الشركة العربية السعودية للتأمين التعاوني
Saudi Arabian Cooperative Insurance Co.

سايكو
للتأمين

CUSTOMER PROTECTION PRINCIPLES

2026

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SECTION ONE

Introduction

1. Customer Protection in the Insurance Sector in the Kingdom of Saudi Arabia

The Saudi Arabian Cooperative Insurance Company (SAICO) is committed to protecting the rights of its customers and beneficiaries and considers this a fundamental pillar of all its business activities. This commitment stems from its responsibility to provide insurance products and services that are fair, transparent, professional, and of high quality.

These Principles are based on the laws, regulations, and instructions issued by the Insurance Authority and other relevant regulatory authorities in the Kingdom of Saudi Arabia, as well as on local and international best practices for customer protection. They aim to strengthen confidence in the insurance sector, enhance the quality of insurance services, promote fairness and transparency, and enable customers to make informed insurance decisions based on clear and comprehensive information.

These Principles represent the general framework governing the relationship between the Company and its customers and beneficiaries throughout the entire insurance journey, starting from the design, development, and marketing of insurance products, through the provision of advice, issuance of insurance policies, claims management, after-sales services, and dispute resolution, ensuring the delivery of a fair, transparent, and efficient insurance experience.

The Company is committed to continuously developing its policies and procedures and periodically reviewing its practices to keep pace with regulatory developments and international best practices, promote innovation and digital transformation, strengthen customer protection, enhance the customer experience, and contribute to achieving the objectives of the insurance sector in the Kingdom of Saudi Arabia.

2. Purpose

These Principles aim to:

- Establish a customer protection culture as a shared responsibility of all Company employees.
- Ensure that customers receive fair and equitable treatment throughout all stages of the insurance relationship.
- Promote transparency and disclosure, enabling customers to make informed decisions based on clear and comprehensive information.

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- Improve the quality of insurance products and services and enhance the customer experience across all communication channels and service platforms.
- Protect customers' rights and personal data while maintaining confidentiality in accordance with applicable laws, regulations, and instructions.
- Provide clear, fair, and effective mechanisms for handling complaints, inquiries, and objections within the prescribed regulatory timeframes.
- Enhance insurance awareness and education, enabling customers to understand their rights, obligations, and how to benefit from insurance products and services.
- Promote fair competition and innovation in insurance products and services to deliver greater value to customers.
- Support continuous improvement by measuring customer satisfaction, analyzing feedback, complaints, and performance indicators, and using the results to improve products, services, and procedures.

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3. Scope of Application

These Principles apply to all insurance products and services provided by the Company and cover all existing and prospective customers and beneficiaries.

They also apply to the Company's employees, branches, digital channels, contact center, agents, brokers, service providers, and any third parties acting on behalf of the Company. The Company remains responsible for protecting customers' rights and ensuring compliance with these Principles.

The Company is committed to ensuring that all parties providing services on its behalf comply with the applicable laws, regulations, and instructions, in a manner that safeguards customers' rights and ensures the quality of the services provided.

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SECTION TWO
Definitions

For the purposes of these Principles, the following terms and expressions shall have the meanings assigned to them below, unless the context requires otherwise:

