

Notice of information deemed to constitute General Terms and Conditions for Policy No. 340 029

Dear Customer,

Based on the type of service(s) that you are buying and the information that you have disclosed to us, we recommend that you take out this insurance policy. This policy consists of the General Terms and Conditions presented below, supplemented by the sales agreement for the insured service, which you receive when you take out this policy.

Before taking out this insurance policy, please read this Notice of Information and the General Terms and Conditions carefully. They outline your rights and obligations, as well as the Insurer's rights and obligations, and are likely to answer any questions that you may have.

Who is the Insurer?

AWP P&C, a French SA [limited company] with a share capital of €18,510,562.50, Bobigny Trade and Companies Register No. 519 490 080, with its registered office at 7 rue Dora Maar, 93400 Saint-Ouen.
A private company governed by the French Insurance Code.

Who is this policy aimed at?

This policy is aimed at any person who has made a reservation for an airplane ticket via KLM and who will request it on the day of the booking for the KLM1 and KLM2 options, or at the latest, when the check-in for the outbound flight of the KLM3 option closes.

What are the eligibility conditions for this policy?

In order to be eligible for the cover, you must have your Home in France.

What is the start date and duration of your policy?

The policy is valid from the date that it is taken out for any personal or business Trip, for a maximum duration of two (2) consecutive months, sold by the Approved Organisation or Intermediary with which this policy has been taken out. The types of cover will be provided under the terms and conditions set out in the "Administrative Provisions".

Which types of cover are provided in the policy?

- The types of cover listed below are those corresponding to the option taken out and which are shown in your sales agreement for the insured service and for which you have paid the corresponding premium. The policy is made up of the following options, providing the following cover:

	KLM1 Cancellation	KLM2 Comprehensive	KLM3 Assistance
Cancellation or change	●	●	
Missed Flight	●	●	
Damage to Baggage		●	●
Traveller Assistance		●	●
Private Third Party Liability Abroad		●	●
Delayed Return		●	●

- In order to find out the payment amounts and limits and the excesses for each type of cover, please refer to the Cover Table. This table also includes a list of general exclusions, along with the exclusions specific to each type of cover.

The policy is drawn up in French and is governed by French law.

Key information

- ✓ You may or may not have a cancellation option after taking out this insurance policy. The terms and conditions for exercising this option are detailed in the "Administrative Provisions" of the General Terms and Conditions in Article 3, "Cancellation option".
- ✓ In order to avoid multi-insurance, in accordance with Article L112-10 of the French Insurance Code:

Please check that you do not already have cover protecting you against one of the risks covered under the new policy. If you are already covered, you have the right to withdraw from this policy within thirty (30) calendar days of signing it, without incurring any fees or penalties, provided that all of the following conditions are met:

- you have taken out this policy for non-professional purposes;
- this policy was taken out at the same time as buying goods or services sold by a supplier;
- you can prove that you are already protected against one of the risks covered under the new policy;
- the policy that you wish to cancel has not been fully implemented;
- you have not submitted any claims covered by this policy.

In that instance, you can exercise your right to cancel this policy by letter or any other durable medium sent to the insurer for the new policy, along with a document proving that you already have cover protecting you against one of the risks covered in the new policy. The Insurer will be required to reimburse you the premium that you have paid within thirty days of you cancelling it.

If you would like to cancel your policy but do not satisfy all of the conditions above, please check the cancellation terms and conditions set out in your policy under Article 3 of the Administrative Provisions, "Cancellation Option".

- ✓ Service quality and customer satisfaction are a priority for us. If, however, our services have not been completely satisfactory, you can contact us in accordance with the terms provided for in the 'Administrative Provisions' of the General Terms and Conditions in Article 12, 'Complaints handling procedures'.

Urgent need for medical assistance

- ▶ **Contact us (24 hours a day)**
On +33 (0)1 42 99 02 02
- ▶ Deaf and hard of hearing acces (24/7)
<https://accessibilite.votreassistance.fr>
- ▶ **Please provide:**
Your policy number
Who requires assistance? Who needs help?
Where? Why?
Who is looking after the person who is unwell?
Where, when and how can the person be contacted?

Compensation request

- ▶ To register your claim immediately, contact us at:

www.allianz-protection.com
- ▶ If you do not have Internet access, contact us (mainland France time zone):
on +33 (0)1 42 99 03 95
between 9:00 am and 6:00 pm, Monday to Friday

The policy is drawn up in French and is governed by French law. The types of cover in the policy, **except for assistance cover**, are regulated by the French Insurance Code.

**General Terms and Conditions
KLM1 Option: Cancellation or Change
KLM2 Option: Comprehensive
KLM3 Option: Assistance**

TABLE OF CONTENTS

DEFINITIONS COMMON TO ALL TYPES OF COVER..... 3

POLICY TERRITORY..... 4

COVER TABLE.....5

GENERAL EXCLUSIONS..... 9

POLICY COVER 10

CANCELLATION OR CHANGE 10

MISSED FLIGHT..... 15

DAMAGE TO BAGGAGE 18

TRAVELLER ASSISTANCE 22

PRIVATE THIRD PARTY LIABILITY OVERSEAS 30

ADMINISTRATIVE PROVISIONS..... 35

DEFINITIONS COMMON TO ALL TYPES OF COVER

The terms starting with a capital letter in this policy are defined either in this chapter, or at the beginning of the description for each type of cover.

ABROAD: any country, **except for the country where the Insured Person resides, along with Countries Not Covered.**

ACCIDENT: any sudden and unforeseen event, external to the victim or the damaged item, which is the cause of the damage.

ACCIDENTAL BODILY INJURY: any unintentional bodily injury caused by the sudden action of an external cause, diagnosed by a Doctor.

AGGRAVATED THEFT: theft involving a Break-in or Assault, documented by a detailed crime report.

APPROVED ORGANISATION OR INTERMEDIARY: travel or transport professionals who deliver the insured service.

ASSAULT: any physical assault or threat of physical assault from a Third Party.

BENEFICIARY: a person receiving compensation, paid not in their personal capacity, but because of their links with the Insured Person.

BREAK-IN: forcing, damage or destruction of an anti-theft device.

CHANCE EVENT: any unforeseeable event, external to, and outside of the control of, the Insured Person.

CIVIL WAR: an armed struggle within a State between different groups defined by their ethnic, religious, community or ideological identity, or between at least one of these groups and the regular armed forces of that State.

CONSEQUENTIAL IMMATERIAL DAMAGE: any monetary loss as a result of being unable to use a right, a service rendered by a person or an item of property being curtailed, activity ceasing, or loss of profit or customers, and which is the direct consequence of a covered Physical Injury or covered Material Damage.

COUNTRIES NOT COVERED: North Korea. An updated list of all Countries Not Covered is available on the Allianz Travel website, at the following address: <http://paysexclus.votreassistance.fr>

COVER THRESHOLD: minimum duration, amount or percentage which triggers the Insurer's assistance or the cover being implemented.

COVERED EVENT: any event giving entitlement to cover and set out in each type of cover in this policy.

DE FACTO SPOUSES: two individuals who are neither married nor legally registered partners, but who have supporting documents to prove that they live within the same home (such as a cohabitation certificate or, should they not have one, housing tax documentation, a bill for electricity, gas, water or insurance, or a rent receipt) and that they were living under the same roof from the date when the policy is taken out and at the time of the Covered Event.

DEPARTURE: the scheduled date and time for the start of the Trip.

DISPUTE: conflict between the Insured Person and a Third Party resulting in enforcement of a right, fighting of a claim or defence before any court.

DOCTOR: any person who holds a medical qualification that is legally recognised in the country in which they usually carry out their professional activity.

EPIDEMIC: a contagious disease whose spread constitutes an epidemic according to the World Health Organization (WHO) or the relevant health authority of the Insured Person's Home country.

EUROPE: territories of the Member States of the European Union, located in geographical Europe, as well as the following territories and countries: Guadeloupe, Guyana, Martinique, Réunion, Liechtenstein, the Principalities of Monaco and Andorra, Saint-Martin, Switzerland, the Vatican.

EXCESS: the share of the loss payable by the Insured Person when the claim is settled. The excess amounts for each type of cover are set out in the Cover Table.

FLIGHT CONFIRMATION: formality required by the travel organiser according to the procedures defined in its terms of sale, allowing the purchase of the ticket to be validated and the booking of the places to be held.

FOREIGN WAR: an armed conflict, whether declared or not, between one State and one or more other States or an irregular external armed force, on the grounds of, for example, a geographical, political, economic, racial, religious or environmental dispute.

FRANCE: Mainland France (including Corsica), Guadeloupe, Guyana, Martinique, Mayotte, Réunion, Saint-Martin (French part) and Saint-Barthélemy.

HOME: usual place of residence situated in Europe, which establishes the Insured Person's exercise of their civic rights.

ILLNESS: any change in a person's health condition as diagnosed by a Doctor.

INSURANCE PERIOD: period of validity of this policy.

INSURED PERSON(S): the person(s) designated in the Specific Terms and Conditions/listed in the sales agreement for the insured service provided that their Home is located in France.

INSURER: AWP P&C, hereinafter referred to by its commercial name, Allianz Travel, i.e. the Insurer with whom this insurance policy has been taken out.

LIMIT PER COVERED EVENT: the maximum covered amount for an event giving entitlement to cover, irrespective of the number of Insured Persons in this policy.

LIMITATION PERIOD: period beyond which any claim or action is no longer admissible.

MAINLAND FRANCE: European territory belonging to France (including the islands located in the Atlantic Ocean, the English Channel and the Mediterranean), **excluding any French overseas department, region, local authority, territory and country.**

MATERIAL DAMAGE: any accidental damage, destruction or loss of an item of property, as well as any damage suffered by a pet.

