



AIG Insurance Company of Canada
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Group Personal Accident Policy Schedule



POLICY TERMS & CONDITIONS

This Group Personal Accident **Policy Schedule** is valid from 06.01.25 and it overrides all previous **Policy Schedules** issued for this Group Personal Accident policy.

SCOPE OF COVER INCLUDED BENEFITS

This Group Personal Accident policy provides coverage for those perils listed in this **Policy Schedule**, up to the sum insured stated. The Group Personal Accident policy, this **Policy Schedule** and all attached memoranda and endorsements detail the entire cover provided and the terms and conditions applying to it.

In consideration of the payment of premiums by the Policyholder, the **Company** agrees to provide the insurance cover set out in this policy to persons within the Eligible Class(es), subject at all times to the terms, provisions, exclusions and limitations of this Group Personal Accident policy.

Authorized Representative

Issue Date:

May 5, 2025/lf



Declarations

DECLARATIONS	
INSURER	AIG Insurance Company of Canada (the Company)
POLICY NUMBER	GPA 9430272
POLICYHOLDER	Millworkers Health and Welfare Plan (Unifor) Fund
ADDRESS OF THE POLICYHOLDER	c/o The McAteer Group of Companies 45 McIntosh Drive, Markham, Ontario L3R 8C7
ISSUE DATE	May 5, 2025
EFFECTIVE DATE	12:01 a.m. local time at the Policyholder's address on the 1 st day of June 2025
EXPIRATION DATE	Continuous Until Cancelled
PLAN	BASIC ACCIDENTAL DEATH AND DISMEMBERMENT
ELIGIBLE CLASSES	<p>Insured Members:</p> <ul style="list-style-type: none">• Canadian domiciled individuals;• employed by the Policyholder or an affiliate thereof on a permanent, full-time basis; and• who are a member of one of the following classes: <p>Class I: Active Members of the Policyholder under age 70.</p>
TERMINATION OF COVERAGE	<p>Insured Member: The earlier of:</p> <ul style="list-style-type: none">• Retirement or age 70; or• The date they no longer belong to an Eligible Class; or• The date they no longer meet the definition of Insured Member as defined in the policy; or• The date the policy terminates.
AGGREGATE LIMIT PER ACCIDENT	NIL



Declarations

PREMIUM RATES AND PRINCIPAL SUMS				
Eligible Class	Estimated Number of Eligible Insured Employees	Principal Sum	Rate per \$1,000 of Principal Sum	Type of Coverage
Class I	890	Local 1928: \$30,000 Local 1S: \$50,000 Local 112: As follows: FT < age 70: \$60,000 FT age 70-74: \$30,000 FT age 75+: \$15,000 PT < age 65: \$30,000 PT age 65-69: \$15,000	\$0.03/\$1,000/month	24 hours business and pleasure
REDUCTION SCHEDULE		N/A		
RATE GUARANTEE		Rates are guaranteed until June 1, 2028		
PREMIUM FREQUENCY		MONTHLY IN ARREARS		
VOLUME OF INSURANCE		\$45,380,000.00		
ANNUAL PREMIUM		\$14,160.00		
AIRCRAFT/PILOT COVERAGE		N/A		
DEPOSIT PREMIUM FOR WAR RISK COVERAGE		Not Covered		



Schedule of Benefits

These benefits of the policy only apply if selected by the Policyholder (indicated by “Yes” in the Covered Benefit column) and the appropriate premium paid.

Benefit	Covered Benefit	Maximum Amount Payable per Insured Employee per Accident (CAD\$)
ACCIDENTAL DEATH AND DISMEMBERMENT	YES	Percent of Principal Sum per Table of Losses below
DISAPPEARANCE AND EXPOSURE	YES	Principal Sum
REHABILITATION	YES	\$15,000
HOME ALTERATION AND VEHICLE MODIFICATION	YES	\$15,000
WORKPLACE MODIFICATION AND ACCOMMODATION	YES	\$5,000
PSYCHOLOGICAL THERAPY	YES	\$5,000
IN-HOSPITAL BENEFIT	YES	\$2,500/month
FAMILY TRANSPORTATION	YES	\$15,000
REPATRIATION BENEFIT	YES	\$15,000
IDENTIFICATION BENEFIT	YES	\$5,000
DAY CARE	YES	\$5,000
DEPENDENT CHILD EDUCATIONAL BENEFIT	YES	\$5,000
SPOUSAL EDUCATIONAL BENEFIT	YES	\$15,000
FUNERAL EXPENSE	YES	\$5,000
BEREAVEMENT BENEFIT	YES	\$1,000
SEAT BELT AND AIR BAG BENEFIT	YES	Additional 10% of Principal Sum to a maximum of \$50,000 for each Seat Belt and Air Bag
DISABILITY FITNESS BENEFIT	YES	\$5,000
PARENTAL CARE BENEFIT	YES	\$10,000
CARJACKING BENEFIT	YES	\$25,000
PERMANENT AND TOTAL DISABILITY	YES	Principal Sum
CRIMINAL ASSAULT BENEFIT	YES	Additional 10% of Principal Sum
COSMETIC DISFIGUREMENT	YES	\$25,000
COMA BENEFIT	YES	Principal Sum
SURGICAL REATTACHMENT	YES	50% of the Loss listed on the Table of Losses
WAR RISK COVERAGE	NO	No



Table of Losses

TABLE OF LOSSES		Percentage Principal Sum Payable
Loss		
Loss of Life		100%
Loss of Both Hands or Both Feet		100%
Loss of Entire Sight of Both Eyes		100%
Loss of One Hand and One Foot		100%
Loss of One Hand and the Entire Sight of One Eye		100%
Loss of One Foot and the Entire Sight of One Eye		100%
Brain Death		100%
Loss of One Arm or One Leg		80%
Loss of One Hand or One Foot		75%
Loss of The Entire Sight of One Eye		75%
Loss of Thumb and Index Finger of the Same Hand		33.3%
Loss of Speech and Hearing		100%
Loss of Speech or Hearing		75%
Loss of Hearing in One Ear		66.7%
Loss of Four Fingers of One Hand		33.3%
Loss of All Toes of One Foot		25%
Loss of Use		
Loss of Use of Both Arms or Both Hands		100%
Loss of Use of One Hand or One Foot		75%
Loss of Use of One Arm or One Leg		80%
Paralysis		
Quadriplegia (total paralysis of both upper and lower limbs)	Two times the Principal Sum up to a maximum of \$1 million	
Paraplegia (total paralysis of both lower limbs)	Two times the Principal Sum up to a maximum of \$1 million	
Hemiplegia (total paralysis of upper and lower limbs of one side of the body)	Two times the Principal Sum up to a maximum of \$1 million	