Term	Definition
Authority	The Insurance Authority of the Kingdom of Saudi Arabia.
Company	The Saudi Arabian Cooperative Insurance Company (SAICO).
Customer	Any natural or legal person who obtains, or intends to obtain, any of the Company's products or services, whether directly or indirectly.
Beneficiary	The natural or legal person entitled to receive the benefit or compensation in accordance with the Insurance Policy.
Policyholder	The natural or legal person who has entered into an insurance contract with the Company.
Insurance Policy	The contract that defines the rights and obligations of the parties to the insurance relationship, including the terms of coverage, exclusions, and benefits.
Insurance Product	Any insurance product or insurance coverage provided by the Company to insure risks in accordance with the terms of the Insurance Policy.
Insurance Service	Any service provided by the Company before, during, or after the validity of the Insurance Policy, including claims handling and customer service.
Claim	A request submitted by the Policyholder or the Beneficiary to obtain compensation or benefits due under the Insurance Policy.
Complaint	Any expression of dissatisfaction by a Customer regarding a product, service, process, or interaction with the Company, whether submitted verbally, in writing, or electronically.
Complaint Handling	All procedures undertaken by the Company to review, respond to, and resolve complaints fairly, effectively, and within the applicable regulatory timeframes.
Inquiry	A request submitted by a Customer seeking information or clarification regarding any product, service, or process related to the Company.
Request	A request submitted by a Customer to obtain a product, service, or to perform an action relating to an Insurance Policy.
Personal Data	Any information relating to an identified or identifiable natural person, in accordance with the applicable laws and regulations.
Official Channels	All communication channels approved by the Company, including branches, the Contact Center, the website, mobile applications, email, and any other approved digital channels.
Third Party	Any entity contracted by the Company to provide a service or perform part of its activities on its behalf, while the Company remains responsible for protecting customers' rights.
Conflict of Interest	Any situation that may affect, or appears likely to affect, the impartiality or integrity of decisions or services provided to customers.
Insurance Fraud	Any act or omission involving the submission of false or misleading information or documents with the intention of obtaining a benefit, compensation, or service without legal entitlement.
Business Day	A day on which the Company conducts its business, excluding weekends and official public holidays.

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SECTION THREE

General Code of Conduct

These Rules aim to explain our commitments to you when providing our insurance products and services, ensuring that you receive a clear, fair, and secure experience in accordance with the laws, regulations, and instructions issued by the Insurance Authority.

Rule (1): Reading and Understanding Your Insurance Policy

At SAICO, we believe that understanding your Insurance Policy and being fully aware of your rights and obligations is the foundation of a sound insurance relationship. Therefore, we are committed to enabling you to review all documents relating to your Insurance Policy before entering into the insurance contract.

Accordingly, we are committed to:

- Encouraging you to read your Insurance Policy, its endorsements, terms and conditions, and all related documents before the Policy is issued or accepted.
- Giving you sufficient time to review and understand the contents of the Insurance Policy before making your purchasing decision.
- Explaining any provisions, conditions, or exclusions that may affect your rights or obligations whenever you request clarification.
- Making the latest version of the Insurance Policy and its terms and conditions available through our official website and approved communication channels whenever applicable.
- Ensuring that you receive all documents requiring your acknowledgement or acceptance before the insurance contract is concluded.

Rule (2): Clarity of Information

We are committed to providing all information relating to our insurance products and services in a clear, accurate, and understandable manner to enable you to make informed decisions.

Accordingly, we are committed to:

- Providing information in clear and simple language.
- Ensuring that the information provided is accurate, complete, and kept up to date.
- Avoiding the use of misleading, inaccurate, or ambiguous information.

Clearly explaining the benefits, insurance coverages, exclusions, and obligations relating to the insurance product or service.

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Rule (3): Terms and Conditions

We are committed to ensuring that all terms and conditions relating to our insurance products and services are presented clearly and are easy to understand before the Insurance Policy is concluded.

Accordingly, we are committed to:

- Including all material terms and conditions in the application for the insurance product or service.
- Clearly explaining any risks, exclusions, or limitations that may affect the insurance coverage.
- Drafting Insurance Policies and their terms and conditions in clear and easy-to-understand Arabic.
- Providing an English version upon your request, where available.

Rule (4): Notification of Changes

If any amendment is made to the terms and conditions or to any provision that may affect your rights or obligations, we are committed to notifying you in accordance with the applicable laws, regulations, and instructions.

Accordingly, we are committed to:

- Notifying you of any material amendment to the Insurance Policy, its terms and conditions, or any related services before such amendment becomes effective, where applicable.
- Using our official and approved communication channels to send such notifications.
- Enabling you to understand the impact of the amendment and any options or actions available to you under the applicable laws and regulations.

Rule (5): Pre-Contractual Disclosure

Before issuing your Insurance Policy, we are committed to providing you with the key information you need to understand the insurance product and determine whether it meets your needs.