NATURAL DISASTER: an event of natural origin caused by the abnormal intensity of a natural phenomenon, and recognised as such by the authorities of the country in which it occurs.

PANDEMIC: an epidemic which the World Health Organization (WHO) or the relevant health authority of the Insured Person's Home country has declared as a pandemic.

POLICYHOLDER: the signatory of the sales agreement for the insured service, who thereby agrees to pay the corresponding insurance premium.

PUBLIC TRANSPORTATION BY AIR: passenger transportation service by air making places available for valuable consideration, distributed directly through approved agents or by the travel organiser that chartered the flight, the timetables, availabilities and prices for which are publicised and resulting in a travel document being issued.

QUARANTINE: strict isolation imposed upon a person who has been exposed to, or is likely to have been exposed to, a contagious disease whose spread has been declared as an Epidemic or a Pandemic, as ordered by a competent authority. **Lockdowns that apply more broadly to part or all of a population or geographical area are excluded.**

REGULAR FLIGHT: scheduled flight made by a commercial aeroplane, the precise timetables and frequencies of which match those published in the "Official Airlines Guide".

SERVICE FEES: fees charged by the Approved Organisation or Intermediary when booking air travel.

SUBROGATION: process by which the Insurer replaces the Insured Person in their rights and legal actions against any party liable for their damage in order to obtain reimbursement of the amounts that the Insurer has paid to the Insured Person following an Insured Event.

The Azores, the Canary Islands and Madeira are not included in this definition.

THIRD PARTY: any individual or legal entity except for the Insured Person.

TRIP: insured transport and/or holiday, organised, sold or delivered by the Approved Organisation or Intermediary with whom this policy was taken out and scheduled to take place within the validity period of this policy.

POLICY TERRITORY

The "Cancellation or Change" and "Missed Flight" and "Delayed Return" types of cover apply to any Trip worldwide, **except for Countries Not Covered.**

The types of cover "Damage to Baggage, Traveller Assistance and Private Third Party Liability Abroad" apply in the country/countries visited during the Trip organised by the Approved Organisation or Intermediary and mentioned in the sales agreement for the insured service, **excluding Countries Not Covered.**

COVER TABLE

COVERED EVENTS	COVER AMOUNTS AND LIMITS	EXCESSES OR COVER THRESHOLDS
CANCELLATION OR CHANGE - KLM 1 and KLM 2 options		
<ul style="list-style-type: none"> • After a Covered Event occurs (other than those mentioned below) 	Reimbursement of cancellation fees as per the scale applied by the airline company and up to the following limits:	N/A
<ul style="list-style-type: none"> • Following a cancellation or change in holiday dates made by the employer. • Following the Aggravated Theft of identity papers within 5 days of the Departure 	For Cancellations: <ul style="list-style-type: none"> - €5,000 per insured person, and - €32,000 per Insured Event for all persons insured under this policy, up to a limit of the total amount of cancellation fees or For Changes: <ul style="list-style-type: none"> - €300 per insured person or per booking 	25% of the amount of the cancellation fees insured with a minimum of €30 and a maximum of €150 per insured person.

COVERED EVENTS	COVER AMOUNTS AND LIMITS	EXCESSES OR COVER THRESHOLDS
MISSED FLIGHT – Options KLM 1 and KLM		
<ul style="list-style-type: none"> • When the Insured Person misses the flight 	Paying for a new ticket for departure within 24 hours, limited, per insured person, to the amount of the single ticket initially purchased.	N/A

COVERED EVENTS	COVER AMOUNTS AND LIMITS	EXCESSES OR COVER THRESHOLDS
DAMAGED BAGGAGE (*) - Options KLM 2 and KLM 3		
<ul style="list-style-type: none"> • Damage to Covered Property while it is being transported and during the Holiday 	Compensation up to a limit of: €800 per insured person and per claim	Excess per insured person and per claim: €30
<ul style="list-style-type: none"> • Theft of Valuables 	Compensation up to a limit of: 50% of the 'Damage to Baggage' cover amount, per insured person and per Insurance Period	

(*) The maximum amount of cover for "Damage to Baggage" including "Theft of valuables" may not exceed €800 per claim.

COVERED SERVICES OR REIMBURSEMENTS	COVER AMOUNTS AND LIMITS	EXCESSES OR COVER THRESHOLDS
TRAVELLER ASSISTANCE - Options KLM 2 and KLM 3		
ASSISTANCE DURING THE TRIP		
<ul style="list-style-type: none"> • Repatriation Assistance arranging and paying for returning the Insured Person to their Home or transporting them to a hospital arranging and paying for return travel for an insured travel companion 	Actual costs	N/A
<ul style="list-style-type: none"> • Assistance to the Insured Person's minor children or their disabled adult children 	Actual costs	N/A

COVERED SERVICES OR REIMBURSEMENTS	COVER AMOUNTS AND LIMITS	EXCESSES OR COVER THRESHOLDS
TRAVELLER ASSISTANCE - Options KLM 2 and KLM 3		
Arranging and paying for returning the Insured Person's minor children or disabled adult children to their Home when the Insured Person is repatriated Arranging and paying the cost of a travel companion's return fare for repatriating minor children or disabled adult children when the Insured Person is hospitalised locally	Actual costs	
<ul style="list-style-type: none"> • A visit from a close relative should the Insured Person be hospitalised locally Paying the costs to enable a family member to reach the Insured Person's beside: Round-trip travel Local Accommodation Costs until the Insured Person is repatriated or discharged from hospital	Actual costs Up to a limit per day of €50 for a maximum of 7 days, i.e., a maximum of €350 per person	N/A
<ul style="list-style-type: none"> • Charges for Emergency Hospitalisation Abroad (*) The Insured Person is registered with a basic social security scheme: · Direct payment subject to reimbursement by the Insured Person of the amounts received from welfare agencies The Insured Person does not belong to a basic social security scheme: · advance (*) The maximum amounts set out for the Charges for Emergency Hospitalisation Abroad" cover and the "Emergency Medical Expenses Paid Abroad by the Insured Person (including Emergency Dental Care Expenses) cover cannot be combined.	Up to the following limits, per insured person and per Insurance Period: - €150,000 - €150,000	N/A
<ul style="list-style-type: none"> • Emergency Medical Expenses Paid Abroad by the Insured Person (*) Reimbursement of Emergency Medical Expenses payable by the Insured Person (excluding Emergency Dental Care Expenses) Reimbursement of Emergency Dental Care Expenses payable by the Insured Person (*) The maximum amounts set out for the "Emergency Medical Expenses Paid Abroad by the Insured Person (including Emergency Dental Care Expenses)" cover and the "Charges for Emergency Hospitalisation Abroad" cover cannot be combined.	Up to the following limits, per insured person and per Insurance Period: €150,000 €300	Excess per Insurance Period: €30
<ul style="list-style-type: none"> • Additional costs locally Reimbursement of the Accommodation Costs of the Insured Person and/or the Accommodation Costs incurred by insured Family Members or the Accommodation Costs incurred by an insured travel companion, should one of the following occur: · immobilisation locally	Up to a limit per day and per person of €50 for a maximum of 7 days, i.e., a maximum of €350 per person	N/A
<ul style="list-style-type: none"> • Search and/or Rescue Expenses Search Expenses Rescue Expenses	Up to the following limits: per insured person and per Claim: €750 per insured person and per Claim: €750	N/A

COVERED SERVICES OR REIMBURSEMENTS	COVER AMOUNTS AND LIMITS	EXCESSES OR COVER THRESHOLDS
TRAVELLER ASSISTANCE - Options KLM 2 and KLM 3		
<ul style="list-style-type: none"> • Assistance should the Insured Person die Transporting the body Funeral Expenses Additional costs of transporting insured members of the deceased person's family or an insured travel companion 	Actual costs Up to a limit of €750 per insured person Actual costs	N/A
<ul style="list-style-type: none"> • Legal Assistance Abroad Reimbursement of lawyers' fees Advance payment of bail 	Up to the following limits, per insured person and per Insurance Period: €5,000 €5,000	N/A
<ul style="list-style-type: none"> • Early return assistance Arranging and paying the travel costs 	Actual costs	N/A
<ul style="list-style-type: none"> • Making medication available locally Making medication available 	The costs of purchasing medication and/or receiving treatment to be paid by the Insured Person Shipment charges	N/A
<ul style="list-style-type: none"> • "Unforeseen" assistance: Communicating with your family 	Actual costs	N/A

COVERED DAMAGE	COVER AMOUNTS AND LIMITS	EXCESSES OR COVER THRESHOLDS
PRIVATE THIRD PARTY LIABILITY ABROAD (*) - Options KLM 2 and KLM 3		
<ul style="list-style-type: none"> • Physical Injury and Consequential Non-Material Damages following covered damage • Material and Non-Material Damage following covered damage 	Up to €500,000 per claim Up to €50,000 per claim	N/A

COVERED SERVICES OR REIMBURSEMENTS	COVER AMOUNTS AND LIMITS	EXCESSES OR COVER THRESHOLDS
DELAYED RETURN - Options KLM 2 and KLM 3		
TRIP EXTENSION		
<ul style="list-style-type: none"> • After a Covered Event occurs: <ul style="list-style-type: none"> - Quarantine 	<p>Reimbursement of additional expenses incurred after the Trip is extended, up to the following limits:</p> <p><u>WITH SUPPORTING DOCUMENTS for these expenses:</u></p> <p>€150 per day and per insured person for a maximum period of 14 consecutive days, i.e., €2,100 maximum</p> <p>OR</p> <p><u>WITHOUT SUPPORTING DOCUMENTS for these expenses:</u></p> <p>€50 per day and per insured person for a maximum period of 14 consecutive days, i.e., a maximum of €700</p>	<p>Cover threshold:</p> <p>delay of more than 12 hours in the original Departure time (shown on the insured ticket or on the notification issued by the transportation operator)</p>
REDIRECTION TO THE ORIGINAL RETURN LOCATION		
<ul style="list-style-type: none"> • Following the occurrence of a Covered Event 	<p>Reimbursement of additional travel costs for getting to the originally scheduled return location, up to a limit of:</p> <p>€500 per insured person and per Covered Event</p>	<p>N/A</p>

