Insurance coverage underwritten by AIG Insurance Company of Canada. The policy provides a lump sum benefit to help ease the financial impact and assure your family's needs are met if you suffer loss of life as a result of an accident. Your accident coverage also provides you with 'living benefits' should an accident leave you paralyzed or should you lose through severance or loss of use of a limb, sight, speech or hearing.

How It Works

You are automatically covered for a Principal Sum amount equal to the Basic Group Life Insurance coverage; if you're an active full-time, salaried, hourly employee of the policyholder under the age of 70.

Here's What You Get

Broad Accident Insurance Coverage - Your plan provides generous Accidental Death & Dismemberment benefits for injuries as a result of covered accidents.

Guaranteed Acceptance - Coverage is provided regardless of your health history.

24/7 Worldwide Coverage - Your coverage is in force around-the-clock—at work, at home or at play, anywhere in the world.

Definitions

"Insured Employee" means you, if you are an active full-time, salaried, hourly employee of the Policyholder who is under the age of 70.

Beneficiary Designation

You have the option to designate a beneficiary, should you choose not to, in the event of accidental loss of life, the benefit will be paid to the beneficiary you have designated in writing under your Employer's current Group Life policy. If there is no written designation then the benefit will be paid to your estate.

All other benefits will be payable to you.

Benefits and Coverages

Accidental Death, Dismemberment, Paralysis and Loss of Use

If a covered loss occurs within 365 days after the date of the covered accident causing the loss, the Company will pay in one installment the indicated percentage of the Principal Sum as set out in the following Table of Losses. If more than one loss is sustained, only one benefit shall be payable, the largest.

Table of Losses

Loss of life	The Principal Sum
Loss of both hands or both feet	The Principal Sum
Loss of entire sight of both eyes	The Principal Sum
Loss of one hand and one foot	The Principal Sum
Loss of one hand and the entire sight of one eye	The Principal Sum
Loss of one foot and the entire sight of one eye	The Principal Sum
Loss of one arm or one leg	
Loss of one hand or one foot	
Loss of the entire sight of one eye	Two-thirds of the Principal Sum
Loss of thumb and index finger of the same hand	
Loss of speech and hearing	The Principal Sum
Loss of speech or hearing	Two-thirds of the Principal Sum
Loss of hearing in one ear	
Loss of four fingers of one hand	One-third of the Principal Sum
Loss of all toes of one foot	One-Eighth of The Principal Sum
Loss of Use	
Loss of use of both arms or both hands	The Principal Sum

Loss of use of both arms or both hands	The Principal Sum
Loss of use of one hand or one foot	
Loss of use of one arm or one leg	Three-quarters of the Principal Sum

Paralysis

Quadriplegia (total paralysis of both upper and lower limbs)	Two times	The Principal	Sum
Paraplegia (total paralysis of both lower limbs)	Two times	The Principal	Sum
Hemiplegia (total paralysis of upper and lower limbs of one side of the body)	Two times	The Principal	Sum

"Loss" as above used with reference to quadriplegia, paraplegia, and hemiplegia means the complete and irreversible paralysis of such limbs; as above used with reference to hand or foot means complete severance through or above the wrist or ankle joint, but below the elbow or knee joint; as used with reference to arm or leg means complete severance through or above the elbow or knee joint; as used with reference to thumb and index finger means complete severance through or above the first phalange; as used with reference to fingers means complete severance through or above the first phalange of all four fingers of one hand; as used with reference to toes means, complete severance of both phalanges of all the toes of one foot and as used with reference to eye means the irrecoverable loss of the entire sight thereof.

"Loss" as above used with reference to speech means complete and irrecoverable loss of the ability to utter intelligible sounds; as used with reference to hearing means complete and irrecoverable loss of hearing in both ears.

"Loss" as used with reference to "Loss of Use" means the total and irrecoverable loss of use provided the loss is continuous for 12 consecutive months and such loss is determined to be permanent.

All claims submitted under this policy for Loss of Use must be verified by agreement between a licensed practicing physician appointed by the Policyholder and a licensed practicing physician appointed by the Company, or in the event that the two physicians so appointed cannot arrive at an agreement, a third licenced practicing physician shall be selected by the first two physicians and the majority decision of the three physicians shall be binding on the Policyholder and the Company.

Indemnity provided under this Section for all losses sustained by any one (1) Insured Person as the result of any one (1) accident will not exceed the Principal Sum, with the exception of quadriplegia, paraplegia and hemiplegia, where indemnity will not exceed Two Times the Principal Sum.