Accordingly, we are committed to:

- Clearly explaining the scope of insurance coverage.
- Explaining the main exclusions, conditions, and limitations applicable to the Insurance Policy.
- Disclosing the insurance premium and any applicable fees or charges, if any.
- Explaining your rights and obligations before the Insurance Policy is issued.
- Responding to your inquiries before the insurance contract is concluded.

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Rule (6): Clarity of Documents

We are committed to ensuring that all documents provided to you are clear, easy to read, and contain all necessary information before they are approved or signed.

Accordingly, we are committed to:

- Using clear and legible text in Insurance Policies, endorsements, forms, disclosure documents, and all related documentation.
- Never requesting your signature or approval on any incomplete document.
- Safeguarding your documents and records in accordance with the applicable laws, regulations, and instructions.
- Protecting your signature and personal information against any unauthorized use.

Rule (7): Providing You with Documents

You have the right to receive copies of all documents relating to your Insurance Policy or insurance service. Accordingly, we are committed to providing them to you in the format that best suits your needs.

Accordingly, we are committed to:

- Providing you with a printed or electronic copy of your Insurance Policy, according to your preference.
- Providing you with all endorsements, terms and conditions, and any other related documents.
- Providing you with any amendments or updates made to your Insurance Policy in accordance with the applicable laws, regulations, and instructions.
- Maintaining records evidencing the delivery of documents whenever required.

Rule (8): Fees and Charges

We are committed to full transparency regarding the premiums, fees, and charges associated with our insurance products and services.

Accordingly, we are committed to:

- Clearly informing you of the insurance premium and any applicable fees, charges, or amounts payable before the insurance contract is concluded.
- Not imposing any additional fees or charges after the Insurance Policy has been issued, unless such fees are permitted under the applicable laws and regulations or are subject to your consent where required.
- Informing you of any fees payable to third parties, where applicable, before the insurance contract is concluded.

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Rule (9): Disclosure of Fees

We are committed to ensuring that all fees and charges relating to our insurance products and services are disclosed to you clearly and transparently.

Accordingly, we are committed to:

- Publishing applicable fees and charges, where any apply, through our official website and approved communication channels.
- Enabling you to review any applicable fees or charges before obtaining an insurance product or service.
- Informing you of any updates to applicable fees and charges in accordance with the relevant laws, regulations, and instructions.

Rule (10): Your Requests and Claims

We are committed to handling your requests and insurance claims efficiently and transparently while keeping you informed throughout the process.

Accordingly, we are committed to:

- Providing you with a reference number when you submit an application for an insurance product or service.
- Acknowledging receipt of your request and informing you of the expected processing timeframe.
- Informing you whether your request has been approved or declined, together with the reasons for rejection and the available objection procedures, where applicable.
- When you submit an insurance claim, notifying you of the claim decision within the applicable regulatory timeframes, including:
    - Where the claim is fully or partially accepted: the settlement amount, the basis on which it was calculated, and the reasons for any reduction, if applicable.
    - Where the claim is declined: the reasons for the rejection together with the supporting basis for the decision, upon request.

Rule (11): Protecting Your Information

Your privacy is one of our highest priorities, and we are committed to protecting your information at all times.

Accordingly, we are committed to:

- Protecting your personal and insurance-related information against unauthorized access, use, disclosure, or modification.
- Using your information only for the purposes for which it was collected or as otherwise permitted by applicable laws and regulations.
- Applying appropriate security controls and procedures to safeguard your information across all our communication channels.
- Restricting access to your information to authorized personnel only.

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Rule (12): Electronic Services

We are committed to providing secure and reliable electronic services that enable you to access our insurance products and services conveniently and efficiently.

Accordingly, we are committed to:

- Providing appropriate authentication methods to protect your accounts and personal information.
- Protecting your electronic transactions through appropriate security controls.
- Clearly explaining the purpose of verification messages and electronic notifications sent to you.
- Taking the necessary measures to address any security risks or incidents that may affect our electronic services.

Rule (13): Service Continuity

We are committed to maintaining the continuity of our services and minimizing the impact of any interruption that may affect you.

