

## COVER OVERVIEW TRANSAVIA TRAVEL AND CANCELLATION INSURANCE

D-TRAN-08-10

For immediate assistance in the event of hospital admission, serious accident, death or recall to the Netherlands, you should make immediate contact with:

**the Emergency Call Center, +31 (0)20 - 592 92 41, available 24 hours per day; fax +31 (0)20 - 561 88 18**

Pertaining to and forming an integral part of the General Conditions of Insurance and the certificate of insurance of Mondial Assistance Europe N.V., with registered office in Amsterdam.

According to the premium paid and the content of the insurance certificate, this insurance covers:

- A. Category I to Category IV : Travel Insurance
- B. Category I to Category V : Travel insurance and Cancellation insurance.
- C. Category V : Cancellation insurance.

If an additional premium is paid and if the additional premium is shown on the insurance certificate then there is also coverage on the insured categories for winter sports and/or special sports (see article 11 of the General Provisions). This coverage is only in force after payment of the additional premium.

<b>Category I. S.O.S. COSTS</b>		Sums insured (p.p. per event, unless stated otherwise)
The Company insures the following costs up to the maximum amounts stated, if these costs are necessary in connection with		
<b>a. Sickness, accident or death (article Article 4):</b>		
Additional accommodation expenses		€ 50 p.p. per dag
Additional costs of returning to the Netherlands		Cost price
Costs of hospital visits		€ 50 per certificate of insurance
<b>b. Early recall to the Netherlands (article Article 5):</b>		
Additional costs of returning to the Netherlands		Cost price
<b>c. Recall in the event of damage to properties in the Netherlands (article Article 6):</b>		
Additional costs of returning to the Netherlands		Cost price
<b>d. Missed flight (article Article 7):</b>		
Additional travelling and accommodation costs		€ 50 p.p. per day
Up to a maximum amount p.p. per certificate pf insurance		€ 150
<b>e. Delayed departure (article Article 8):</b>		
Additional accommodation costs		€ 50 p.p. per day
Up to a maximum amount p.p. per certificate pf insurance		€ 150
<b>f. Forced delay (article Article 9):</b>		
Additional accommodation costs		€ 50 p.p. per day
Additional costs of returning to the Netherlands		Cost price
<b>g. Return to the Netherlands by air-ambulance (article Article 10)</b>		Cost price
<b>h. Tracking and saving life (article 11)</b>		€ 45,500
<b>i. Presence of family (article Article 12):</b>		
In the event of danger to life:		
Additional travel expenses (max. two relatives)		Cost price
Additional accommodation costs (max. two relatives)		€ 50 p.p. per day for a max. of 10 days
If the insured continues the journey by him/herself:		
Additional travel expenses (max. one relative)		Cost price
Additional accommodation costs (max. one relative)		€ 50 p.p. per day for a max. of 5 days
<b>j. Cancellation of the accommodation (article Article 13):</b>		
Additional accommodation expenses in case of cancellation within 7 days before the planned date of departure		€ 35 p.p. per day of a max. of 3 weeks
Additional accommodation expenses in case of cancellation during the cover period of the insurance		€ 35 p.p. per day up to the intended sojourn time
<b>k. Travel costs in the event of death (article Article 14):</b>		
Transport costs of the remains or		Cost price
Funeral or cremation costs abroad incl. Travel costs of two family members		Up to the costs of transporting the body to the Netherlands
Furthermore, the Company will reimburse the following costs if they are caused by an event insured under this category:		
<b>l. Sending of medicines, artificial devices and aids (article Article 15):</b>		
Shipment costs		Cost price
<b>m. Telecommunications costs, per event (article Article 16)</b>		€ 45
<b>n. Extra costs relating to travel partner insured elsewhere (article Article 17)</b>		In accordance with the maximum amounts applicable to this category
<b>Category II. TRAVEL ACCIDENTS</b>		
<b>A In the event of death</b>		€ 20,000
By driving motorcycle/scooter		€ 5,700
For insured persons up to 16 years		€ 3,400
For insured persons of 70 years and over		€ 3,400
<b>B Maximum in the event of total and permanent disability</b>		€ 20,000
By driving motorcycle/scooter		€ 10,000
For insured persons of 70 years and over		€ 3,400

<b>Category III. TRAVEL LUGGAGE (Premier Risque)</b>	Insured amounts (per person, per certificate of insurance, unless stated otherwise)
<b>Insured amount</b>	€ 2,000
Policy excess per person per event	€ 50
Including:	
• Photographic, film, video, and computer equipment	€ 500
• Valuables	€ 150
• Telecommunications equipment	€ 90
• Contact lenses and spectacles	€ 150
• Musical instruments (franchise €35 per event/ reimbursement and max. €2,500 per insurance certificate).	€ 250
• Travel documents	Cost price
• (Dental) prostheses / hearing devices	€ 150
• Image, sound and data media	€ 150
• Medical equipment	€ 150
• Goods purchased during the journey	€ 150
• Gifts for third parties	€ 150
• Equipment that is being used while practising special (winter) sports	€ 150
<b>Extra coverage:</b>	
• Clothes and/or toiletries replacement	€ 150
Damage to accommodation. Maximum reimbursement for damage inflicted to hotel or bungalow inventory (franchise €23 per event).	€ 230

<b>Category IV. MEDICAL EXPENSES</b>	Insured amounts (per person, per certificate of insurance, unless stated otherwise)
<b>Medical expenses:</b>	
▪ Abroad:	
• doctor's and hospital costs	Cost price
• purchased/leased crutches/wheelchair	€ 90
• prostheses required due to an accident	€ 680
▪ In the Netherlands:	
• doctor's and hospital costs	€ 455
• purchased/leased crutches/wheelchair	€ 90
• costs in connection with follow-up treatment	€ 910
Excess for medical Costs per person per insurance certificate	€ 100
<b>Dental treatment abroad:</b>	
▪ Due to an accident	€ 455
▪ Other urgent treatment	€ 230



<b>Category V. CANCELLATION</b>	Sums insured (per person per certificate of insurance, unless stated otherwise)
The Company will pay a reimbursement up to the aforementioned maximum amounts, if these costs are the consequence of an insured event that results in:	
Cancellation of the booked ticket/accommodation	€ 500
Hospitalization during the trip	€ 50 p.p. per day up to €250 max.

**WARNING: Always observe normal caution, never leave luggage unattended, not even in cars (see the category conditions for Travel Luggage). Always consult the General Policy Conditions, especially the obligations mentioned in the General Provisions and the category conditions for Travel Luggage.**

## GENERAL TERMS AND CONDITIONS TRANSAVIA TRAVEL AND CANCELLATION INSURANCE

P-TRAN-08-10

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## ☒ GENERAL PROVISIONS

**In addition to these General Stipulations, this insurance shall be governed by the category conditions of the categories included in the insurance policy**

### Article 1. Definition of terms

The following terms shall have the following meanings in these policy conditions:

'The Company'	: Mondial Assistance Europe N.V., with registered office at Poeldijkstraat 4, 1059 VM Amsterdam and registered at the Netherlands Authority for the Financial Markets (AFM) with number 12000567.
'Emergency Call Center'	: Emergency centre Mondial Assistance B.V.
'The Insured'	: the person stated as such on the insurance certificate
'Partner'	: spouse or the person with whom the insured has lived together on a long-term basis (for at least one year as of the effective date of the insurance policy)
'Family'	: the Insured and partner and/or children/foster children or step-children living with the family
Relatives:	
'1st remove'	: partner, parents (-in-law), children-in-law, foster parents, step-parents/children, foster parents/children
'2e remove'	: brothers (-in-law), sisters (-in-law), foster/step-brother or sister, grandparents and grandchildren.
'Travel companion'	: a person travelling with the insured.