Rehabilitation Benefit

Pays the expenses incurred for occupational training to a maximum of \$10,000 if such expenses are incurred within 2 years of and as a result of an injury for which you receive a benefit under the Plan.

Home Alteration and Vehicle Modification Benefit

Pays a one-time benefit of up to \$10,000 for modification to your home or vehicle if you suffer an injury for which you receive a benefit under the Plan and require a wheelchair to be ambulatory.

In-Hospital Benefit

Pays a benefit of (i) 1% of the Principal Sum to a maximum of \$2,500 per month for hospital confinements of more than 30 nights, or (ii) 1/30th of the amount determined under (i) for hospital confinements of more than 5 but less than 30 nights, if you suffer an injury for which you receive a benefit under the Plan and are confined to hospital as a result of such injury, for a maximum of twelve months.

Family Transportation

Pays a benefit of up to \$10,000 for the expenses incurred for the transportation of an immediate family member to your hospital if you suffer an injury for which you receive a benefit under the Plan and as a result are confined to a hospital more than 200 kilometres from home.

Repatriation Benefit

Pays a benefit of up to \$10,000 to cover the expenses to return your body to your city of residence if you suffer a covered accidental death while at least 200 kilometres from home.

Identification Benefit

Pays a benefit of up to \$5,000 for the transportation and commercial lodging of an immediate family member to identify your body if you suffer a covered accidental death at least 150 kilometres from home and a law enforcement agency requests such identification.

Seat Belt Benefit

Pays an additional benefit of 10% of the Principal Sum if you suffer a covered accidental death while operating or riding as a passenger in a private passenger automobile in which your seat belt was properly fastened.

Day Care Benefit

Pays an annual benefit of up to 3% of the Principal Sum to a maximum of \$5,000 per year for the day care costs of each Dependent Child under age 13 who is enrolled, or who enrolls within 90 days, in a day care facility if you suffer a covered accidental death. The benefit is payable for up to four consecutive years.

Pays an annual benefit of up to 5% of the Principal Sum to a maximum of \$5,000 per school year for the tuition costs of each Dependent Child who is enrolled in post-secondary education if you suffer a covered accidental death. The benefit is payable for up to four consecutive years.

Spousal Educational Benefit

Pays a benefit of up to \$10,000 for your Spouse's expenses in enrolling in a professional or trades training program for the purpose of obtaining an independent source of income, if you suffer a covered accidental death and such expenses are incurred within 36 months of your death.

Waiver of Premium

Waives premium payments under the Plan if you are receiving disability benefits under the group life insurance policy provided by the Policyholder.

Continuance of Coverage

Your coverage will continue for up to 12 months during a temporary lay-off, short-term disability leave, approved leave of absence or maternity leave provided premiums are paid.

Conversion Privilege Benefit

If you leave your job for any reason, you have 90 days to convert your coverage under the Plan to an individual insurance policy providing comparable coverage and with a coverage amount not greater than the Principal Sum at individual rates in force at that time.

Policy Exclusions

The Plan will not cover any losses caused in whole or in part by, or resulting in whole or in part from, the following:

- (a) suicide or any attempt thereat by the Insured Person while sane or self destruction or any attempt thereat by the Insured Person while insane;
- (b) injury sustained in consequence of riding as a passenger or otherwise in any vehicle or device for aerial navigation, except as provided in Part B of Section II, Definition of Injury and Scope of Coverage;
- (c) declared or undeclared war or any act thereof;
- (d) active full time service in the armed forces of any country.

Aggregate Limit per Accident

The maximum amount the Company will pay for two or more Insured Employees injured in one accident is the amount of the Aggregate Limit per Accident set out in the policy, if any. If the total of the benefits which would be paid by the Company would exceed the Aggregate Limit per Accident, each Insured Employee shall receive their proportionate share of the amount of the Aggregate Limit per Accident paid by the Company.

Effective Date

Your coverage begins on the date you satisfy the definition of "Insured Employee".

Termination Date

Coverage ends on the earliest of:

- 1. the date the policy is terminated;
- 2. the premium due date if premiums are not paid when due;
- 3. the date you no longer satisfy the definition of an Insured Employee; or
- 4. the first day of the month following the date you no longer belong to an Eligible Class of Employees as set out in the Policy.

This brochure provides only brief descriptions of the coverage available. The full details of the coverage are contained in the Policy including limitations, exclusions and termination provisions. If there are any conflicts between this document and the Policy, the Policy shall govern. Insurance is underwritten by AIG Insurance Company of Canada.

Issued: March-19