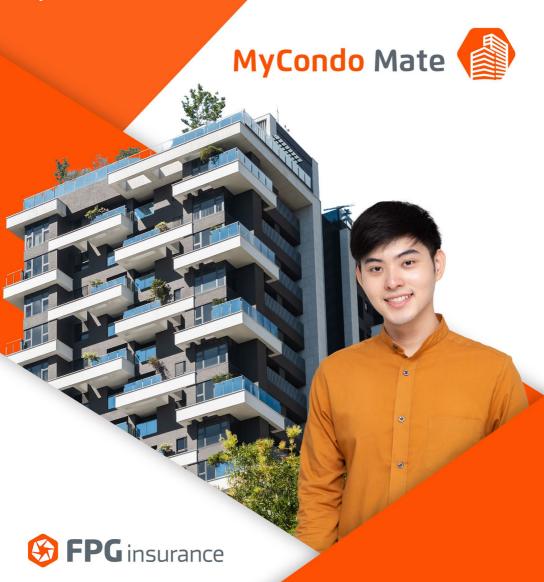
Protect your home and ensure peace of mind.





Owning a condo is more than just having a place to call home it's a valuable investment. To ensure your investment is fully protected, it's essential to have a condo insurance. While the condo association carries a master insurance policy, it may not cover your individual unit and personal belongings.

FPG Insurance's **MyCondo Mate** is vital for protecting your condo investment, personal belongings, and financial well-being. It offers comprehensive coverage for property damage, personal liability, loss of use, and loss assessment, providing you with the peace of mind you deserve as a condo owner.



### **SECTION I. PERIL**

### **COVERS PHYSICAL LOSS OR DAMAGE TO THE COVERED PROPERTY ARISING FROM THE FOLLOWING PERILS:**

- · Fire or Lightning
- Earthquake
- Typhoon or Windstorm including Flood or Overflow
- Flood or Overflow of the Sea
- Volcanic Eruption (excluding locations that are in the 50km radius from the mouth of the volcanoes)
- Subterranean Fire

- Extended Coverage against Explosion, Falling Aircraft, Vehicular Impact, and Smoke Damage)
- Riot, Strike, and Malicious Damage
- · Broad Water Damage 5% of the total sum insured
- Bursting or Overflowing of any water tank apparatus or pipe - 5% of the total sum insured
- Fire Fighting Expense 5% of the sum insured, minimum of Php 100,000
- · Personal Liability to the Public which the Insured may be legally liable for bodily injury or property damage sustained by a third party up to Php 200,000.00

### SECTION II. ADDITIONAL COVERAGE

### A. OWNER, AND NON-RESIDENT

- Loss of Rent, up to 10% of the Building sum insured plus 10% of the Contents sum insured, maximum limit of Php 10,000.00 per month, up to 6 months
- · Debris Removal expense up to 10% of the building sum insured
- Accidental breakage of fixed glass due to named perils Php 50,000.00
- Architects and surveyor's fee up to 5% of the building sum insured

#### **Warranties & Clauses:**

- Automatic Increase Clause 10% within 60 days Automatic Extension of Period of Insurance Clause

- Designation Clause Misdescription Clause
- ☑ Breach of Conditions Clause

- ☑ No Control Clause☑ Residential Occupa

### **Exclusions:**

- ☑ Electronic Data Recognition Exclusion
   ☑ Terrorism & Sabotage Exclusion Clause
   ☑ Total Asbestos Exclusion Clause
- ☑ Property Cyber and Data Exclusion (LMA5401)

### **B. TENANTS**

- Robbery / Burglary / Housebreaking 5% of the contents sum insured, maximum of Php 200,000.00
- Alternative Accommodation, up to 10% of the Contents sum insured, maximum limit of Php 10,000.00 per month, up to 6 months
- Loss / damage of contents temporarily removed by professional movers 1% of the contents sum insured for each and every loss
- Replacement of locks and keys due to named perils Php 5,000 each and every loss
- Automatic coverage for Platinum, Gold, Silver, Jade articles, Jewelry, and Furs up to one-third (1/3) of the Contents sum insured, unless specially agreed herein, max. limit of Php 50,000.00
   Internal Removal up to 10% of the contents sum insured
- Visitors Personal Effects up to 5% of the contents sum insured, max. limit of Php 5,000.00
- Accidental Death (AD) to the Insured's Family (due to fire, violent external means or caused by thieves whilst
  within the insured's premises) covers the insured and spouse (below 65 years old) and unmarried children
  (1 to 22 years old) still residing with the Assured.