### Article 2. Basis of the insurance

The Company only provides cover for the categories for which insurance has been taken out as indicated on the cover overview and/or insurance certificate. The covers apply up to the maximum amounts stated on the cover overview, with due observance of any stated maximum period, for a maximum of the number of persons stated on the cover overview and up to maximum category mentioned on the cover overview. The number of insurance policies taken out is identical to the number of insured persons stated on the insurance certificate. An insurance policy only applies to the person in whose name it has been taken out: the sums insured under these insurance policies cannot be combined with the sums insured under any other policy and the insurance policies are non-transferable. Stipulations that apply to one insured person do not necessarily also apply to another insured person, unless this is stated explicitly.

### Article 3. Validity of the insurance

- 3.1. The insurance policy is only valid if it has been taken out at the time of booking plane tickets with TRANSAVIA or within 7 days thereafter. If the policy is taken out after this period, then cover for Category V (CANCELLATION) is excluded.
- 3.2. The Company only insures persons who, during the validity term of the policy, are recorded in a Dutch population register as residing or actually staying in the place of residence in the Netherlands, which is also stated on the certificate of insurance.
- 3.3. The insurance shall not be valid if the Company has already informed the insured in the past not to wish to insure him/her. In such instances, the Company will refund any premium that has already been paid at the insured's request.
- 3.4. All the categories that have been taken out shall be governed by the General Policy Conditions, unless there are exceptions thereto in the category conditions.

### Article 4. Validity term, cover period

- 4.1. For categories I up to and including IV:
  - a. The validity term of the insurance is the number of days that the insurance remains in force (maximum 62 days). The validity term is stated on the insurance certificate. If the validity term is exceeded because the public transport by which the insured is travelling is delayed or because an event has occurred against which the Insured is insured (except if such event is covered by the category Travel Luggage), the insurance shall automatically remain valid until the time of the first possible return of the Insured. When the Company prolongs an insurance policy that is already in effect at the Insured's request, this insurance policy shall be considered to be a new insurance policy.
  - b. Within the validity term of the insurance, the **period of cover** shall commence as soon as the Insured and/or his/her luggage leave the place of residence or domicile and shall end as soon as the insured and/or his/her luggage return to such place or domicile.
- 4.2. **For category V:** the insurance policy shall come into effect on the date stated on the insurance certificate as date of issue and terminate immediately following the end date stated on the insurance certificate or on the date on which the journey is cancelled or cut short.

### Article 5. Area in which the insurance is valid

The insurance policy is valid in the European countries as well as the Azores, the Canary Islands, Madeira and the non-European countries bordering the Mediterranean Sea. The insurance is also valid during sea voyages between the areas mentioned.

In the Netherlands this insurance is only valid if travel or stay in the Netherlands form a direct part of travel to or from the foreign travel destination.

### Article 6. Payment or refund of the premium

The day before the validity term commences, the insured must have paid the premium to the Company or to an agent appointed by the Company. If the premium has not been paid, the insurance is not valid; however, the insured's obligation to pay the premium will continue to exist. As soon as the insurance has come into effect (see Art. 4.2) the insured shall not be entitled to a premium refund.

### Article 7. General obligations in the event of loss

In the event of loss, the Insured or his assignee(s) shall take the following steps:

- 7.1. Fully and truthfully fill out the claim form, sign it and send it, together with the insurance certificate, to the Company. The claim form can be obtained from the Company or one of its agents.
- 7.2. Do anything possible to limit the loss, follow all the advice given by the Company and the Emergency Call Center, give full cooperation to the Company and Emergency Call Center, and not do anything that may damage the Company and Emergency Call Center's interests.
- 7.3. To assign claims for recovery (up to the full amount of the claim) to the Company. This is only required if the Company has not assumed the rights of the Insured with regard to payment of the claim. The insured shall submit all the evidence of the above-mentioned claims to the Company.
- 7.4. In certain cases it is necessary to obtain prior permission from the Company for paying certain costs in order to have them reimbursed. Examples here include the return journey to the Netherlands, an admission to hospital for more than 24 hours or death. In these cases the Emergency Call Center must be notified immediately, stating the insurance data.
- 7.5. The Insured must submit to the Company the doctor's certificates, the original invoices of the medical expenses, the carriage and transport costs and the additional travel and/or accommodation expenses, the original invoices of the foreign undertaker and any other documents the Company requires.
- 7.6. The Insured shall do his utmost to obtain a refund from the carrier for unused tickets. In addition, he must be able to prove to the Company that the additional return travel and/or accommodation costs were necessary. Such proof includes, for example, the death certificate or a signed statement of the attending physician abroad.
- 7.7. The Insured can only be transported by ambulance, taxi, air-ambulance or other non-public transport means if the Emergency Call Center has given its prior permission.

**If the insured fails to fulfil the said obligations, the Company will not reimburse such costs.**

### Article 8. Term within which the loss must be reported

In the event of an insured event occurring, this event must be notified to the Company by the Insured or his assignees within the following time limits:

- 8.1. If the Insured dies: within 24 hours (by telephone or fax).
- 8.2. If the Insured has to be hospitalised for over 24 hours: within seven days after the hospitalisation (report in writing).
- 8.3. In all other cases: within 28 days after the end of the validity term (report in writing).

If the loss is not reported to the Company in time, then the Company will not pay out, unless the Insured or his assignee(s) can prove that they could not reasonably be expected to have reported the loss in time. In any event, the right to recovery is irrevocably lost if a report of the loss is not received by the Company within 180 days of the date of the event.

#### Article 9. General exclusion clauses – Loss of right to recovery

- 9.1. The insurance cover does not include:
- loss directly or indirectly resulting from acts of war, including armed conflict, civil war, rebellion, internal civil unrest, riots and mutiny. The aforementioned six forms of war risk, as well as the definitions thereof form part of the text filed by the Association of Insurers with the court registry of the District Court of The Hague on 2 November 1981. If the Insured incurs loss during the above-mentioned events, which is entirely unrelated to such events, the Company shall only reimburse the loss if the Insured proves that the loss was unrelated to such events.
  - loss which is directly or indirectly related to or caused by the Insured's participation in or the conscious attending of a hijacking, strike or act of terrorism
  - loss which is directly or indirectly related to a (possible) outbreak of an epidemic or pandemic, as defined by the World Health Organisation (WHO), including:
    - preventive and/or restrictive measures imposed by a government body, such as travel restrictions or prohibitions, or the detention of the Insured, his family or travel companions in quarantine;
    - the cost of medical examination and/or treatment of the Insured by or on the instruction of any government body.
  - loss which is directly or indirectly related to an attachment and/or confiscation
  - loss which is caused by, occurs during or ensues from nuclear reactions, irrespective of how and where the reaction originated
  - loss which is the consequence of participation in or the committing of an offence or attempts thereto
- 9.2. There is no entitlement to recovery if such circumstances were known or present at the time when the insurance was taken out such that one could reasonably expect that the costs would be incurred.
- 9.3. The right to recovery of the entire claim will be lost if the Insured or his assignee(s) has/have provided incorrect information or facts.
- 9.4. The right to recovery shall only be lost in respect of that part of the claim for which the objects and/or documents requested by the Company have not been received within 180 days after the request was made.