GENERAL EXCLUSIONS

In addition to the specific exclusions stated for each type of cover and any exclusions stated in the definitions, the Insurer will never insure the consequences of the following circumstances and events:

1. deliberate damage of any kind caused or instigated by the Insured Person or with their complicity, or following gross negligence or wilful misconduct by the Insured Person (Article L113-1(2) of the French Insurance Code), except in cases of self-defence or in order to assist a person in danger;
2. criminal convictions against the Insured Person;
3. suicide or attempted suicide by the Insured Person;
4. damage as a result of:
 - the Insured Person consuming alcohol and/or;
 - the Insured Person using non-medically prescribed medication, drugs or narcotics listed in the French Public Health Code;
5. unless otherwise stipulated in the cover, damage as a result of a Civil War or a Foreign War, acts of terrorism, riots, popular movements, coups, hostage-taking, or strikes;
6. civilian or military use of nuclear reactions, i.e. transformation of the nucleus of an atom, transporting and processing radioactive waste, use of a radioactive source or body, exposure to ionising radiation, contamination of the environment by radioactive agents, or an accident or malfunction taking place on a site that transforms the nucleus of atoms;
7. incidents for which either Trip organiser may be liable under Title I of the French statute no. 2009-888 dated 22 July 2009 on the development and modernisation of tourist services, or the carrier, unless otherwise specified in the cover;
8. failure by the Insured Person to comply with safety rules imposed by the carrier or any regulations issued by the local authorities;
9. failure by the Insured Person to comply with bans issued by the local authorities;
10. restriction of free movement of individuals and goods, airport closures and border closures. Also excluded are:
11. damage occurring before this policy was taken out;
12. unless otherwise stated in the cover, the consequences of an Epidemic or Pandemic.
13. the consequences of:
 - exposure to infectious biological agents, chemical agents of a combat gas type, incapacitating agents, radioactive agents, or neurotoxic agents or agents with residual neurotoxic effects; situations involving quarantine or specific preventive or monitoring measures or recommendations by the international or local health authorities;
 - natural and/or human pollution.

POLICY COVER**CANCELLATION or CHANGE - Options KLM 1 and KLM 2****SPECIFIC DEFINITIONS FOR THIS COVER**

CANCELLATION: firm and final withdrawal from the Trip by the Insured Person, notified to the Approved Organisation or Intermediary.

PROGRESS MONITORING: new medical check-up and/or additional medical examinations.

CHANGE: postponement of the Trip by the Insured Person, provided that it is postponed before their Departure and this postponement is for the outbound journey date for the Trip, at the very minimum.

The definitions of the terms common to all types of cover appear in the 'Definitions common to all types of cover' chapter at the beginning of this policy.

1. PURPOSE OF THE COVER

When the Insured Person cancels or changes their booking, the Approved Organisation or Intermediary for their Trip may charge the Insured Person for all or part of the price of the services, called "Cancellation or Change fees", which increase as the Departure date approaches. The fees are calculated using the scale of charges applied by the airline company and according to the General Terms and Conditions shown in the Cover Table.

The Insurer will reimburse the Cancellation or Change fees charged to the Insured Person, after the Excess amount appearing in the Cover Table is deducted.

2. COVERED EVENTS SHOULD A CANCELLATION OR CHANGE TO THE TRIP OCCUR

Once the insurance has been taken out, a Cancellation or Change must be as a result of one of the following Covered Events, which absolutely prevents the Insured Person's Departure:

- **Medical events:**

2.1. An Illness, including pregnancy-related illnesses or illnesses linked to an Epidemic or a Pandemic, or illnesses linked to an Accidental Bodily Injury, as well as the consequences, after-effects, complications or aggravations of an Illness or Accidental Bodily Injury diagnosed before the Trip was booked,

which requires:

- either hospitalisation from the Cancellation or Change date up to the originally scheduled Departure date,
 - or
 - the person to stop working, or receive home care if they do not work, from the Cancellation/Change date up to the originally scheduled Departure date,
- and**
- a medical check-up, as well as following medical treatment, from the Cancellation/Change date, or undergoing tests prescribed by a Doctor,

with, in all cases, these procedures being paid for by one of the health insurance organisations with which the Insured Person is registered,

affecting:

- the Insured Person, their spouse, Common Law or registered partner, their direct ascendants or descendants, as well as those of their spouse, Common Law or registered partner,
- their brothers, sisters, brothers-in-law, sisters-in-law, sons-in-law, daughters-in-law, fathers-in-law, mothers-in-law, legal guardians, or wards;
- their work replacement, named when this policy was taken out or, failing this, the person named by the company when organising paid leave,
- the person named when this policy was taken out, entrusted with, in return for a fee, during the Insured Person's Trip, looking after or accompanying the Insured Person's minor children or a disabled person living with the Insured Person,
- another member of the Insured Person's family provided that hospitalisation is for more than 48 hours.

2.2. A medical contraindication against a vaccination, the effects of a vaccination, or being unable to receive preventive treatment for medical reasons that is required for the destination of the Insured Person's Trip.

- **Family events:**

2.3. Notification to the Insured Person about the adoption of a child during their Trip, provided that they were not aware of such notification at the time the booking was made.

2.4. The death (including death linked to an Epidemic/a Pandemic) **of:**

- the Insured Person, their spouse, De Facto Spouse or legally registered partner, or their direct ascendants or descendants, as well as those of their spouse, De Facto Spouse or legally registered partner,
- their brothers, sisters, brothers-in-law, sisters-in-law, sons-in-law, daughters-in-law, fathers-in-law, mothers-in-law, legal guardians, or wards;
- their work replacement, named when this policy was taken out or, failing this, the person named by the company when organising paid leave,
- the person named when this policy was taken out, entrusted with, in return for a fee, during the Insured Person's Trip, looking after or accompanying the Insured Person's minor children or a disabled person living with the Insured Person,
- another member of the Insured Person's family,

and provided that the deceased person's Home is not the Trip destination.

- **Professional or academic events:**

2.5. The Insured Person is notified about an examination resit in connection with their studies on a date during the Trip, provided that the Insured Person did not know that they had failed the examination when they made the booking.

The cover will also apply when the Insured Person repeats their academic year, provided that they were not aware of the repeated year when they booked the Trip **and** that the new academic year starts during the Trip dates.

2.6. Redundancy of the Insured Person or his or her spouse, common law partner or legally registered partner, on condition that the notice of the personal interview preceding the redundancy was not received before the date the reservation was made for the insured Trip.

2.7. Obtaining a job as an employee or a paid internship, taking effect before or during the Trip dates, while the Insured Person was registered as unemployed.

The cover will also apply when the Insured Person already has a job on a fixed-term contract when the insured service was booked, **and** provided that this contract is:

- upgraded to a permanent contract or
- renewed the day after the contract end date for a minimum period of three (3) consecutive months.

2.8. The cancellation or change, by the Insured Person's employer, of the dates of the paid leave, which had been granted before the Trip was booked. The cover is provided to salaried employees, **excluding those for who do not require approval from a superior in order to set the date of, change and/or cancel their leave (such as senior executives, managers and company legal representatives);**

The compensation will be paid out after the specific Excess stated in the Cover Table is deducted.

This Excess will also apply to the persons booked on the Trip at the same time as the Insured Person who has cancelled or changed the Trip.

The cover will not apply if the Policyholder for this policy is the company that changes the dates of the paid leave.

2.9. The non-disciplinary work-related transfer of the Insured Person, imposed by an employer, that requires the Insured Person to move during the Trip, or, within eight (8) days of the start of the Trip, **and** providing that the Insured Person did not know about the transfer when the Trip was booked.

- **Material Damage events:**

2.10. Serious Material Damage as a result of:

- a burglary involving a Break-in;
- a fire;
- water damage;
- any climate, meteorological or natural event, excluding Natural Disasters,

directly affecting the following types of property:

- the Insured Person's main or secondary residence,
- their farm,
- their business premises if the Insured Person is a tradesperson, trader or a business executive, or if they are self-employed.

and requiring the presence of the Insured Person on site on a date during the period of their Trip, in order to carry out administrative procedures associated with the damage, or with restoring the damaged property.

2.11. Serious damage to the Insured Person's vehicle occurring in the forty-eight (48) hours prior to Departure and requiring assistance from a professional, provided that the Vehicle can no longer be used to take them to their final destination.

2.12. An Accident or breakdown of the transportation used by the Insured Person for his transportation, involving a delay of more than two (2) hours above the estimated time of arrival, having made him miss the transportation booked for his Departure, and provided that the Insured Person has taken steps to reach the airport at least two (2) hours before the check-in time.

• **Other events:**

2.13. The Insured Person or an Insured travel Companion is put into Quarantine, providing that it starts before Departure and ends during the dates of the Trip.

2.14. A riot, a terrorist attack or act of terrorism occurring Abroad, in the Insured Person's destination or holiday town(s)/city/cities.