| BENEFITS   | LIMITS         |  |
|--|----------------|--|
| Accidental Death benefit for Principal Insured   | Php 100,000.00 |  |
| Accidental Death benefit for Spouse              | Php 50,000.00  |  |
| Accidental Death benefit for Children (max of 4) | Php 25,000.00  |  |
| Aggregate limit for Accidental Death             | Php 250,000.00 |  |
|  |                |  |

 Accidental Medical Reimbursement (AME) to the Insured's family (due to fire, violent external means, or caused by thieves whilst within the insured's premises) - covers the insured and spouse (below 65 years old) and unmarried children (1 to 22 years old) still residing with the Assured

| BENEFITS   | LIMITS        |  |  |
|--|---------------|--|--|
| Accidental Medical Expense for Principal Insured   | Php 10,000.00 |  |  |
| Accidental Medical Expense for Spouse              | Php 5,000.00  |  |  |
| Accidental Medical Expense for Children (max of 4) | Php 2,500.00  |  |  |
| Aggregate limit for Accidental Medical Expense     | Php 25,000.00 |  |  |

- Household employee (including gardeners and drivers) Accidental Death and Bodily Injury Php 10,000.00 per household employee, with the aggregate limit of Php 20,000.00
- · Personal belongings of household employee 10% of the contents sum insured, maximum of Php 5,000.00

### C. OWNER - RESIDENT

All benefits mentioned under A and B

### **Definition of Benefits**



### **FIRE AND LIGHTNING**

- NIL



## EARTHQUAKE/TYPHOON OR WINDSTORM/FLOOD/VOLCANIC ERUPTION

2% of the Actual Cash Value of the property affected at the time of the loss (per standard PIRA deductible wordings)

The following shall be considered as separate items of insured property, regardless of what is indicated in the policy schedule:

- 1. Each building, including machinery, equipment, and fixtures normal to its operations;
- 2. All machinery and equipment contained in each building;
- All stocks in trade (raw materials, work-in-process, supplies, and finished goods), contained in each building;
- 4. All other contents contained in each building



### **EXTENDED COVERAGE**

1% of the sum insured on the affected item at the time of the loss, subject to a minimum of Php 1,000.00 and a maximum of Php 500,000.00 in respect of aircraft, smoke, explosion, and vehicle impact. (per standard PIRA deductible wordings)



## BROAD WATER DAMAGE, BURSTING OR OVERFLOWING OF WATER TANK APPARATUS OR PIPES, AND SPRINKLER LEAKAGE

Php 20,000.00 for each and every loss



### ROBBERY, BURGLARY OR HOUSEBREAKING

Php 5,000.00 for each and every loss



### **ALTERNATIVE ACCOMMODATION**

Seven (7) Days Waiting Period



### PERSONAL LIABILITY

Php 5,000.00 for each and every claim for Third Party Property Damage



### **PLATE GLASS**

Php 2,500.00 for each and every loss



Don't leave the fate of your condo investment to chance. Protect it with MyCondo Mate insurance today. With our comprehensive coverage, you can have the peace of mind you deserve, knowing that your valuable investment is protected. Contact us today to explore the options and ensure the full protection of your valuable condo investment.