In addition, the insurance does not provide cover for the following cases and/or the following costs:

- The ailing or poor condition of the Insured existing before or at the time of the accident, a mental or physical disorder or disease, suicide or an attempt thereto.
- Pregnancy and any related costs, with the exception of costs ensuing from complications.
- A deliberate act, recklessness or negligence on the part of the Insured or such other party having an interest in the reimbursement.
- Participation in unlawful, acts, rows, fights, dares, participating in expeditions.
- Use of alcohol or other narcotics or stimulants, including soft and hard drugs.
- Carrying out of any activity other than an administrative, commercial or supervisory activity, unless such activities of a different nature are included under the policy and are specified on the certificate of insurance.
- The breach of safety regulations imposed by transport and other companies.
- Balloon rides and underwater journeys by submarine.
- Participation in one of the following sports: boxing, wrestling, karate and other martial arts, jiu jitsu and rugby
- Participation in, or preparing for, competitions, such as training
- Participation in, or preparing, for speed, record and reliability tests with motor vehicles or motor boats
- Use of boats outside the inland waterways, unless this does not involve any special risks
- The costs of an abortion
- If the reasons for the insured travelling to the area of insurance include the intention to have medical treatment there

#### Article 10. Air travel risk

If the insured is travelling by plane he is only insured as a passenger and not as a crew member, flight instructor, apprentice pilot or parachutist. In order to be insured, the insured has to fly with an acknowledged carrier. These planes must be furnished for passenger travel and use acknowledged airports.

#### Article 11. Winter sports/ Special (winter) sports

If the insurance certificate shows that the insured has also insured himself against this risk and the additional premium due herefor has been paid, the accidents that the insured has met with in the practice of winter sports are insured, including participation in so-called "Gästerennen" and "Wisbi" competitions, and special (winter)sports. Skating and sleigh-rides are insured without additional premium.

In the practice of special (winter)sports no benefit shall be paid out for death or permanent disability as a result of an accident, such as stated in the Category Conditions Travel Accidents.

Special sports include mountain climbing, bouldering, ice climbing, abseiling, speleology, bungee jumping, parachute jumping, paragliding, hang gliding, ultra light flying, gliding, as well as other sports which involve a more than normal risk.

Special winter sports include luggage, bobsleighing, ice-hockey, speed skiing, speed races, ski-jöring, ski-jumping, ski-flying, figure jumping in freestyle skiing, ski-mountaineering, para-skiing, heli-skiing, as well as other winter sports that involve a more than normal risk

The provisions of article 9.14 shall remain in full force.

#### Article 12. Co-existence of insurance policies

If in addition to this insurance the Insured may also in principle claim recovery or compensation under another insurance policy, law or other relief, whether or not this predates in time, then this insurance does not cover those costs. In such a case only the loss exceeding the amount which could be claimed elsewhere will be eligible for recovery. This stipulation shall not apply to payments for death and/or permanent disability as a result of an accident.

#### Article 13. Multiple insurance policies for the same risk

If more than one travel risk insurance policy has been taken out for the insured with the Company, he is eligible for no more than the following amounts:

<b>TRAVEL LUGGAGE</b>	€	5,000
Valuables	€	750
Photographic, film and video/dvd equipment	€	2,725
Computer equipment	€	2,725
Money and traveller's cheques	€	750
<b>TRAVEL ACCIDENTS</b>		
Payment in the event of death:		
- 16 up to and including 69 years of age	€	125,000
- by driving a motorcycle and/or scooter	€	6,000
- 0 up to and including 15 years of age	€	4,600
- 70 years and older	€	4,600
Payment in the event of total and permanent disability:		
- 0 up to and including 69 years of age	€	113,500
- by driving a motorcycle and/or scooter	€	91,000
- 70 years and older	€	4,600
Payment in the event of death as a result of a winter sports or underwater sports accident:		
- 16 up to and including 69 years of age	€	46,000
Payment upon permanent disability as a result of a winter sports or Underwater sports accident:		
- 0 up to and including 69 years old	€	91,000

Payment in the event of death as a consequence of an accident while playing a special (winter) sport:	€	4,600
Payment in the event of permanent disability as a consequence of an accident while playing a special (winter) sport:		
- 0 up to and including 69 years of age:	€	23,000

#### **Article 14. Payment of the reimbursements**

The Company shall pay the reimbursements to the insured, unless he/she has informed the Company that they should be paid to someone else. If the insured has died, the reimbursements will be paid to the legal heirs. For payment in the event of death or permanent disability as a result of an accident, please see the category conditions of Travel Accidents.

#### **Article 15. Cancellation of rights**

If the Company is served with a claim by the Insured or his assignee(s) the Company shall respond by (an offer) to pay in full and final settlement or reject the claim. The claim by the Insured or his assignee(s) shall lapse 180 days after the Company has made its position clear (offer of payment or rejection) unless any dispute has by then been brought to court.

#### **Article 16. Reclaiming uninsured services and/or costs**

If the Company has agreed to reimburse costs and/or services incurred/granted by the Company or by the Emergency Call Center that are not covered by the insurance policy (such as, in particular, the costs of the outer coffin), the Company shall have the right to reclaim the costs that it has already paid or to set them off against the payments still to be made. The Insured parties are jointly and severally liable, and are obliged to repay the sums claimed within 30 days of written notice requiring repayment. In the event of default the Company will engage a debt collection agency.

#### **Article 17. Personal data**

- 17.1. The personal data provided on the application for, or the amendment of, an insurance policy, are processed by the Company for entering into and executing insurance agreements and managing the ensuing relations, which includes preventing and combating fraud and activities aimed at extending the customer base.
- 17.2. The processing of this personal data is governed by the 'Processing of Personal data by Financial Institutions' code of conduct. This code of conduct sets out the rights and obligations of the parties when processing data. The full text of the code can be found on the website or requested from the Dutch Association of Insurers ([www.verzekeraars.nl](http://www.verzekeraars.nl), Postbus 94350, 2509 AL The Hague, tel: 070-3338500).
- 17.3. On the instructions of the Company, the Emergency Call Center will provide direct help for hospitalisation, a serious accident or death. If the Emergency Call Center deems it necessary to be able to respond properly to the request for help, it may request information from the Insured, his family member, people offering assistance on site and/or the doctor providing treatment and forward this information directly, where necessary, to the persons providing the assistance, as well as to the Company's medical advisor. A request for and providing of medical data may only be made by, or on the instructions of, the medical advisor at the Emergency Call Center.

#### **Article 18. Disputes**

Any disputes arising from this insurance agreement shall be submitted to the competent court, unless the parties agree to another way to resolve the conflict. The Dutch language version of the terms and conditions of this insurance agreement shall be the sole legally binding text.