Accordingly, we are committed to:

- Ensuring the continuity of our products and services in accordance with industry best practices.
- Restoring any technical malfunction or service disruption as quickly as possible.
- Notifying affected customers of any material interruption or disruption whenever reasonably practicable.
- Taking the necessary corrective measures to address any consequences resulting from technical or operational failures in accordance with the applicable laws, regulations, and instructions.

Rule (14): Competence of Our Employees

We believe that outstanding customer service begins with qualified and competent employees who are committed to serving you professionally.

Accordingly, we are committed to:

- Providing our employees with continuous training on insurance products and services.
- Developing their customer service and communication skills.
- Promoting compliance with applicable laws, regulations, professional ethics, and the Company's code of conduct.
- Ensuring that our employees possess the knowledge and competence required to provide accurate information and respond to your inquiries professionally and efficiently.

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Rule (15): Service Quality

We are committed to delivering insurance services of the highest quality and professionalism and to continuously enhancing our performance to provide you with the best possible customer experience.

Accordingly, we are committed to:

- Monitoring the quality of services provided through all customer communication channels.
- Continuously improving the knowledge and capabilities of our employees to ensure professional service delivery.
- Ensuring that our employees adhere to the highest standards of professional conduct and ethical behavior.
- Using customer feedback to continuously improve the quality of our products and services.

Rule (16): Customer Education and Awareness

We believe that an informed customer is better equipped to make sound insurance decisions. Therefore, we are committed to providing you with the information and guidance necessary to understand our insurance products and services.

Accordingly, we are committed to:

- Publishing educational content explaining our insurance products, services, benefits, and associated risks.
- Raising awareness of insurance fraud prevention and protection measures.
- Providing information and guidance to help you make the best use of your insurance coverage.
- Offering multiple channels through which you can obtain information and submit inquiries.

Rule (17): Communication Channels

We are committed to providing multiple, accessible, and convenient communication channels to enable you to contact us through the method that best suits your needs.

Accordingly, we are committed to:

- Providing various channels for receiving complaints, inquiries, and service requests.
- Enabling you to communicate with us through our Contact Center, website, mobile applications, email, branches, and other approved communication channels.
- Continuously enhancing our communication channels to improve your overall customer experience.

Rule (18): Complaint Handling Process

We are committed to providing a clear and accessible complaint handling process to ensure that complaints are addressed fairly and promptly.

Accordingly, we are committed to:

- Publishing the complaint submission process through our official website and communication channels.
- Clearly explaining the steps for submitting and following up on complaints.
- Providing easy access to information relating to complaint handling procedures.

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Rule (19): Handling Complaints and Inquiries

We are committed to handling complaints and inquiries with fairness, transparency, and due care, and to resolving them within the applicable regulatory timeframes.

Accordingly, we are committed to:

- Providing you with a reference number upon registering your complaint or inquiry.
- Informing you of the expected timeframe for handling your complaint.
- Enabling you to track the status of your complaint through our approved communication channels.
- Providing you with a clear and comprehensive response, including the reasons for our decision where applicable.
- Informing you of your right to escalate your complaint to the Insurance Authority if you are not satisfied with the outcome, in accordance with the applicable laws, regulations, and instructions.

Rule (20): Enhancing the Customer Experience

We are committed to continuously improving the quality of our services and enhancing our customers' experience by listening to their feedback and making meaningful improvements.

Accordingly, we are committed to:

- Measuring customer satisfaction on a regular basis.
- Using the outcomes of complaints and inquiries to improve our products and services.
- Enhancing our processes to improve service quality and efficiency.
- Regularly reviewing customer service performance indicators and implementing continuous improvement initiatives.

Rule (21): Access to Your Documents

You have the right to obtain documents relating to your Insurance Policy and the services you have received. Accordingly, we are committed to making such documents available to you upon request within the applicable regulatory timeframes.

Accordingly, we are committed to:

- Providing you with a copy of your application for an insurance product or service upon request.
- Providing you with the latest version of the applicable terms and conditions.
- Providing you with a copy of your Insurance Policy and any related endorsements or agreements.
- Providing you with any other documents you are entitled to receive under the applicable laws, regulations, and instructions.