### **FOLLOW US ON OUR SOCIAL MEDIA ACCOUNTS:**



# MYCONDO MATE (Premium Excluding Charges)

| SUM INSURED   | TOTAL PREMIUM |  |  |  |  |
|---------------|---------------|--|--|--|--|
| 500,000.00    | 750.00        |  |  |  |  |
| 1,000,000.00  | 1,500.00      |  |  |  |  |
| 2,000,000.00  | 3,000.00      |  |  |  |  |
| 3,000,000.00  | 4,500.00      |  |  |  |  |
| 4,000,000.00  | 6,000.00      |  |  |  |  |
| 5,000,000.00  | 7,500.00      |  |  |  |  |
| 6,000,000.00  | 9,000.00      |  |  |  |  |
| 7,000,000.00  | 10,500.00     |  |  |  |  |
| 8,000,000.00  | 12,000.00     |  |  |  |  |
| 9,000,000.00  | 13,500.00     |  |  |  |  |
| 10,000,000.00 | 15,000.00     |  |  |  |  |
| 11,000,000.00 | 16,500.00     |  |  |  |  |
| 12,000,000.00 | 18,000.00     |  |  |  |  |
| 13,000,000.00 | 19,500.00     |  |  |  |  |
| 14,000,000.00 | 21,000.00     |  |  |  |  |
| 15,000,000.00 | 22,500.00     |  |  |  |  |
| 16,000,000.00 | 24,000.00     |  |  |  |  |
| 17,000,000.00 | 25,500.00     |  |  |  |  |
| 18,000,000.00 | 27,000.00     |  |  |  |  |
| 19,000,000.00 | 28,500.00     |  |  |  |  |
| 20,000,000.00 | 30,000.00     |  |  |  |  |

<sup>\*</sup>In every additional Php 500,000.00 in Sum Insured additional premium of Php 750.00 for MyCondo Mate.

|   | APPLICAN                        | IT'S INFORMA                       | MOIT     |                          |                            |  |  |  |
|---|---------------------------------|------------------------------------|----------|--------------------------|----------------------------|--|--|--|
| Name:   | First N                         | Name                               |          | Middle Name              | Suffix                     |  |  |  |
| Mailing Address:  Block/Lot/Phase No./Floor No./Unit No.  | Stre                            | Street Village/Subdivision/Condo i |          |                          | ding Barangay              |  |  |  |
| City/Municipality   | Pri                             |                                    |          |                          | ZIP Code                   |  |  |  |
| Mobile No.:   | Province/State  E-mail Address: |                                    |          | TIN/SSS/GSIS No.:        |                            |  |  |  |
| Gender: Male Female   | Civil Status: Single Married    |                                    |          | Date of Birth:           |                            |  |  |  |
| Place of Birth:   |                                 | Citizenship/Nationality:           |          |                          |                            |  |  |  |
| Source of Funds: Self-Employed Salary Name of Employer/Business:                                      |                                 |                                    |          |                          |                            |  |  |  |
| Nature of Employment/Business:  |                                 |                                    |          |                          |                            |  |  |  |
| PROPERTY INFORMATION  |                                 |                                    |          |                          |                            |  |  |  |
| Location of Risk: Block/Lot/Phase No./Floor No./Unit No.  | Stre                            | eet                                | Village/ | 'Subdivision/Condo Build | ding Barangay              |  |  |  |
| City/Municipality   | Pri                             | rovince/State                      |          |                          | ZIP Code                   |  |  |  |
| Please check the appropriate box.  Any previous loss? Yes No Mortgagee (if mortgaged)                 |                                 |                                    |          |                          |                            |  |  |  |
| Year last renovated:  |                                 | Estimated Floor Area of Unit:      |          |                          |                            |  |  |  |
| PERSONAL ACCIDENT INSURANCE   |                                 |                                    |          |                          |                            |  |  |  |
|   | FAMILY PE                       | RSONAL ACCI                        | DENT     |                          |                            |  |  |  |
| Name<br>Last Name, First Name, Middl  | e Name                          | Re                                 | lations  | ship                     | Birthday                   |  |  |  |
|   |                                 |                                    |          |                          |                            |  |  |  |
|   |                                 |                                    |          |                          |                            |  |  |  |
|   |                                 |                                    |          |                          |                            |  |  |  |
|   |                                 |                                    |          |                          |                            |  |  |  |
|   |                                 |                                    |          |                          |                            |  |  |  |
| HOUSEHOLD EMPLOYEE PERSONAL ACCIDENT  |                                 |                                    |          |                          |                            |  |  |  |
| Important Note: In case of claim, any payslip, SSS remittance, etc., must be period of Insurance: To: | proof of employmer<br>rovided.  | nt such as but not lin             |          |                          | signed before the acident, |  |  |  |
| Signature over Printed N  | ame of Applicant/               | /Insured                           |          |                          | DD-MMM-YYYY<br>Date        |  |  |  |