For complaints arising from this agreement, the Insured can apply in writing to the Company's Board and/or to:

*Stichting Klachteninstituut Financiële Dienstverlening, Postbus 93257, 2509 AG Den Haag, telefoonnummer 0900-3552248, [www.kifid.nl](http://www.kifid.nl).*

### **✉ CATEGORY CONDITIONS**

#### **Category I. S.O.S. COSTS**

**These category conditions shall also be governed by the General Policy Conditions, unless there are exceptions to them in these category conditions.**

#### **Article 1. Nature and scope of the insurance**

The Company will reimburse the additional travel, accommodation or other costs incurred with the consent of the Emergency Call Center, as described in the following articles, up to the maximum amounts specified in the cover overview under the insurance policy, having regard to any maximum period therein specified, in respect of the maximum number of persons as specified in the cover overview and up to the maximum class specified in the cover overview, where these costs are the direct result of:

- a. Sickness, accident and/or death (Article 4).
- b. Recall (Article 5).
- c. Recall in the event of damage to properties in the Netherlands (Article 6)
- d. Missed flight (Article 7)
- e. Delayed departure (Article 8)
- f. Forced delay (Article 9)
- g. Return to the Netherlands by air-ambulance (Article 10).
- h. Tracking down and saving life (Article 11)
- i. Family travel to be with the insured (Article 12).
- j. Cancellation of accommodation (Article 13)
- k. Transport costs in case of death (Article 14).

Furthermore, the Company will reimburse the following costs if they are caused by an event insured under this category:

- l. Sending medicines, prostheses or aids (Article 15).
- m. Telecommunications costs (Article 16).
- n. Additional costs in connection with a travel companion who is insured elsewhere (Article 17).

#### **Article 2. Special stipulations**

In this category, 'accommodation costs' means the cost of accommodation and meals. The costs the Insured would normally have incurred for necessary meals will be deducted from the reimbursement of additional accommodation costs. This deduction is 20% of these reasonably incurred costs.

#### **Article 3. Help from the Emergency Call Center**

If an event insured under this category occurs, the Emergency Call Center offers help in arranging:

- transport;
- the necessary (medical) supervision during the (return) journey.

Furthermore, the assistance includes advice and any help the Emergency Call Center deems useful and necessary.

#### **Article 4. Sickness, accident and/or death**

- 4.1. If the Insured falls ill or suffers an accident in the area covered by the insurance, the Company shall reimburse the following costs, provided that they are medically necessary in the opinion of the doctor engaged by the Company and are the direct consequence of the sickness or accident:

- a. The necessary costs of extra accommodation after the cover period of the insurance;
- b. The necessary costs of the return journey to the domicile or place of residence in the Netherlands by ambulance, taxi or public transport, insofar these costs are higher than those of the originally intended return journey.

- c. The necessary extra accommodation costs during the cover period of the insurance.
- 4.2. If the co-insured relatives or one co-insured travelling companion of a hospitalised insured person visit this person at the hospital, the extra travel expenses of public transport or private vehicle will be reimbursed.
- 4.3. If the Insured travels with a family member who becomes sick, is involved in an accident or dies, then the Company will reimburse the Insured with the costs specified in Article 4.1 for extra accommodation or an earlier or later return with the affected person, provided that the affected person is insured with the Company for the same period.
- 4.4. The same payment will also be made to one travelling companion of said affected person, provided that this travelling companion has taken out insurance with the Company for the same period.

#### **Article 5. Recall**

If the insured and/or his/her insured family members have to return prematurely to their domicile or place of residence in the Netherlands because a relative to the first or second degree of sanguinity has died or (in the opinion of a physician) has a life-threatening disease or a life-threatening injury, the Company shall pay the necessary costs of the return journey, insofar they are higher or different from the costs of the originally intended return journey. The insured must travel by their private vehicle or public transport. Moreover, the same reimbursement will be paid to a maximum of one travelling companion of the said recalled insured person(s). The precondition is that this travelling companion has taken out insurance with the Company for the same period.

#### **Article 6. Recall in the event of damage to properties in the Netherlands**

If the insured's properties in the country of residence (in particular to property, inventory, household contents or merchandise) have been seriously damaged by fire, theft, explosion, storm, lightning or flood and the insured has to return to the country of residence prematurely, the Company will reimburse the necessary return travel costs by public transport to the extent that they are higher or other than the costs of the originally intended return journey.

#### **Article 7. Missed flight**

If the insured misses the booked flight as a consequence of:

- a. Delays in the public transport with which the insured travels to the airport of departure as a consequence of a strike of the transport company, fog, natural disasters or flood;
- b. Breakdown of the private vehicle with which the insured is travelling to the airport due to an external cause such as a collision, fire or explosion or a mechanical defect;
- c. Delays of over one hour due to an unexpected traffic jam, provided that the insured observed the prescribed check-in time of the airline company;

The Company shall pay, until the first next opportunity to leave, the part of the travel and accommodation costs in excess of the costs of the originally intended journey to the destination. A precondition for the reimbursement is that the aforementioned causes of the delay did not occur before leaving for the airport and were not known or to be expected at such time.

#### **Article 8. Delayed departure**

If, due to a strike of transport companies or airport personnel, mechanical breakdown of the aircraft, fog, natural disaster or flood, the booked flight is delayed by 4 hours or more when leaving the Netherlands to travel to the destination, the Company shall reimburse the necessary additional accommodation costs incurred by the insured.

#### **Article 9. Forced delay**

If the Insured is forced to stay abroad after the end of the validity term, but only if this is caused by a carrier strike, airport personnel strike, fog, natural disaster, avalanche, being snowed in or flooding, the Company will reimburse, until the first available opportunity to return, the part of the extra accommodation costs and extra travel costs by public transport that exceeds the cost of the originally intended return journey. This reimbursement is subject to the causes of the delay not having occurred before or during the start of the journey and not having been known or anticipated at such time.

#### **Article 10. Return to the Netherlands by air-ambulance**

If the insured is sick or injured and cannot travel in any other way (e.g. by passenger plane, ambulance car or taxi) in connection with his health, the Company shall reimburse the return journey to the Netherlands by air-ambulance. Returning in this manner shall only be insured if it is medically necessary and the Company has given prior permission.

The medical necessity of returning by air-ambulance is assessed by the doctor engaged by the Company, in consultation with the attending doctor abroad. The term 'medical necessity' shall at any rate apply if the life of the insured can be saved or if the risk of disability can be reduced and/or disability can be prevented by returning the insured by air-ambulance. If the Insured is entitled to the reimbursement of a return trip by air-ambulance, he shall not be entitled to the reimbursement of additional travel costs as described in Article 4. However, the transport costs from the foreign hospital to the airport and from the Dutch airport to the hospital (including the costs of medical supervision) shall be reimbursed. If the insurance has been taken out and/or has come into effect whilst the insured was already receiving medical treatment outside of the Netherlands, said costs will not be reimbursed.

#### **Article 11. Search and rescue operations**

If the Insured becomes sick abroad, or involved in an accident, and he is covered by his insurance, the Company shall reimburse to the Insured or to his assignee(s) the costs claimed to be incurred by the local, competent authorities in tracking down and/or saving the life of the Insured. These costs will also be reimbursed if the competent authorities suspect an accident.

#### **Article 12. Transport abroad of family**

- 12.1. If the Insured's life is in danger due to sickness or an accident according to the local attending doctor abroad, the Company will reimburse the costs of family travelling from the Netherlands, their necessary accommodation costs as well as the return journey by public transport to the Netherlands.
- 12.2. If the Insured has to continue the journey by himself alone as a consequence of the death of his co-insured travel companion, the Company shall reimburse the costs of family travelling from the Netherlands, the necessary accommodation costs as well as the return journey by public transport to the Netherlands.