Cover is in effect in the event of a riot, terrorist attack or act of terrorism, when the following conditions are met:

- the event involves Material Damages and Bodily Injury in the destination or holiday town(s)/city(ies),
- the local authorities advise against travel to the destination or holiday town(s)/city(ies),
- the Departure date is planned for **less than thirty (30) days** after the date that the Insured Event occurred,
- no similar event has occurred in the city/cities of destination or stay, in the **thirty (30) days** before the reservation was made for the insured service.

2.15. The unforeseen, mandatory summons to appear in court as a witness or for jury service.

2.16. The Insured Person is called for an organ transplant during the Trip.

2.17. Aggravated Theft, within the five (5) days prior to Departure, of identity papers belonging to the Insured Person (passport, identity card) essential for access to the transport booked and/or for going through customs as planned during the Trip, provided that a formal complaint is filed by the day of Departure at the latest.

The compensation will be paid out after the specific Excess stated in the Cover Table is deducted. This Excess also applies to the persons booked on the Trip at the same time as the Insured Person who has cancelled or changed the Trip. Refusal of a tourist visa to the Insured Person by the authorities of the destination and/or transit country, provided that the actions taken by the Insured Person allowed sufficient time for the authorities to come to a position prior to Departure, and provided that the Insured Person complies with the restrictions imposed by the administrative authorities of that country.

2.18. Refusal of a tourist visa to the Insured Person by the authorities of the destination and/or transit country, provided that the actions taken by the Insured Person allowed sufficient time for the authorities to come to a position prior to Departure, and provided that the Insured Person complies with the restrictions imposed by the administrative authorities of that country.

2.19. Cancellation or Change by insured Travel Companions travelling alone or two persons travelling together as a result of the covered Cancellation or Change made by one of the Insured Persons, provided that they are all insured under this policy and are listed in the same sales agreement for the Trip.

However, all of the Insured Persons who are part of the same household for tax purposes, or who can prove that they are directly related, are insured under the 'Cancellation or Change' cover.

3. COVER AMOUNT

The Insurer will reimburse, up to the amounts stated in the Cover Table, the total Cancellation or Change fees charged by the Approved Organisation or Intermediary for their Trip.

Billed cancellation or change charges will be reimbursed up to the limits shown in the Cover Table, without, however, exceeding the limit per insured person and the Limit per Insured Event.

The Insurer's compensation is limited to the total fees that would have been charged to the Insured Person if they had informed the Approved Organisation or Intermediary on the day on which the Covered Event occurred.

Compensation from the Insurer may not under any circumstances exceed the cost of the insured service, declared when this policy was taken out.

The costs of tips, administration fees, visas and other fees, excluding Service Fees, as well as the premium paid for taking out this policy, will not be reimbursed.

Only airport taxes that the airline or ticket agent is not responsible for reimbursing may be reimbursed by the Insurer, provided that these taxes are included in the price of the insured Trip.

Service Fees will be fully reimbursed, provided that they are part of the insured amount declared when this policy was taken out.

In the event of any change as a result of the occurrence of any of the Insured Events, the Insurer will reimburse the Insured Person for the change fees up to the limit shown in the Cover Table. **If the Insured Person changes then cancels the insured service, their Cancellation Fees will be paid, after the Change Fees already reimbursed by the Insurer are deducted.**

If the Insured Person cancels or changes their Trip dates following a Covered Event, the Insurer will pay the single-room supplement for the travel companion travelling alone who is insured under the same policy, up to the limit of the cancellation fees that would have been charged if they had cancelled themselves.

An Excess per insured person, the amount of which is stated in the Cover Table, is deducted from the compensation owed.

4. COVER EXCLUSIONS

In addition to the "General Exclusions" (except for Article 12) appearing at the beginning of this policy and any exclusions appearing in the definitions, the consequences of the following circumstances and events are also excluded:

- 4.1. the consequences, after-effects, complications or aggravations of an Illness or Accidental Bodily Injury, which were diagnosed before the insured service was booked;
- 4.2. Illnesses or Accidental Bodily Injuries that were diagnosed, treated, recurred, worsened or required a hospital stay between the date of booking of the Insured Service and the date on which this policy was taken out;
- 4.3. Illnesses that were diagnosed, progressed or resulted in an additional examination or change in treatment within thirty (30) days before the booking of the insured service;
- 4.4. Accidental Bodily Injuries that occurred or resulted in surgery, rehabilitation, an additional examination or change in treatment within thirty (30) days before the booking of the insured service;
- 4.5. voluntary termination of pregnancy or in vitro fertilisation;
- 4.6. medical contraindications to the insured service not due to an Illness, including those related to pregnancy, or Accidental Bodily Injury, according to the terms of Article 2.1 of this cover;
- 4.7. a failure to have the vaccination or take the preventive treatment required for the destination of the Trip not justified by a medical contraindication referred to in Article 2.2 of this cover;
- 4.8. Natural Disasters;
- 4.9. any Insured Event occurring between the date the insured service was booked and the date this policy was taken out;
- 4.10. air travel taxes coded QW and QX, as well as any other taxes reimbursable by airline companies and/or flight ticket distributors, in accordance with Article L113-8 of the French Consumer Code.

5. WHAT THE INSURED PERSON MUST DO SHOULD THEY CANCEL OR CHANGE THEIR TRIP

The Insured Person must notify the Approved Organisation or Intermediary for the Trip of any Cancellation or Change as soon as an Covered Event preventing the scheduled Departure occurs.

The Insured Person must then submit a claim to the Insurer **within five (5) working days** of becoming aware of the event, except in the case of an act of God or force majeure:

In order to expedite the claim and streamline processing on the case, we recommend submitting the claim on the following website: www.allianz-protection.com

The Insured Person can track the progress of their case 24/7 by logging on to the website.

The Insured Person can also contact the Insurer by telephone from Monday to Friday between 9:00 am and 6:00 pm (Mainland France time zone):

From France (if the Insured Person's current location is in France)

- 01 42 99 03 95 for French speakers (standard rate call)
- 01 42 99 03 97 for non-French-speaking insured persons

Outside France (if the Insured Person's current location is not in France)

- +33 (0)1 42 99 03 95 for French speakers
- +33 (0)1 42 99 03 97 for non-French-speaking Insured Persons

After this period, if the Insurer incurs a loss because of the Insured Person's late submission, the compensation may be reduced based on the loss incurred.

6. SUPPORTING DOCUMENTS TO BE PROVIDED



PLEASE NOTE

It is the responsibility of the Insured Person to prove that all the conditions required for the implementation of this "Cancellation or Change" cover are satisfied, based on the supporting documents referred to below.

These documents and any information provided by the Insured Person will serve as proof of the reason for the Cancellation or Change and will assist in the process of assessing the compensation amount.

If the reason for the Cancellation or Change is medical, the Insured Person may, if they so wish, send their medical details in an envelope marked 'confidential' for the attention of the Insurer's medical adviser.

If no supporting documents are provided or if the supporting documents do not provide material proof of the Covered Event cited, the Insurer will be entitled to refuse the Insured Person's compensation claim.

COVERED EVENTS	SUPPORTING DOCUMENTS TO BE PROVIDED
<p>IN ALL CASES</p>	<ul style="list-style-type: none"> - the booking confirmation for the insured services; - the invoice for the Cancellation or Change fees for the insured services; - an official document specifying the family relationship with the person making the Cancellation or Change (such as a copy of the official family record book or a cohabitation certificate), where applicable; - bank account details, - any other supporting documents requested by the Insurer after the claim has been assessed.
<p>In the event of Illness, including illnesses related to pregnancy or an Epidemic/a Pandemic, or Accidental Bodily Injury</p>	<ul style="list-style-type: none"> - the medical questionnaire to be completed by the patient's Doctor, - prescriptions for medical treatment, if applicable, - examination reports, where applicable; - a copy of the sick leave certificate, where applicable; - the hospitalisation certificate, where applicable; - after the claim has been assessed and at the request of the Insurer: reimbursement statements from the health insurance organisation with which the Insured is registered.
<p>Should there be a contraindication against vaccination or preventive treatment being received</p>	<ul style="list-style-type: none"> - the medical contraindication certificate for the vaccination or for receiving preventive treatment; - any medical document certifying the condition that makes vaccination or preventive treatment inadvisable.
<p>Should the Insured Person be notified about the adoption of a child</p>	<ul style="list-style-type: none"> - a copy of the official notification.
<p>Should the Insured Person die (including death linked to an Epidemic or a Pandemic)</p>	<ul style="list-style-type: none"> - a copy of the death certificate; - contact information for the solicitor in charge of the deceased Insured Person's estate, where applicable.
<p>Should the Insured Person need to do an examination resit</p>	<ul style="list-style-type: none"> - a copy of the notification of the resit examination; - a copy of the examination re-sit or academic transcript establishing that it was taken.
<p>Should the Insured Person be made redundant</p>	<ul style="list-style-type: none"> - a copy of the notice about the one-on-one meeting prior to being made redundant; - a copy of the letter confirming the redundancy.
<p>Should the Insured Person obtain a job</p>	<ul style="list-style-type: none"> - ;the most recent supporting document substantiating the status of job-seeker or registration at a Job Centre; - a copy of the letter confirming employment or the employment contract.
<p>Should the Insured Person obtain a paid internship</p>	<ul style="list-style-type: none"> - ;the most recent supporting document substantiating the status of job-seeker or registration at a Job Centre; - a copy of the paid internship agreement.
<p>Should the Insured Person's employer cancel or change the dates of the paid leave</p>	<ul style="list-style-type: none"> - a copy of the prior approval for the paid leave dates; - a copy of the pay slip showing a summary of the paid leave for the month of the cancelled/changed Trip or confirmation from the employer.
<p>Should a work-related transfer occur</p>	<ul style="list-style-type: none"> - a copy of the signed amendment to the Insured Person's employment contract, stating the date and place of the transfer.