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Rule (22): Easy Access to Us

We are committed to making it easy for you to communicate with us by providing multiple and convenient communication channels.

Accordingly, we are committed to:

- Providing a unified or toll-free telephone number for your inquiries and complaints, where applicable.
- Offering electronic communication channels through our website, mobile applications, and email.
- Clearly publishing all official communication channels on our website and at our branches.
- Allowing you to choose the communication channel that best suits your needs.

Rule (23): Consideration of Humanitarian Circumstances

We recognize that some customers may experience exceptional circumstances that affect their ability to fulfil certain insurance-related obligations or procedures. Accordingly, we are committed to considering such circumstances fairly and in accordance with the applicable laws, regulations, and instructions.

Accordingly, we are committed to:

- Assessing humanitarian cases fairly and objectively.
- Giving due consideration to exceptional circumstances whenever appropriate and permissible under the applicable laws and regulations.
- Explaining the available options or procedures in a manner that protects the rights and interests of all parties.

Note: Within the insurance sector, this Rule has been adapted from its original financial services context to reflect the nature of the insurance relationship.

Rule (24): Equality and Non-Discrimination

We are committed to treating all our customers fairly, equitably, and with respect, and to providing our insurance products and services without any unjustified discrimination.

Accordingly, we are committed to:

- Treating you with respect, professionalism, and fairness throughout every stage of the insurance relationship.
- Not discriminating against any customer on the basis of gender, age, disability, marital status, or any other grounds not permitted by applicable laws and regulations.
- Applying fair and consistent procedures when providing insurance products and services and when handling insurance claims and complaints.

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Rule (25): Availability of the Customer Protection Principles

We believe that understanding your rights strengthens your confidence in our products and services. Therefore, we are committed to making these Customer Protection Principles readily available to you at all times.

Accordingly, we are committed to:

- Publishing the Customer Protection Principles on our official website.
- Making these Principles available through our official communication channels whenever appropriate.
- Updating the published version whenever amendments are approved.

Rule (26): Business Hours and Service Channels

We are committed to providing clear information regarding our business hours and service channels, enabling you to access our products and services conveniently.

Accordingly, we are committed to:

- Publishing the official business hours of our branches and Contact Center through our website and branches.
- Clearly communicating the operating hours of our telephone and digital service channels.
- Notifying you of any material changes to our business hours or service channels through appropriate communication methods.

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SECTION FOUR

Specific Rules of Conduct

Rule One: Design and Development of Insurance Products and Services

The Company is committed to designing and developing insurance products and services that serve the best interests of customers, meet their needs, and comply with the laws, regulations, and instructions issued by the Insurance Authority.

Accordingly, the Company is committed to:

1-1 Designing insurance products and services that take into consideration the needs of the target customer segments.

1-2 Conducting appropriate reviews before launching or amending any insurance product or service to ensure that it is suitable, transparent, and free from unfair conditions or unreasonable risks.

1-3 Ensuring that Insurance Policies clearly describe the benefits, insurance coverages, exclusions, rights, and obligations.

1-4 Periodically reviewing insurance products to ensure that they continue to meet customers' needs.

1-5 Taking the necessary corrective actions whenever any deficiency in an insurance product or service is identified that could adversely affect customers' rights.

Rule Two: Advertising and Marketing

The Company is committed to ensuring that all advertising and marketing activities relating to its insurance products and services are fair, transparent, and not misleading.

Accordingly, the Company is committed to:

2-1 Ensuring honesty and transparency in all advertising and marketing materials.

2-2 Refraining from including any false, misleading, inaccurate, or exaggerated statements in advertisements.

2-3 Clearly disclosing key benefits and material exclusions whenever appropriate.

2-4 Refraining from making promises or guarantees that are not supported by the Insurance Policy or the applicable laws and regulations.

2-5 Complying with the advertising requirements and instructions issued by the Insurance Authority.

2-6 Respecting customers' privacy and refraining from using their personal data for marketing purposes except in accordance with the applicable laws, regulations, and instructions.

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Rule Three: Communication with Customers Prior to Contracting

The Company is committed to providing customers with sufficient information before entering into an insurance contract, enabling them to make informed decisions.