#### **Article 13. Cancellation of the accommodation**

The insured is entitled to the reimbursement of the costs of replacement accommodation in the following cases:

- 13.1. If the accommodation of the insured has become uninhabitable and/or unfit for use within seven days before the scheduled departure date of the insurance policy (and at any rate after the certificate of insurance has been issued). However, a precondition is that the owner and/or lessor of the accommodation has not paid any refund and/or provided replacement accommodation. These costs will not be reimbursed if the accommodation was in such a state of repair that it could reasonably have been foreseen that the accommodation would be unfit for use during the journey.
- 13.2. If, during the period of cover, the accommodation of the insured is no longer habitable due to fire, storm, lightning, flooding or other natural disasters. However, a precondition is that the owner and/or lessor of the accommodation has not paid any refund and/or provided replacement accommodation.

#### **Article 14. Transport costs in the event of death**

If the Insured dies as a result of sickness or accident, then the Company will reimburse to the assignee(s) the cost of:

- 14.1. - transport of the body to the last place of residence in the Netherlands;
  - the inner coffin;
  - the documents required for the transport.
- 14.2. If the body is not taken to the former place of residence of the Insured, the Company will reimburse the costs of the funeral (or cremation) abroad and the transport of relatives from the Netherlands up to the maximum amount that would have been paid if the body had been transported to the place of residence of the deceased.

#### **Article 15. Sending of medicines, prostheses or aids**

In the event of sickness, accident, loss, theft of medicine, prostheses or aids taken on the journey by the Insured, the Company will pay the shipment costs of having these items sent by the Emergency Call Center if:

- a. they are necessary in the opinion of a physician engaged by the Company and
- b. there are no usable alternatives available at the location concerned.

The purchase and customs costs and return charges shall be for the account of the insured, also if the items that have been sent are not picked up. Orders cannot be cancelled.

#### **Article 16. Telecommunications costs**

If an event happens to the Insured abroad that is covered by this category, his necessary telecommunications costs ensuing from such event will be reimbursed.

#### **Article 17. Additional costs in connection with a travel companion who is insured elsewhere**

Additional costs incurred by the Insured as a consequence of an event covered under this category, which happens to a travel companion who is not named on the certificate of insurance, but due to which the Insured has to continue the journey by himself, will also be reimbursed. This cover is effective only if:

- a. The travel companion has valid travel insurance of his/her own;
- b. The event that happens to the affected travel companion is covered by his/her travel insurance and such travel insurance does not provide cover for the additional costs incurred by the insured travelling with him/her;
- c. The affected travel companion and the Insured intended to travel to and from their destination together;
- d. The additional costs incurred by the insured are demonstrably necessary and have been reasonably incurred during the journey.

#### **Article 18. General obligations in the event of loss**

With regard to Article 7 and Article 8 of these category conditions the insured shall prove the right to reimbursement to the Company by means of statements. Examples of such statements are, among others, a statement of the public transport company, the car repair company or emergency service, the airline company or the police authorities.

**If the insured fails to fulfil said obligations, the Company will not pay any reimbursement.**

<b>Category II. TRAVEL ACCIDENTS</b>
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#### **Article 1. Nature and scope of the insurance**

If the insured suffers an accident during the cover period of the insurance, the payment stated on the cover overview below the insurance that has been taken out is insured.

The term "accident" shall be taken to mean: a sudden, external effect of violence on the insured's body, which directly and exclusively leads to the physical injury or death of the insured. This must be ascertainable by a physician.

#### **Article 2. Extension of the definition of the term "accident"**

The term accident shall also be taken to mean:

- 2.1. The consequences of the wrong medical treatment, wound infection or blood poisoning if this is directly related to an accident.
- 2.2. Physical injury as a consequence of rightful self-defence or of an attempt to save, people, animals or goods.
- 2.3. Contamination with germs as a consequence of an involuntary fall into the water or another fluid or substance.
- 2.4. Starvation, dehydration due to the lack of drinking water, exhaustion or sunburn, because one has become isolated from the outside world due to collapse, freezing in, snowing in emergency landing or shipwreck.
- 2.5. Suffocation, sunstroke, freezing or drowning.
- 2.6. Acute sprain, dislocation, strained muscle/sinew or torn muscle/sinew provided that the nature and location of these injuries can be established medically. The term accident shall not be taken to include: dislocation as a consequence of existing joint disorders and/or overstrained ligaments.
- 2.7. Burning, other than by radiation or sunburn, unless such burning is the result of a wrong medical treatment (see Article 2.1.) or because one has become isolated from the outside world (see Article 2.4.).
- 2.8. Acute poisoning by gasses, vapours, food, beverages or other fluids or substances.
- 2.9. Injury as a result of the involuntary penetration by or swallowing of foreign objects.
- 2.10. Poisoning caused by medicines or drugs only if they have been used on medical prescription.

#### **Article 3. Special obligations in the event of death or disability as result of an accident**

3.1. If the insured has died as a result of an accident the successor(s) must allow the Company to have an autopsy performed on the body. The Company shall appoint an expert to this end.

3.2. If the insured has become disabled as a result of an accident, he/she must, if the Company desires this, undergo an examination by an expert, to be appointed by the Company or be hospitalised for observation at a hospital to be designated by the Company. The Company will pay the costs of this examination.

3.3. The insured must inform the Company in writing within twelve months after he/she has suffered an accident whether he/she risks permanent disability due to the accident. If the insured is not sure of this, he/she shall consult a physician on this matter. If this physician is not sure within twelve months of the accident whether the insured will be permanently disabled, this must also be reported to the Company within twelve months.

**If the insured fails to fulfil said obligations, the Company will not pay any reimbursement.**

#### **Article 4. Payment in the event of death**

If the insured dies after two years after an accident from the consequences thereof, the Company shall pay the amount for death which is stated on the cover overview. The payment will be made in the manner described in Article 7.1. All the payments which the Company possibly has already paid to the insured due to permanent disability caused by the same accident will be deducted from this amount. If all the amounts paid due to permanent disability together are a higher amount than the insured amount upon death, the successor(s) of the deceased will not be required to repay this difference.

#### **Article 5. Payment upon permanent disability**

If the insured suffers permanent disability within two years after the date of the accident as a result of this accident, the Company will pay the amount mentioned on the cover overview fully or in part. This depends on the extent to which the insured has become permanently functionally disabled. The insured must adhere to Article 3.3. Article 7.2. mentions the manner in which the Company will pay the amount. The term in which the payment will be made is stated below :

- 5.1. As soon as the extent of the permanent disability is determined definitively, provided that this can be determined within two years after the date of the accident.
- 5.2. If it cannot be determined whether the disability is permanent and, if so, to what extent, the Company has the right to postpone the payment. In such an instance, the Company will pay interest on the outstanding amount of the payment. The interest amounts to 5%. The interest will be paid simultaneously with the disability payment.
- 5.3. If the insured dies in the period in which payment is postponed, from the consequences of the accident, the entitlement to the disability payment shall be cancelled.
- 5.4. If the insured dies within two years after the accident or in the period in which the payment is postponed, other than as a result of the accident, and the Company has not yet made a disability payment, the amount which the Company would most likely have had to pay in disability payments if the insured had not died shall be paid to the insured's successor(s).