COVERED EVENTS	SUPPORTING DOCUMENTS TO BE PROVIDED
In the event of serious property damage	- the acknowledgement of receipt of the claim submitted to the comprehensive home insurance provider; - in the event of a burglary, a copy of the crime report made to the police.
In the event of serious vehicle damage	- acknowledgement of receipt of the claim submitted to the motor insurance provider; - or a copy of the vehicle repair and/or towing invoice.
In the event of Accident or breakdown involving the transport used by the Insured Person for their travel to the Departure location	Public transport: - the public transport ticket stating the Departure time, - a copy of the certificate issued by the transportation company specifying the date, time and length of the delay or of the immobilisation. Private transport: - a copy of the breakdown repairs/towing bill, - where applicable, the acknowledgement of receipt of the claim submitted to the car insurance provider.
Should the Insured Person be called for an organ transplant	- a copy of the notification.
Should identity papers be stolen	- a copy of the detailed crime report drawn up by the police.
Should a tourist visa be refused	- a copy of the invoice issued by the Embassy for the visa application; - a copy of the letter issued by a competent authority in the name of the Insured Person refusing the visa.
In case of a riot, a terrorist attack or an act of terrorism occurring Abroad	- the document issued by the French Ministry of Foreign Affairs advising against travel to the destination town(s)/city(cities) of the Trip, - a declaration from the authorised Organisation or Intermediary indicating that it is unable to offer the Insured Person a destination other than the one originally planned.
In the event of a court summons	- the copy of the court summons
Should the Insured Person be put into Quarantine	- the supporting document issued by the health authorities.

MISSED FLIGHT - KLM 1 and KLM 2 options

1. PURPOSE OF THE COVER

When the Insured Person misses their outbound flight on the Departure of their Trip, following one of the Insured Events referred to in Article 2 below, **and** provided that their ticket cannot be changed, the Insurer reimburses to the Insured Person the cost of the new ticket purchased in order to reach their destination, subject to them leaving within 24 hours of the initial time of Departure.

2. COVERED EVENTS

The "missed flight" must be the result, after the insurance has been taken out, of one of the following Insured Events, which absolutely prevents the Insured Person from taking the transport initially scheduled:

2.1. An Illness, including pregnancy-related illnesses or illnesses linked to an Accidental Bodily Injury,

resulting in:

- either hospitalisation occurring within forty-eight (48) hours prior to the initial Departure,
- or a medical appointment, along with medical treatment or medical examinations prescribed by a Doctor, paid for by one of the health insurance organisations with which the Insured Person is registered, affecting:
- the Insured Person, their spouse, De Facto Spouse or legally registered partner, or direct ascendants or descendants, as well as those of their spouse, De Facto Spouse or legally registered partner;

- their brothers, sisters, brothers-in-law, sisters-in-law, sons-in-law, daughters-in-law, fathers-in-law, mothers-in-law, legal guardians, or wards;
- their work replacement, named when this policy was taken out or, failing this, the person named by the company when organising paid leave,
- the person named when this policy was taken out, entrusted with, in return for a fee, during the Insured Person's Trip, looking after or accompanying the Insured Person's minor children or a disabled person living with the Insured Person,
- another member of the Insured Person's family, providing that hospitalisation has occurred.

2.2. Any other Chance Event.

The Chance Event must:

- constitute an immediate, real and genuine obstacle that prevents the initial Departure, **and**
- have a direct causal link with missing the transport.

3. COVER AMOUNT

The Insurer reimburses to the Insured Person, the travel costs incurred, including air travel taxes and Service Fees, up to the amounts stated in the Cover Table.

Administrative fees and any other fees, excluding Service Fees, as well as the premium paid for taking out this policy will not be reimbursed.

The cover may not be held simultaneously with the "Cancellation or Change" cover referring to the Trip initially insured.

4. EXCLUSIONS

In addition to the "General Exclusions" outlined at the beginning of this policy and any exclusions set out in the definitions, the consequences of the following circumstances and events are also excluded:

- 4.1. missed flights as a result of any timetable changes due to the carrier;
- 4.2. the consequences, after-effects, complications or aggravations of an Illness or Accidental Bodily Injury, which were diagnosed before the insured service was booked;
- 4.3. Illnesses or Accidental Bodily Injuries that were diagnosed, treated, recurred, worsened or required a hospital stay between the date of booking of the Insured Service and the date on which this policy was taken out;
- 4.4. Illnesses that were diagnosed, progressed or resulted in an additional examination or change in treatment within thirty (30) days before the booking of the insured service;
- 4.5. Accidental Bodily Injuries that occurred or resulted in surgery, rehabilitation, an additional examination or change in treatment within thirty (30) days before the booking of the insured service;
- 4.6. medical contraindications applying to the initial Departure not due to an Illness, including pregnancy-related Illnesses or Illnesses linked an Accidental Bodily Injury, as per the terms of Article 2.1 of this cover;
- 4.7. the failure to be vaccinated or to follow the preventive treatment required for the destination covered by the insured service;
- 4.8. any work-related event preventing the Insured Person from arriving at the Departure location within the times set out by the carrier;
- 4.9. climate, meteorological or natural events;
- 4.10. Natural Disasters;
- 4.11. any Insured Event occurring between the date the insured service was booked and the date this policy was taken out;
- 4.12. any circumstances that only affect the enjoyment of the Insured Person's Trip;
- 4.13. defaults of any kind, including financial defaults, by the Authorised Organisation or the carrier, making it impossible for the carrier to fulfil its contractual obligations;
- 4.14. the Insured Person not being permitted on board by the carrier, as a result of behaviour deemed aggressive and/or dangerous by the staff responsible for transporting passengers, or after failing to meet the deadline for checking in baggage and/or appearing at the boarding area.

5. WHAT THE INSURED PERSON MUST DO IN THE EVENT OF A MISSED FLIGHT

The Insured Person must notify the Insurer that a Covered Event that made them miss their transport has occurred, at the latest **within five (5) working days of the day on which they became aware of it**, except in the case of an act of God or force majeure:

In order to expedite the claim and streamline processing on the case, we recommend submitting the claim on the following website: www.allianz-protection.com

The Insured Person can track the progress of their case 24/7 by logging on to the website.



The Insured Person can also contact the Insurer by telephone from Monday to Friday between 9:00 am and 6:00 pm (Mainland France time zone):

From France (if the Insured Person's current location is in France)

- 01 42 99 03 95 for French speakers (standard rate call)
- 01 42 99 03 97 for non-French-speaking insured persons

Outside France (if the Insured Person's current location is not in France)

- +33 (0)1 42 99 03 95 for French speakers
- +33 (0)1 42 99 03 97 for non-French-speaking Insured Persons

After this period, if the Insurer incurs a loss because of the Insured Person's late submission, the compensation may be reduced based on the loss incurred.

6. SUPPORTING DOCUMENTS TO BE PROVIDED

PLEASE NOTE
It is for the Insured Person to prove that all the conditions required for implementation of this "Missed Flight" cover are satisfied, by means of the supporting documents referred to below.

These documents and all information provided by the Insured Person shall serve as proof of the reason for their "missed flight" and enable assessment of the amount of their indemnity.

If the reason for missing the transport is a medical event, the Insured Person may, if they so wish, send their medical details in an envelope marked 'confidential' for the attention of the Insurer's medical adviser.

If no supporting documents are provided or if the supporting documents do not provide material proof of the Covered Event cited, the Insurer will be entitled to refuse the Insured Person's compensation claim.

COVERED EVENTS	SUPPORTING DOCUMENTS TO BE PROVIDED
<p>IN ALL CASES</p>	<ul style="list-style-type: none"> - the original ticket for the unused "outgoing" journey (paper ticket, e-ticket or airport notification for air travel), - the original newly purchased transport ticket (original boarding pass for air travel), accompanied by a copy of the purchase invoice; - if applicable, official documentation specifying the family relationship with the person originating the "missed transport" (copy of the official family record book, cohabitation certificate, etc.) - bank account details, - any other supporting documents requested by the Insurer after the claim has been assessed.
<p>Following an Illness, including pregnancy-related illnesses or illnesses linked an Accidental Bodily Injury</p>	<ul style="list-style-type: none"> - prescriptions for medical treatment, if applicable, - examination reports, where applicable; - a copy of the sick leave certificate, where applicable; - the hospitalisation certificate, where applicable; - after the claim has been assessed and at the request of the Insurer: reimbursement statements from the health insurance organisation with which the Insured is registered.
<p>Following any other Chance Event</p>	<ul style="list-style-type: none"> - any supporting document substantiating the situation that made travelling impossible.

DAMAGE TO BAGGAGE - Options KLM 2 and KLM 3**SPECIFIC DEFINITIONS FOR THIS COVER**

COVERED PROPERTY: baggage and its contents, including Personal Items and Valuables, belonging to the Insured Person, brought along for the Trip and/or purchased during the Trip.

ESSENTIAL ITEMS: items of clothing and toiletries, enabling the Insured Person to deal with the temporary unavailability of their Covered Property.

HOLIDAY: the cover period, excluding transportation of the Insured Person and of their Covered Property.

PERSONAL ITEMS: items, clothing, jewellery and accessories, as well as their contents, that the Insured Person was carrying on their person when the Covered Event occurred.

TRANSPORTATION COMPANY: airline, shipping company, rail company or other provider, responsible for transporting the Covered Property during the Insured Person's Trip.

VALUABLES: any object, other than an item of clothing, with a unit purchase price of more than **two hundred and fifty (250) euros**.

WEAR AND TEAR: depreciation of an item of property's value caused by time, use or its current condition on the date on which the damage occurred. Unless stated otherwise in the policy, the Wear and Tear applied when calculating the compensation is 1% per month up to a limit of 80% of the initial purchase price.