Accordingly, the Company is committed to:

3-1 Providing customers with all material information relating to the insurance product or service.

3-2 Clearly explaining the benefits, insurance coverages, exclusions, terms, and conditions.

3-3 Disclosing the insurance premium, applicable fees, and any financial obligations to be borne by the customer.

3-4 Responding to customers' inquiries clearly, accurately, and professionally.

3-5 Allowing customers to review the Insurance Policy before it is issued or accepted.

Rule Four: Advice and Product Suitability

When providing advice or recommending an insurance product or service, the Company is committed to taking the customer's needs and circumstances into consideration to help them select the most suitable product.

Accordingly, the Company is committed to:

4-1 Taking the customer's insurance needs and objectives into consideration when providing recommendations, where applicable.

4-2 Refraining from recommending an insurance product or service that is not suitable for the customer where the available information indicates that it does not meet the customer's needs.

4-3 Explaining the basis on which the recommendation was made whenever requested by the customer.

4-4 Avoiding any practices or undue pressure that could influence the customer's freedom to make an independent decision.

Rule Five: Entering into the Insurance Contract

The Company is committed to concluding insurance contracts in a manner that ensures fairness, transparency, and the protection of the rights of all parties.

Accordingly, the Company is committed to:

5-1 Issuing the Insurance Policy after all applicable regulatory requirements have been fulfilled.

5-2 Providing the customer with the Insurance Policy and all related endorsements through the appropriate delivery method.

5-3 Ensuring that all information contained in the Insurance Policy is accurate and complete.

5-4 Notifying the customer of any amendments to the Insurance Policy in accordance with the applicable laws, regulations, and instructions.

5-5 Maintaining records relating to the issuance of Insurance Policies in accordance with the applicable regulatory retention requirements.

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Rule Six: Post-Contract Customer Services

The Company is committed to providing efficient and transparent post-contract services to ensure that customers continue to receive insurance services in accordance with the applicable laws, regulations, and the terms of the Insurance Policy.

Accordingly, the Company is committed to:

6-1 Providing multiple approved channels through which customers may obtain services, submit inquiries, and request support.

6-2 Processing customer requests within the applicable regulatory timeframes and notifying customers of the status of their requests whenever material updates occur.

6-3 Enabling customers to update their personal information and Insurance Policy details in accordance with the applicable laws, regulations, and instructions.

6-4 Providing customers, upon request, with information relating to their Insurance Policies, claims, or the services provided to them.

6-5 Maintaining a high standard of service quality and continuously improving the services provided to customers.

Rule Seven: Insurance Claims

The Company is committed to handling insurance claims fairly, transparently, and efficiently, in accordance with the terms of the Insurance Policy and the applicable laws, regulations, and instructions.

Accordingly, the Company is committed to:

7-1 Providing clear and accessible channels for the submission of insurance claims.

7-2 Providing the customer with a reference number to facilitate claim tracking.

7-3 Notifying the customer of any documents or information required to complete the claim assessment process.

7-4 Processing insurance claims within the applicable regulatory timeframes and informing the customer of any delays and the reasons for such delays, where necessary.

7-5 Notifying the customer of the outcome of the claim immediately upon completion of the assessment.

7-6 Where a claim is wholly or partially declined, clearly explaining the reasons for the rejection or reduction, with reference to the relevant contractual provisions and applicable regulatory requirements.

7-7 Enabling the customer to object to the claim decision in accordance with the applicable laws, regulations, and instructions.

7-8 Maintaining claim records in accordance with the applicable regulatory record retention requirements.

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Rule Eight: Complaints and Objections

The Company is committed to maintaining an effective, independent, and fair process for receiving and handling complaints and objections, in a manner that protects customers' rights and strengthens their confidence.

Accordingly, the Company is committed to:

8-1 Providing multiple channels for submitting complaints and objections.

8-2 Providing the customer with a reference number upon registration of the complaint.

8-3 Reviewing complaints and objections objectively, fairly, and impartially.

8-4 Responding to complaints within the applicable regulatory timeframes.