#### **Article 6. Calculation of permanent disability**

6.1. The extent to which the insured is permanently disabled is determined by the Company's medical advisor on the basis of information from the attending doctor(s) and/or an independent physician engaged by the Company. The disability percentage is determined on the basis of the tables mentioned in the guide for the determination of permanent disability of the American Medical Association.

6.2. When determining the extent of the insured's disability, his/her occupation is not taken into account. The extent to which the insured was already disabled before the accident is also taken into account. The payment will only be made for "additional" disability.

6.3. The amount paid for one or more accidents together shall never exceed the amount stated on the cover overview.

#### **Article 7. Payments**

7.1. If the insured dies as a result of an accident, the payment is made to his/her legal heirs. They must submit an attestation to the admissibility to the estate. But if the insured has indicated who is to receive his/her death benefit, the payment will be made to this successor(s). In order to be able to pay, the insurance certificate must be made available to the Company. The State of Denmark and creditors who are not heirs shall not be entitled to the payment.

7.2. If the insured will be permanently disabled due to an accident, the Company shall make the payment to the insured. This shall take place after the degree of permanent disability has been definitively established.

#### **Article 8. Standardisation**

If the consequences of an accident are aggravated by one of the causes mentioned in Article 10.10. of the General Provisions, the payment shall never exceed the amount which would have been paid pursuant to the insurance if the same accident had happened to an entirely able and healthy person.

### **Category III. TRAVEL LUGGAGE**

**These category conditions shall also be governed by the General Policy Conditions, unless there are exceptions to them in these category conditions.**

#### **Article 1. Nature and scope of the insurance**

The word 'luggage' is taken to mean: the luggage which the Insured takes with him on the journey for his personal use.

If luggage belonging to the Insured is stolen, lost or damaged, the Company shall reimburse such loss up to the maximum sum insured as specified on the cover overview. In the event of damage to or loss of an insured object with accessories, only one insured person can claim reimbursement.

Whilst the insurance is in effect, the Insured is also insured against damage to luggage which is sent on or after by boat, train, bus or plane, against receipt.

The luggage specified in article 1.1 to 1.11 is insured against the maximum insured sums as specified in the cover overview, having regard to the relevant terms listed below:

- 1.1. Photographic, film, video and computer equipment. All items that together constitute one kit are regarded as one insured item, such as cameras, lenses, filters, tripods, floodlights, recorders, carrying cases, etc. The term computer equipment shall be taken to mean: computers (including personal organizers) including peripheral equipment and software.
- 1.2. Valuables: jewellery, watches, furs, radio and television sets, gold, silver or platinum items, precious stones, pearls, binoculars, sound and visual equipment (excluding photographic, film, video/dvd, computer and telecommunications equipment), typewriters and other valuables.
- 1.3. Telecommunications equipment.
- 1.4. Contact lenses and spectacles.
- 1.5. Musical instruments: musical instruments and accessories (except for drumheads, strings and mouthpieces). The Company will only compensate for losses that are higher than the franchise which is stated on the cover overview and up to the maximum amount per insurance certificate which is stated on the cover overview and up to the amount per certificate of insurance stated on the cover overview.
- 1.6. Travel documents. This means, among other things: driving licences and registration certificates, number plates, transport tickets purchased specifically for use during the journey, IDs, tourist cards, passports, laissez-passers, ski-passes and visa. The costs of new purchases will be reimbursed, except for travel, accommodation and telecommunications costs.
- 1.7. Dental prostheses and hearing aids: (teeth) prostheses, braces, false teeth, crowns and hearing aids.
- 1.8. Image, sound and data media.
- 1.9. Medical equipment: medical equipment including the costs of repair.

The word luggage is also taken to mean:

- 1.10. Goods purchased during the journey.
- 1.11. Gifts for third parties: goods purchased by the Insured before or during the journey, intended as gifts/presents for third parties.
- 1.12. Owned or rented equipment used in the practice of special (winter)sports
- 1.13. Winter sports equipment: owned or rented skis including ski bindings, ski sticks, and ski boots. This cover is only effective on condition that the insured has been insured for the risks of winter sports during the validity term of the insurance and the insured amount is equal to the insured amount of the insurance taken out.
- 1.14. Underwater sports equipment: owned or rented underwater sports equipment. This cover is included in the insured amount of the insurance that has been taken out, on the understanding that the maximum insured amount for diving watches is equal to the maximum insured amount of valuables and the maximum insured amount for diver's computers is equal to the maximum insured amount for photo, film, video, and computer equipment.

#### **Article 2. Uninsured risk**

The excess and franchises for all loss in respect of Article 1 (excluding article 1.5 and 1.6) are specified in the cover overview.

#### **Article 3. Replacement clothing and toiletries**

The Company will also cover the cost of replacement clothing and toiletries insofar as these have to be bought during the period of insurance cover due to the fact that luggage transported by public transport goes missing or its arrival is delayed. This payment shall not be higher than the sum specified on the cover overview alongside the amount insured for Luggage.

#### **Article 4. Damage to accommodation**

If the insured is responsible for damage to a hotel, bungalow, caravan or other accommodation he/she is officially staying at or the inventory thereof, inflicted by him/her personally, the Company will reimburse such damage, however except damage to the body of the caravan, folding caravan, camper or boat arisen during driving or boating. The precondition is that it was not intentional or caused by gross negligence. Damage to a safe rented during the trip due to losing the key to such safe will also be reimbursed. The Company will only reimburse damage exceeding the franchise stated on the cover overview. This reimbursement shall never exceed the amount stated on the cover overview under the insurance policy taken out, which shall apply in addition to the insured amount for Travel Luggage.

#### **Article 5. Extra winter sports coverage**

If the winter sports risk is insured, the Company shall compensate:

- 5.1. The ski passes, lifts, hire and lessons paid in advance but not used if the insured during the term of validity
  - a. due to an accident that he has met with is unable to ski (submission of a medical certificate from the attending physician abroad);
  - b. due to illness or accident is admitted to a hospital;
  - c. in connection with a covered event must prematurely return to his temporary or permanent place of residence in the Netherlands. If the insured affected by the aforementioned events must prematurely return, the Company shall also pay this compensation for the relatives returning with him on condition that they are insured against the winter sports risk in the same insurance certificate.

The costs of hiring replacement skis and/or ski shoes (up to a maximum of the planned ski period, submission of ski pass), if the owned skis and/or ski shoes have been stolen or irreparably damaged, on condition that in the event of theft an official report is submitted and that in the event of damage both the damaged skis and/or ski shoes and a declaration of irreparability from an expert are submitted.

#### **Article 6. Insured value**

In the event of irreparable damage, loss, misappropriation or theft, the reimbursement is granted on the basis of the insured value. The term 'insured value' is taken to mean the replacement value, after deduction of an amount for depreciation due to ageing or wear and tear; such amount will not be deducted if the lost or damaged goods are less than one year old. The term 'replacement value' is taken to mean the amount required to obtain new objects of the same type and quality. No higher amount will be paid than the amount for which the insured object was purchased. In the event of irreparable damage, the reimbursement will be paid on the basis of the costs of repair. However, the amount paid shall not exceed the amount paid in the event of irreparable damage. The Company has the right to reimburse the damage in kind.

#### **Article 7. Transfer of insured objects**

If the insured objects are damaged, they cannot be transferred to the Company, unless the Company desires this. Once the Company has paid out a sum to the Insured for lost, damaged or missing goods, the Insured shall transfer the right of ownership for these goods to the Company. As soon as the Insured knows that the lost or missing goods have been found, he shall report this to the Company. If the goods are found within three months after the date on which they were lost, the Insured shall take them back and repay the amount paid by the Company.