The definitions of the terms common to all types of cover appear in the "Common Definitions for all types of cover" chapter at the beginning of this policy.

1. PURPOSE OF THE COVER

The Insurer will cover, up to the limits stated in the Cover Table, damage to the Covered Property during the Trip taken by the Insured Person.

2. COVERED DAMAGE**2.1. During transportation of the Covered Property by a Transportation Company****• Damage to or loss of the Covered Property while it is being transported**

When, at the time of the Trip, the Insured Person entrusts their Insured Property to a Transportation Company, the Insurer will cover any damage or loss which occurs while it is being transported in the baggage compartment, up to the limit appearing in the Cover Table, after the Excess appearing in this Cover Table is deducted.

**PLEASE NOTE**

As soon as the Insured Person becomes aware of it, they must report the damage to or loss of their baggage to the Transportation Company in order to obtain a written Property Irregularity Report that should be sent to the Insurer, accompanied by the original proof of purchase for the Covered Property in question. Any compensation that may be paid by the Transportation Company will be deducted from the damage amount.

2.2. Damage covered during the Holiday

Upon presentation of original proofs of purchase, up to the limits stated in the Cover Table, the Insurer will cover accidental damage to or Aggravated Theft of Covered Property that was brought along or purchased during the Trip, **except in the following specific situations:**

• Theft of Valuables

The Insurer will cover, up to the limits stated in the Cover Table, Theft of Valuables, **only** if the Insured Person has them on their person, is using them under their own responsibility, or has placed them in an individual safe deposit box with a time stamp or has deposited them in a hotel strong box.

• Theft from a vehicle

The Insurer will cover theft of Covered Property placed out of sight in the boot of a vehicle, under the following conditions **only**:

- the Insured Person's vehicle is broken into between 7.00 am and 10.00 pm (local time);
- the vehicle is fully locked, with the windows and sunroof completely closed.

It is the Insured Person's responsibility to provide proof that there was a Break-In on the vehicle, along with proof that the theft was committed during the covered time period.

3. COMPENSATION FOR DAMAGE

3.1. Cover amount

Cover is provided up to the cover limits appearing in the Cover Table, after the Excess is deducted, the amount of which also appears in the Cover Table.

Compensation will be paid out for the following Covered Events under the conditions specified below:

- **Theft of Valuables**

The compensation due should there be a Theft of Valuables may not exceed 50% of the 'Damage to Baggage' cover amount.



PLEASE NOTE

For the same Trip, the total limits set out for the above events may not exceed the total limit of the "Damage to Baggage" cover appearing in the Cover Table.

3.2. Damage assessment

- The compensation due will be calculated using the original proofs of purchase produced by the Insured Person; or, if they do not have them, using the replacement value of items of the same type, after Wear and Tear is deducted, and up to the limits stated in the Cover Table.
- Compensation is **only** paid out for jewellery, watches, pearls, gemstones, and objects made out of precious metal upon presentation of original proofs of purchase; or, if the Insured Person does not have them, upon presentation of an estimate certified by an approved expert. No Wear and Tear will be applied.
- Compensation will be paid out for image and sound equipment, along with their accessories, upon presentation of original proofs of purchase; based on their value on the day that the damage occurred, estimated based on their official cost on the second-hand market.
- The compensation due should there be repairable damage to Covered Property will be calculated based on the repair invoice.

In all cases, the compensation due will be estimated by mutual agreement and may never exceed the loss amount; it will also not include Consequential Immaterial Damage, such as travel costs or telephone costs.

4. IF THE INSURED PERSON FINDS THE STOLEN OR LOST ITEMS

If the Insured Person's Covered Property is found, **the Insured Person must notify the Insurer by registered letter as soon as they become aware that it has been found**, at the following address:

AWP France SAS
Service Indemnisation Assurances [Insurance Compensation Department]
DOP01
7 rue Dora Maar
CS 60001
93488 Saint-Ouen Cedex

Should the Covered Property be returned, the Insured Person will only submit a claim for items that are missing or damaged to the Insurer. If the Insurer has already paid out compensation to the Insured Person, the Insured Person will reimburse the compensation paid out to the Insurer, with a deduction for any items that may be missing or damaged.

5. COVER EXCLUSIONS

In addition to the 'General Exclusions' listed at the start of this policy (except for Article 7) and any exclusions stated in the definitions, the following are also excluded:

- The following circumstances:
 - 5.1. theft, damage or loss, as a result of a decision by an administrative authority or a ban on transporting specific items; delay, damage, or loss occurring while being transported by an airline that is blacklisted by the European Commission, regardless of its point of origin and destination thefts committed by Insured Persons or the Insured Person's family members (ascendants, descendants, spouse, De Facto Spouse or legally registered partner) or committed with their complicity, or by the Insured Person's employees while performing their duties;
 - 5.4. theft not involving a Break-in using duplicate keys;
 - 5.5. theft of Covered Property that is committed in a public place, when those items were not constantly being watched by the Insured Person;
 - 5.6. theft of Covered Property placed in a canvas tent;
 - 5.7. lost items, except for those lost by the carrier referred to in Article 2.1 of this cover, and items forgotten or misplaced by the actions of the Insured Person or a Third Party;
 - 5.8. destruction and loss of Valuables of any kind whatsoever, including during transportation by a Transportation Company;

- 5.9. damage resulting from a fault in the Covered Property or from its normal wear and tear;
- 5.10. damage to fragile items, especially pottery and items made out of glass, porcelain or marble;
- 5.11. damage as a result of smoking Accidents; scratches, grooves, tears, or stains; or leaks of liquids, fats, colourants or corrosive substances in the insured baggage;
- 5.12. Consequential Immaterial Damage;
- 5.13. damage as a result of a natural event, such as an earthquake, a volcanic eruption, a tidal wave (or tsunami), a flood, an avalanche or another disaster;
- The following items:
- 5.14. documents, identity papers, credit cards, magnetic cards, transport tickets, cash, shares and securities, and keys;
- 5.15. items intended by their nature or purpose for professional use by the Insured Person, sales representatives' product sample collections, goods, medical equipment and medicines, perishable goods, wines and spirits, cigarettes, cigars and tobacco;
- 5.16. any sports or leisure equipment, as well as cases, boxes, bags, bags and covers enclosing this equipment and musical instruments;
- 5.17. art or hand-crafted objects, carpets and rugs, antiques, religious objects and collectors' items;
- 5.18. glasses (lenses and frames), contact lenses, prostheses and aids of any kind, unless they are destroyed or damaged when an Accidental Bodily Injury is sustained;
- 5.19. animals;
- 5.20. any vehicle or motorised equipment, along with their accessories, recreational vehicles and travel trailers;
- 5.21. recreational sail or motor craft, including jet-skis;
- 5.22. computer equipment and mobile telephones.

6. WHAT THE INSURED PERSON MUST DO IN THE EVENT OF A CLAIM

The Insured Person must:

- **Should a theft occur:** report the crime **as soon as possible** to the nearest police authorities to the location of the incident.
- **Should accidental damage occur:** obtain a written report of the damage, produced by the nearest competent authority to the location of the incident or, failing this, by a witness.
- **Should loss or damage caused by the Transportation Company occur:** Immediately have a Property Irregularity Report (P.I.R.) drawn up by that company's qualified employees.

In all cases, they must:

- take all steps so as to limit the consequences of the incident;
- **submit a claim to the Insurer within five (5) working days of the day** on which they became aware of it, except in the case of an act of God or force majeure; this deadline is reduced to **forty-eight (48) hours for cases of theft.**



In order to expedite the claim and streamline processing on the case, we recommend submitting the claim on the following website: www.allianz-protection.com

The Insured Person can track the progress of their case 24/7 by logging on to the website.

The Insured Person can also contact the Insurer by telephone from Monday to Friday between 9:00 am and 6:00 pm (Mainland France time zone):

From France (if the Insured Person's current location is in France)

- 01 42 99 03 95 for French speakers (standard rate call)
- 01 42 99 03 97 for non-French-speaking insured persons

Outside France (if the Insured Person's current location is not in France)

- +33 (0)1 42 99 03 95 for French speakers
- +33 (0)1 42 99 03 97 for non-French-speaking Insured Persons

After this period, if the Insurer incurs a loss because of the Insured Person's late submission, the compensation may be reduced based on the loss incurred.

7. SUPPORTING DOCUMENTS TO BE PROVIDED



PLEASE NOTE

It is the Insured Person's responsibility to prove that all of the conditions required for implementing this 'Damage to Baggage' cover are met, using the supporting documents set out below.

These documents and any information provided by the Insured Person will help to prove the damage to the baggage and to assess the amount of the compensation due.

If no supporting documents are provided or if the supporting documents do not provide material proof of the damage sustained, the Insurer will be entitled to refuse the Insured Person's compensation claim.