8-5 Informing the customer of the outcome of the complaint together with a clear explanation of the decision.

8-6 Enabling the customer to escalate the complaint to the Insurance Authority or any other competent authority in accordance with the applicable laws, regulations, and instructions.

8-7 Periodically analyzing complaints and using the outcomes to improve products, services, and operational processes.

Rule Nine: Digital Channels and Electronic Services

The Company is committed to providing secure and reliable digital services that enable customers to access insurance products and services efficiently and conveniently.

Accordingly, the Company is committed to:

9-1 Providing secure electronic channels for carrying out insurance transactions and services.

9-2 Applying appropriate security controls to verify customers' identities before processing transactions that require authentication.

9-3 Protecting customers' personal information while using digital channels.

9-4 Notifying customers of any material interruption or disruption affecting electronic services whenever reasonably practicable.

9-5 Taking the necessary measures to restore electronic services as quickly as possible in the event of any interruption.

9-6 Periodically reviewing digital channels to ensure their efficiency, security, reliability, and ease of use.

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Rule Ten: Termination of the Insurance Relationship

The Company is committed to processing requests for the termination of the insurance relationship or the cancellation of Insurance Policies fairly and transparently, in accordance with the applicable laws, regulations, and the terms of the Insurance Policy.

Accordingly, the Company is committed to:

10-1 Clearly explaining the procedures, conditions, and consequences of terminating the insurance relationship or cancelling an Insurance Policy.

10-2 Processing cancellation or termination requests within the applicable regulatory timeframes.

10-3 Notifying the customer of the outcome of the request.

10-4 Refunding any amounts due to the customer, where applicable, within the applicable regulatory timeframes and in accordance with the terms of the Insurance Policy.

10-5 Providing the customer with the relevant documents or notifications upon request or whenever applicable.

Rule Eleven: Record and Document Retention

The Company is committed to maintaining customer records and documents relating to insurance products, services, claims, and complaints in a manner that ensures their integrity, confidentiality, and availability, in accordance with the applicable laws, regulations, and instructions.

Accordingly, the Company is committed to:

11-1 Retaining customer records, Insurance Policies, claims, complaints, requests, and communication records for the periods prescribed by the applicable laws and regulations.

11-2 Ensuring that records and documents are protected against loss, damage, alteration, or unauthorized access.

11-3 Providing competent regulatory authorities with access to records and documents in accordance with the applicable laws, regulations, and instructions.

11-4 Enabling customers to obtain documents relating to their insurance relationship whenever applicable and in accordance with the relevant laws, regulations, and instructions.

11-5 Applying appropriate controls for the management, retention, and secure disposal of records and documents upon expiry of the applicable retention periods.

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Rule Twelve: Compliance Review and Oversight

The Company is committed to periodically reviewing compliance with these Specific Rules of Conduct and taking the necessary actions to address any deficiencies and promote continuous improvement.

Accordingly, the Company is committed to:

12-1 Conducting periodic reviews to assess compliance with these Specific Rules of Conduct.

12-2 Evaluating the effectiveness of customer protection controls and procedures.

12-3 Addressing identified deficiencies and implementing appropriate corrective and preventive actions.

12-4 Utilizing the results of compliance reviews, internal audit reports, customer complaints, and customer feedback to improve products, services, and operational processes.

12-5 Reviewing and updating these Rules whenever necessary or upon the issuance of new laws, regulations, or instructions by the Insurance Authority or any other relevant regulatory authority.

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Final Provisions

1. These Principles form an integral part of the Company's governance and compliance framework and apply to all insurance products and services provided by the Company.
2. These Principles shall not prejudice any rights granted to customers under applicable laws, regulations, instructions, or the terms of any Insurance Policy.
3. In the event of any conflict between these Principles and any applicable law, regulation, or instruction, the provisions of the laws, regulations, and instructions issued by the Insurance Authority and other relevant regulatory authorities shall prevail.
4. The Company shall publish these Principles on its official website and make them available to customers through all official communication channels.
5. These Principles shall be reviewed periodically and updated whenever necessary or upon the issuance of new laws, regulations, or instructions.

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