#### **Article 8. Special obligations in the event of damage**

- 8.1. In the event of loss, theft or misappropriation the Insured shall report this immediately to the local police authorities. If such report is impossible, the Insured must report this at the first possible opportunity. The Insured shall submit a statement of this report to the Company.
- 8.2. If the Insured loses his luggage due to loss, theft or misappropriation at a hotel, he shall report this immediately to the hotel management. The Insured shall submit a statement of this report to the Company. The stipulations of Article 8.1 shall remain in full force.
- 8.3. If the luggage is taken by a means of public transport or another means of transport, the Insured shall check his luggage upon receipt, to verify whether it is in good condition and that nothing is missing. If the Insured discovers any damage or loss, he shall report this immediately to the carrier. The Insured shall submit a statement of this report to the Company.
- 8.4. The burden of proving theft, loss or damage to luggage, as well as the amount of loss, the fact that the luggage actually existed and the fact that the insured event occurred during the period in which the insurance policy is in force always rests upon the Insured. The Insured must also prove loss by means of original receipts or copies thereof, guarantees, experts statements as to the possibility of repair and any other documentary proof required by the Company. In the event of damage, the Insured shall also enable the Company to inspect the luggage before it is repaired and/or replaced.

**If the Insured fails to fulfil said obligations, the Company will not reimburse the loss.**

#### **Article 9. Special exclusions**

The following loss is excluded:

- 9.1. Theft, loss or damage to: Cash or traveller's cheques (including ATM passes), stamps, documents, photos, valuable papers such as public transport passes, OAP passes, passes offering deductions in travel and other costs, season tickets, entry tickets, passes, etc., change of address items and artwork or collector's items except as provided for in Article 1.10 and 1.11.
- 9.2. Vehicles and/or trailers, including bicycles, caravans (including tented parts), aircraft (inflatable and collapsible) boats, surfboards and all other means of transport or parts thereof or appurtenances thereto.
- 9.3. Tools, sound, video/dvd equipment built into a car, roof racks, ski boxes, snow chains and jet bags.
- 9.4. Damage caused over time by the influence of weather or other influences (except natural disaster), wear and tear, the nature of, or defect to, the luggage, natural decay, moths, rodents, insects, etc.
- 9.5. Damage other than to the goods themselves.
- 9.6. Damage such as blots, scratches, dents, spots etc. unless the goods can no longer be used due to such damage.
- 9.7. Theft, loss or damage to luggage which is abandoned in or on a motor vehicle and/or trailer whereby the journey's destination is not reached.
- 9.8. Breaking of fragile objects and/or the consequences thereof except for damage caused by an accident to the means of transport, break-in, theft, robbery or fire.
- 9.9. Theft, loss, misappropriation or damage to goods received and/or given to use on loan during the cover period of the insurance. Unless the person from whom the goods have been received to use on loan and/or to whom the goods have been given to use on loan is also insured with the Company for the same risk and on the same insurance certificate.

#### **Article 10. Caution Clause**

The following cases are not eligible for reimbursement:

- 10.1. **Normal caution:**  
If the insured (or the person whose assistance the insured is using) has not observed normal caution to prevent theft, loss or damage of the insured luggage. There is an absence of normal caution if, for example, the insured luggage is left unattended other than in a properly locked room.
- 10.2. **Greater precautions:**  
If the insured can be reasonably expected to have taken, and should have taken, greater precautions in the given circumstances to prevent theft, loss or damage to the insured luggage.
- 10.3. **Public transport:**  
Damage to, or the loss or theft of, travel documents, valuables and photographic, film, video/dvd, computer and telecommunications equipment which was not taken on as hand luggage during a journey by boat, train, bus or aircraft.
- 10.4. **Theft from a motor vehicles:**  
Theft of the insured luggage from a motor vehicle, unless the Insured can prove that:
  - it has been left behind in a properly locked boot\*, invisible from the outside, the theft took place between 07.00 a.m. and 10.00 p.m. local time and there is evidence of forcible entry. However, the Insured is not entitled to reimbursement if the insured luggage has been abandoned without supervision for over 24 hours.
  - it has been abandoned without supervision during a short interruption during the journey to have a break and/or during an emergency situation and there is evidence of forcible entry. In this event there is only an entitlement to reimbursement for travel documents, valuables and photographic, film, video/dvd, computer and telecommunications equipment if these have been left out of sight in a locked boot. \*

\* In motor vehicles with a third or fifth door or in a station wagon, the boot must, in addition, be covered with a back shelf or a similar, fixed facility.
- 10.5. **Theft from caravans and campervans:**
  - a. Theft of valuables and travel documents from a caravan or campervan unless these items are stored inside the locked caravan or campervan in a safe and there are traces of break-in.
  - b. Theft of photographic, film, video/dvd, computer and telecommunications equipment from a caravan or campervan unless these items are stored inside a locked storage cupboard and there are traces of break-in.
- 10.6. **Theft from tents:**  
Theft of valuables, travel documents, photographic, film, video/dvd, computer and telecommunications equipment, if these have been left behind in a tent or under an awning.

### **Category IV. MEDICAL EXPENSES**

**These category conditions shall also be governed by the General Policy Conditions, unless there are exceptions to them in these category conditions.**

#### **Article 1. Nature and scope of the insurance**

The Company will reimburse medical expenses incurred by the Insured as a result of sickness, complaint or accident occurring during the period of insurance cover up to a maximum of the insured amount specified in the cover overview. Medical expenses exclusively include:

- doctor's and specialists' fees;
- the costs of hospitalisation;
- the costs of an operation and the use of the operating theatre;
- the costs of X-rays and radiation treatment prescribed by the doctor;
- the costs of medicine, bandages and massage prescribed by the doctor;
- the costs of the Insured's medically necessary transport to and from doctors and the nearest hospital.

These costs will only be reimbursed if the doctor, the specialist and/or the hospital are acknowledged by the competent institutions.

#### **Article 2. Reimbursement of medical costs abroad**

The Company will reimburse:

- 2.1. The expenses mentioned in Article 1, of medical assistance in the area of insurance. This reimbursement shall come into effect on the date on which the treatment starts and shall continue until the first opportunity of the Insured to return to the Netherlands. The Insured shall not be entitled to a reimbursement exceeding 365 days.
- 2.2. The elbow or armpit crutches or wheelchair purchased or rented on medical prescription, provided that these costs have been incurred within 90 days after the sickness arose and/or the accident happened.
- 2.3. The costs of prostheses (except dental prostheses), if the insured has to purchase them abroad as a consequence of an accident on a specialist's prescription.

#### **Article 3. Reimbursement of medical costs in the Netherlands**

The Company will reimburse:

- 3.1. The costs of medical assistance referred to in Article 1 if the Insured falls ill or is involved in an accident during the journey from the Netherlands to the foreign travel destination and/or during the return journey to the Netherlands.
- 3.2. The elbow or armpit crutches or wheelchair purchased or rented on medical prescription, provided that these costs have been incurred within 90 days after the sickness arose and/or the accident happened.
- 3.3. The costs of follow-up treatment in the Netherlands: the costs of medical assistance in the Netherlands, except transport costs, for further medical treatment shall only be reimbursed if they are the consequence of an accident. A precondition is that the insured has undergone at least one treatment abroad during the period of cover and that the medical costs have been incurred within 365 days of the start of the first treatment.