COVERED EVENTS	SUPPORTING DOCUMENTS TO BE PROVIDED	
<p>IN ALL CASES</p>	<ul style="list-style-type: none"> - the booking confirmation for the Trip; - bank account details, - any other supporting documents requested by the Insurer after the claim has been assessed. 	
<p>Should damage occur during transportation of Insured Property by a Transportation Company</p>	<p>In all cases:</p> <ul style="list-style-type: none"> - the original Property Irregularity Report (P.I.R.) drawn up by the Transportation Company's baggage service, - the original baggage check-in ticket for the item(s) of baggage in question. 	
	<p>Should damage occur</p>	<p>When the Covered Property can be repaired:</p> <ul style="list-style-type: none"> - the original invoice for repairing the damaged Covered Property accompanied by a copy of the initial proof of purchase for the Covered Property. <p>When the Covered Property cannot be repaired:</p> <ul style="list-style-type: none"> - a certificate from a qualified professional stating that the damaged Covered Property cannot be repaired, accompanied by the original proof of purchase for the Covered Property.
	<p>Should the Covered Property be lost</p>	<ul style="list-style-type: none"> - the original purchase receipts for the Insured Property that is missing.
<p>Should damage occur to the Insured Property during the Holiday</p>	<p>Should theft of Covered Property occur</p>	<p>In all cases:</p> <ul style="list-style-type: none"> - the copy of the detailed crime report filed with the police authorities nearest to the scene of the insured loss - the original purchase invoices for the Insured Property. <p>Should theft of Valuables occur:</p> <ul style="list-style-type: none"> - photos and/or estimates certified by an approved expert, for jewellery, watches, pearls, precious stones, and objects made of precious metal. <p>Should Theft from a vehicle occur:</p> <ul style="list-style-type: none"> - a letter acknowledging receipt of the claim submitted to the car insurer or a copy of the vehicle repair bill, or, if the vehicle is a hire car, a copy of the statement describing the condition of the vehicle on the day when it is returned to the car hire company.
	<p>Should baggage be partially or totally damaged accidentally</p>	<p>In all cases:</p> <ul style="list-style-type: none"> - a certificate issued by the competent authority closest to the location of the incident; - written testimony from a companion or a Third Party and/or a medical certificate, if the damage occurs during an Accidental Bodily Injury to the Insured Person. <p>When the Covered Property can be repaired:</p> <ul style="list-style-type: none"> - the original invoice for repairing the damaged Insured Property, accompanied by a copy of the proof of purchase for this Insured Property. <p>When the Covered Property cannot be repaired:</p>

COVERED EVENTS	SUPPORTING DOCUMENTS TO BE PROVIDED
	- a certificate from a qualified professional stating that the damaged Insured Property cannot be repaired, accompanied by the original proof of purchase for the Insured Property.

TRAVELLER ASSISTANCE - Options KLM 2 and KLM 3

SPECIFIC DEFINITIONS FOR THIS COVER

ACCOMMODATION COSTS: additional hotel costs and costs for telephoning Allianz Travel, **excluding food and drink expenses.**

EMERGENCY DENTAL CARE EXPENSES: expenses for emergency dental care, as defined by the Allianz Travel Medical Department.

EMERGENCY HOSPITALISATION: a stay of **over forty-eight (48) consecutive hours** in a public or private hospital, for an emergency procedure, i.e. an unscheduled procedure which cannot be postponed.

FUNERAL EXPENSES: expenses for initial preservation, handling and placement in coffin, specific transportation arrangements, preservation required by law, preparation and the simplest coffin, required for transportation and complying with local legislation, **excluding expenses for burial (or cremation), embalming and the ceremony.**

HOME CARE: requirement to stay completely at Home, hereinafter "Home Care", or at the Holiday accommodation, following a visit by a Doctor and a medical certificate being issued.

MEDICAL EXPENSES: medically prescribed pharmaceutical, surgical, practitioner's and hospital expenses required for diagnosing and treating an illness.

RESCUE EXPENSES: transportation expenses following search operations (after the Insured Person is found) from the place where the Accident occurred to the closest medical facility.

SEARCH EXPENSES: expenses for operations undertaken by civil or military search and rescue organisations or specialist public or private organisations, which set out specifically to search for the Insured Person in a place that has no local organised rescue services.

TRAVEL: route taken from the Departure location to the destination stated on the travel ticket, irrespective of the types of transport or number of transports involved.

The definitions of the terms common to all types of cover appear in the "Common Definitions for all types of cover" chapter at the beginning of the policy.

ADVICE TO TRAVELLERS

• **Before the Trip:**

- check that this policy covers the chosen destination and the length of the planned Trip;
- make inquiries on the mandatory identity documents for entering the country being visited (identity card, passport, visa) and on its health conditions;
- take the necessary documents (vaccination record and medical insurance);
- obtain the documents required to cover Medical Expenses during the Trip from the relevant Health Insurance Fund: European Health Insurance Card or a specific form, depending on the country.
- if you are receiving treatment, take sufficient medication, and in greater quantities than required for the duration of the Trip, should your return be delayed, specifically.

• **During the Trip:**

- keep your medication and prescriptions in your hand luggage so that you can continue to receive treatment if the baggage that you check in with the carrier is delayed or lost;
- keep separate photocopies of both sides of your identity documents and payment cards. These photocopies will be useful should you lose them or should they be stolen.

PLEASE NOTE**• Minor children**

Some types of stay and some destinations are inappropriate for very young children. In view of the risks of them being affected by the travel length and conditions, the health situation, or even the climate, the family doctor or paediatrician should be consulted when planning the Trip.

Each minor child travelling alone or accompanied must carry, in addition to their valid identity papers, an authorisation to leave the territory issued by one of their legal representatives.

In all cases, should a minor child be repatriated, Allianz Travel cannot be held liable for any delay that may be required to legalise their administrative situation.

**• Pregnant women**

Due to risks that may endanger the health of women in advanced stages of pregnancy, airlines apply restrictions which vary from company to company, and which may change without notice. These can involve a medical assessment no more than forty-eight (48) hours before Departure, presenting a medical certificate, requesting the company's medical approval and more.

If necessary, and if laid down in their policy, assistance companies will arrange and pay for air travel on the explicit condition that the doctors and/or airlines do not preclude this.

1. ASSISTANCE SERVICES**a. ASSISTANCE DURING THE TRIP**

When the Insured Person uses the Allianz Travel Assistance service, Allianz Travel is solely responsible for decisions about the nature and suitability of measures that can be taken, as well as any arrangements relating to them.

• Assistance should the Insured Person sustain an Illness or an Accidental Bodily Injury, or die**1.1. Repatriation Assistance**

If the Insured Person's health requires them to be repatriated, Allianz Travel will offer the following assistance:

• Arranging and paying for returning the Insured Person to their Home or transporting them to a hospital

Allianz Travel arranges and pays for the repatriation of the Insured Person to their Home in France or transportation to the hospital that is closest to the home of the Insured Person and/or is the most suitable to provide the care required by their state of health.

In such a case, if the Insured Person so wishes, Allianz Travel can then organise the return trip to their Home in France, as soon as their state of health so allows.

Should the Insured Person sustain an Illness linked to an Epidemic or a Pandemic, Allianz Travel can arrange and pay for transporting them to the most suitable hospital for providing the care required by their health condition.

If the Insured Person so wishes, Allianz Travel can then arrange return travel to their Home in Europe, as soon as their health condition so allows.

• Arranging and paying for the return of an Insured Travel Companion

When the Insured Person is repatriated more than twenty-four (24) hours before their original return date, Allianz Travel will, once its medical department approves, arrange and pay for travel to return one of the Insured Persons travelling with them to their Home, provided that the originally scheduled return transport cannot be used or changed.

PLEASE NOTE

Decisions will be made purely in consideration of the medical interests of the Insured Person, and Allianz Travel Doctors, in agreement with local attending Doctors, will be solely responsible for making them.

Allianz Travel Doctors will consult with the local medical facilities and, if necessary, with the Insured Person's regular Doctor, in order to gather information to help them make the best decisions for their health condition. The repatriation of the Insured Person will be decided on and overseen by medical staff who hold qualifications that are legally recognised in the country in which they usually practise their professional activity. Only the Insured Person's medical interests and compliance with health laws in force will be taken into consideration when making decisions about transport, transport methods and the location of any possible Hospitalisation.

If the Insured Person refuses to comply with the decisions made by the Allianz Travel Medical Department, they absolve Allianz Travel of any liability in relation to the consequences of this, particularly in cases involving returning by themselves or also should their health condition worsen, and lose all rights to benefits and compensation from Allianz Travel.

Furthermore, under no circumstances may Allianz Travel replace local emergency services, or pay the expenses incurred, except for those covered under the "Search and/or Rescue Expenses" cover.

1.2. Assistance for the Insured Person's minor children or their disabled adult children

- **Arranging and paying for travel to return the Insured Person's dependent minor children or disabled adult children to their Home**

When the Insured Person's state of health is such that repatriation is required, Allianz Travel will, following agreement with its medical department, arrange and also pay the travel costs for repatriating any of their minor children or disabled adult children who were travelling with them if there is no other adult family member present with them at the location.

This service is also provided should the Insured Person sustain an injury linked to an Epidemic or a Pandemic.

- **Arranging and paying for round-trip travel tickets for a person to help to repatriate the Insured Person's dependent minor children or disabled adult children**

When the Insured Person is hospitalised locally as an emergency while accompanied by at least one of their dependent minor or disabled adult children, and no other adult family member is with them, Allianz Travel pays for a round-trip travel ticket for a person of their choosing residing in France to come and collect them.

This service is also provided should the Insured Person sustain an injury linked to an Epidemic or a Pandemic.

The Insured Person will pay the Accommodation Costs and food and drink expenses for the person chosen to return the above-mentioned children.

1.3. A visit from a close relative should the Insured Person be hospitalised locally

When the Insured Person is hospitalised locally for **more than seven (7) days or more than forty-eight (48) hours if they are a minor or disabled person, and are not accompanied by another adult member of their family during their Holiday:**

- Allianz Travel arranges and pays for the round Trip of a family member living in France so that they can get to the bedside of the Insured Person;
- Allianz Travel will, on presentation of receipts and up to limit shown in the Cover Table, reimburse the accommodation costs incurred by such person **until the date on which the Insured Person is repatriated, or is discharged from hospital if they can continue their Trip.**

This service cannot be not combined with the "Arranging and paying for return travel for an insured travel companion" cover set out in Article 1.1 and the "Arranging and paying for round-trip travel tickets for a person to help to repatriate the Insured Person's dependent minor children or disabled adult children" cover set out in Article 1.2.