#### **Article 4. Reimbursement of dental treatment**

The Company will reimburse:

- 4.1. Dental treatment resulting from an accident occurring abroad during the period of cover, if the natural teeth of the Insured are damaged, providing that these costs have been made within 365 days of the accident.
- 4.2. Dental treatment received abroad during the period of cover in the case of other emergency treatment.

#### **Article 5. Uninsured risk**

The excess for all medical costs referred to in Article 1 is specified in the cover overview.

#### **Article 6. Special stipulations**

- 6.1. The insured must be treated or nursed in ways that are not unduly expensive and which are in accordance with his current insurance/facility.
- 6.2. If the treatment takes place in the country of which the Insured is a national, the Company shall only reimburse the costs of treatment for diseases, disorders and complaints which the Insured did not have before the policy's effective date and for which he has never been treated before.
- 6.3. If the Insured is hospitalised in a foreign hospital for over two hours, the Company will only reimburse the treatment if it could not be postponed until after the Insured's return to the Netherlands.

#### **Article 7. Special exclusions**

The insured will not be indemnified for medical expenses in the following cases:

- 7.1. If the sickness is related to the use of medicine/preparations to decrease or increase body weight.
- 7.2. If the insurance policy has been taken out and/or has come into effect whilst the Insured was already under medical treatment, the costs of such continued or prescribed treatment will not be reimbursed.
- 7.3. The costs of an operation will not be reimbursed if the operation could have been postponed until after the Insured's return to the Netherlands.

### **Category V. CANCELLATION**

**These category conditions shall also be governed by the General Policy Conditions, unless there are exceptions to them in these category conditions.**

#### **Article 1. Purpose and scope**

The Company guarantees any Insured reimbursement as further described in Article 3 up to the insured amounts stated on the cover overview in the event of: cancellation of the Insured's booked flight, if this is the direct consequence of any of the events mentioned in Article 2.

The insurance is strictly personal and cannot be transferred. There are as many policies as the number of insured persons stated on the insurance certificate. The stipulations that apply to a particular insured person do not apply to others, unless this is explicitly stated. The urgent reason for cancelling the booked flight(s) can be submitted to the medical advisor of the Company for assessment.

#### **Article 2. Insured events**

The reimbursements mentioned in Article 1 shall only be paid if the damage is directly and exclusively caused by the following unforeseen events that occurred during the insurance's term of validity:

- 2.1. the Insured has died, fallen seriously ill or incurred serious injury due to an accident, provided that this has been medically established by the attending physician/specialist within 24 hours after the cancellation;
- 2.2. a relative of the Insured to the first or second remove has died, or has a life-threatening disease or a life-threatening injury due to an accident in the opinion of a physician;
- 2.3. pregnancy of the Insured, provided that this has been medically established by the attending physician/specialist;
- 2.4. a medically necessary operation which a relative travelling with the Insured has to undergo unexpectedly; This event is not insured if the relative concerned is on a waiting list for the operation;
- 2.5. operation of the Insured in connection with a donor organ transplant;
- 2.6. property (real estate, inventory, household effects or merchandise) of the Insured in the Netherlands or the company in the Netherlands where he is employed caused by fire, theft, explosion, storm, lightning or flood, has been seriously damaged, so that his presence is urgently required;
- 2.7. damage caused by fire, explosion, storm, lightning or flooding to the insured holiday accommodation of the Insured, rendering a stay at such place impossible. A precondition for this is that the owner/lessor of the holiday accommodation concerned refuses to pay compensation.
- 2.8. death, serious illness or injury due to an accident of the insured's family or friends residing abroad, due to which the intended stay of the Insured with these persons is not possible;

- 2.9. the Insured has become redundant and can submit a permit to terminate a contract of employment, issued in connection with economic reasons of the company;
- 2.10. the Insured, after unemployment for which he was paid unemployment benefit and for school-leavers insofar the departure date is after 31 May following the year in which they left school, has accepted employment of at least 20 hours per week for a period of at least one year or for an indefinite period of time. A precondition is that the date of employment is within 90 days before the end of the validity term of the insurance;
- 2.11. the Insured is under an obligation to retake an examination during the booked journey and the examination re-take cannot be postponed; A precondition for this, however, is that this concerns a re-take of an exam for the completion of a multi-year education;
- 2.12. the Insured cannot be vaccinated and/or take medicine for medical reasons, where this is obligatory before the journey or the stay at the destination concerned;
- 2.13. the Insured is unexpectedly offered a rented house of which the rental period starts either during the booked journey or in the period of 30 days before the start of the booked journey. However, a precondition is that the Insured can submit an official tenancy agreement, which clearly evidences all this;
- 2.14. permanent disruption of the insured's marriage for which divorce proceedings have been instituted after the journey was booked; The dissolution of a cohabitation contract executed before a civil-law notary valid at the time when the insurance was taken out is considered to be equal to the permanent disruption of the marriage. The petition for divorce and/or dissolution must have been submitted to the court and/or civil-law notary within four weeks after cancellation;
- 2.15. the unexpected refusal of a visa required for the insured, unless the insured cannot obtain the visa because he/she or his/her representative has applied for it too late;
- 2.16. theft or loss of travel documents required for the journey, on the departure date, providing that immediately following the theft or loss the Insured reports the same to the police authorities. The insured shall submit a statement of this report to the Company.

### **Article 3. Reimbursement of cancellation costs**

If the Insured has to cancel a booked flight as a result of any event specified in Article 2.1 to 2.16, the Company will pay out:

- 3.1. the amount the Insured owes to the airline company.
- 3.2. the costs of rebooking the flight at a later date, to avoid complete cancellation;

### **Article 4. Reimbursement in the event of hospitalization.**

If the insured has to be hospitalised during the validity term of the insurance (for at least one night), the Company will pay the amount stated on the cover overview as the reimbursement for unused travel days. Each day of hospitalisation shall count as one unused travel day.

### **Article 5. Reimbursement paid to relatives travelling with the insured/travel companions of the insured**

The Company shall pay compensation as specified in Article 3 to the accompanying family members of the Insured as well as to one travelling companion of the Insured, providing that they have taken out a cancellation insurance policy with the Company for the same period.

### **Article 6. Reimbursement in connection with a travel companion who is insured elsewhere**

The Company will also pay the reimbursement mentioned in Article 3 to the Insured if he cancels the journey due to an event insured under this category that affects a travel companion, who is not insured with the Company. A precondition for this is that this travel companion has taken out cancellation insurance of his own and that he, under such insurance policy, has been reimbursed and that the Insured and this travel companion intended to travel to and from the destination together.

### **Article 7. Special obligations in the event of loss**

In the event of loss the insured or his successor(s) must do the following:

- 7.1. within 3 x 24 hours after the insured event, the agent through whom the insurance policy was taken out is notified of the cancellation of the booked flight(s);
- 7.2. prove to the Company a right to reimbursement by means of supplying statements, such as an employer's declaration, a cancellation charges receipt and all other documents and information that the Company deems necessary. The Insured must, if the Company deems it necessary, make an appointment with a doctor appointed by the Company to check the condition of the Insured.

**If the Insured fails to fulfil said obligations, the Company will not reimburse him.**