1.4. Charges for Emergency Hospitalisation Abroad

- **When the Insured Person belongs to a basic social security scheme or is registered with an insurance organisation:**

Should an Accidental Bodily Injury and/or Illness (including illnesses linked to an Epidemic or a Pandemic) require the Insured Person to be hospitalised, Allianz Travel may directly pay expenses for unforeseen emergency hospitalisation, once its medical department approves, and up to the limits appearing in the Cover Table.

In that event, the Insured Person must take all the necessary steps to have these expenses reimbursed by their basic social security scheme, insurance company, or any insurance or services organisation and **immediately reimburse Allianz Travel all amounts that were received.** Otherwise, Allianz Travel will be entitled to claim for costs and interest at the statutory rate.

In order to be eligible for this service, the Insured Person must belong to a primary health insurance plan.

This service will cease on the date on which the Allianz Travel Medical Department deems that the Insured Person can be repatriated.

- **When the Insured Person does not belong to a basic social security scheme or is not registered with an insurance organisation:**


In the event of Accidental Bodily Injury and/or Illness requiring the Insured Person to be hospitalised Abroad, Allianz Travel will pay in advance for unforeseen emergency hospitalisation costs, for the care prescribed in agreement with the Allianz Travel medical department and up to the limits shown in the Cover Table.

In this case, the Insured Person undertakes to repay this advance to Allianz Travel within three (3) months of the date of their return from the Trip. After this period, Allianz Travel will be entitled to claim the advance amount paid and, in addition, costs and interest at the statutory rate.

This advance is conditional on a promissory note being drawn up.

This service will cease on the date on which the Allianz Travel Medical Department deems that the Insured Person can be repatriated.

1.5. Emergency Medical Expenses Paid Abroad by the Insured Person

	<p>PLEASE NOTE If the Insured Person has paid Emergency Medical Expenses Abroad, Allianz Travel will reimburse these expenses up to the limit in the Cover Table. In order to receive this reimbursement, the Insured Person must belong to a primary health insurance plan covering them for medical costs occurring Abroad for the entire duration of this Policy. The Insured Person must be able to provide Allianz Travel with the original reimbursement statements or letters of refusal from the health insurance organisation with which they are registered.</p>
---	---

Up to the amount limits stated in the cover table and less the deduction of the Excess stated in the same table.

- **Reimbursement of Emergency Medical Costs (except for Emergency Dental Care Costs) paid by the Insured Person**

When, as a result of an Illness (including illnesses linked to an Epidemic or a Pandemic) or an Accidental Bodily Injury, the Insured Person incurs Medical Expenses or expenses for Hospitalisation ordered by doctors, Allianz Travel will reimburse the expenses payable by them (excluding Emergency Dental Care Expenses) after assistance from their basic social security scheme or any insurance organisation.

- **Reimbursement of Emergency Dental Care Expenses incurred by the Insured Person**

Allianz Travel will reimburse the Insured Person for Emergency Dental Care Costs incurred Abroad, which remain payable by them following payment by their basic health insurance plan, health insurance company, or any insurance or benefits organisation.

1.6. Additional costs locally

Should the Insured Person sustain an Illness (including an Illness linked to an Epidemic or a Pandemic), or Accidental Bodily Injury, Allianz Travel will provide the following assistance, up to the amounts stated in the Cover Table:

- **Immobilisation locally**

When the Insured Person is immobilised or hospitalised locally and when their condition does not require repatriation or when this is not immediate, Allianz Travel arranges and pays for, up to the amounts in the Cover Table, the additional accommodation Costs of the Insured Person and of insured members of their family or of an insured travel companion, provided that they remain with them.

This cover only applies provided that no local accommodation has initially been provided for and may not be combined with the cover 1.3 "Visit from a friend or relative in the event that the Insured Person is hospitalised locally".

1.7. Search and/or Rescue Expenses

On receipt of the original bill settled by the Insured Person, Allianz Travel will reimburse them the Search and/or Rescue costs for the operations carried out at the time the Insured Person disappeared or sustained Accidental Bodily Injury, up to the limit shown in the Cover Table.

1.8. Assistance should the Insured Person die

In the event of the death of the Insured Person, Allianz Travel will arrange and pay for:

- **transportation of the body** from the place of death to the funeral director's premises at the place of burial (or cremation) in France,
- **Funeral Expenses**, up to the limit stated in the Cover Table;

These two (2) services are also provided should the Insured Person die as a result of an Illness linked to an Epidemic or a Pandemic.

- **additional expenses for the transportation of the insured members of the deceased person's family or an insured person travelling with the deceased person**, insofar as their originally planned means of returning in France can no longer be used on account of this death.
- **Legal assistance**

1.9. Legal Assistance Abroad

- **Reimbursement of lawyers' fees**

When legal action is initiated against the Insured Person following an Accident occurring during their Trip, Allianz Travel reimburses them the cost of their lawyer's fees, on presentation of receipts and up to the limit stated in the Cover Table **and, provided that:**

- **the Lawsuit does not relate to their professional activity,**
- **the Lawsuit does not relate to using or keeping a land motor vehicle,**
- **the alleged actions are not, under the laws of the country where they are holidaying, subject to criminal penalties.**

- **Advance for bail**

When the Insured Person is imprisoned or threatened with imprisonment, **providing that these proceedings are not prompted by:**

- **trafficking narcotics and/or drugs,**
- **participating in political movements,**
- **any deliberate violation of the law of the country where they are staying,**

Allianz Travel will advance, up to the limit shown in the Cover Table, the legally required amount of bail.

In that event, the Insured Person will have three (3) months from the date on which the amount was deposited to reimburse this advance to Allianz Travel.

After this period, Allianz Travel will be entitled to claim expenses, and in addition, interest at the statutory rate.

This advance is conditional on a promissory note being drawn up.

- **Assistance for other events disrupting the Insured Person's Trip**

1.10. Early Return assistance

Allianz Travel will arrange and pay for this, provided that the Insured Person's originally scheduled transport for returning them to France cannot be used:

- either returning the Insured Person to their Home and, if necessary, returning one of their family members accompanying them under this policy.
- for a round trip for one of the persons insured under this policy, appearing in the sales agreement for the insured service.

The Insured Person can receive this service in the following situations:

- **Should there be an Illness or an Accident (including illnesses linked to an Epidemic or a Pandemic), or an Accidental Bodily Injury involving Emergency Hospitalisation, which starts during the Insured Person's stay** and which, in the opinion of Allianz Travel's Medical Department, is life-threatening for them, their spouse, De Facto Spouse or legally registered partner; one of their direct ascendants or descendants; brothers or sisters; legal guardians; or wards not on the Trip;
- **to attend the funeral, following the death** of their spouse, Common Law Partner, or registered partner; one of their direct ascendants or descendants; the ascendants or descendants of their spouse, Common Law Partner, or registered partner; their brothers; sisters; step brothers; step sisters; sons-in-law; daughters-in-law; step parents; legal guardian; or ward who is not on the Trip and who lives in France;
- **should there be Material Damage** as a result of a burglary involving a Break-in, a fire, water damage or a natural event, requiring them to be present on site in order to implement precautionary measures and carry out the administrative procedures on:
 - their main or secondary residence,
 - their farm,
 - their business premises if the Insured Person is a tradesperson, trader, business manager or if they are self-employed.

1.11. Making medication prescribed before Departure available

When, after a loss, theft, or baggage delay; or following the extension of the trip in agreement with Allianz Travel, the Insured Person holidaying Abroad, needs medication:

- **that has been prescribed before their Departure;**
- **which is essential for their current treatment;**

- and is unavailable where they are staying,

Allianz Travel can assist as follows:

- either Allianz Travel seeks and makes available to the Insured Person equivalent medication, subject to the agreement of the prescribing doctor when necessary,
- or Allianz Travel sets in place a system allowing them to follow the treatment they need.

Allianz Travel may not be held liable for delays attributable to the transportation companies that were contacted for shipping the medication, or for any possible unavailability of the medication.

The Insured Person will pay the costs of buying the medication and/or receiving treatment.

In the event that Allianz Travel advances the costs for purchasing medicine, the Insured Person undertakes to repay this advance to Allianz Travel within three (3) months of the date of their return from the Trip. After this period, Allianz Travel will be entitled to claim expenses, and in addition, interest at the statutory rate.

1.12. "Unforeseen" assistance

- **Communicating with your family**

If the Insured Person is unable to contact their family, provided that he/she manages to contact Allianz Travel, Allianz Travel will pass on the urgent messages.

2. COVER EXCLUSIONS

In addition to the 'General Exclusions' (except for Article 12) listed at the start of this policy and any exclusions stated in the definitions, the following are also excluded:

- For all types of assistance cover:
 - 2.1. any expense incurred without the prior approval of Allianz Travel's Assistance Department;
 - 2.2. the consequences of any incident relating to air travel booked by the Insured Person, operated by an airline that is blacklisted by the European Commission, regardless of the origin and destination locations;
 - 2.3. the consequences of pre-existing, diagnosed and/or treated illnesses or injuries, as well as elective surgery that required continuous or one-day hospitalisation, or outpatient treatment, in the six (6) months prior to the assistance request;
 - 2.4. the consequences of a non-stabilised ailment being treated and from which the Insured Person is still convalescing, as well as any ailments occurring during a trip taken for the purpose of diagnosis and/or treatment;
 - 2.5. the potential consequences (check-up, additional treatment and recurrence) of an ailment which led to repatriation in the six (6) months prior to the assistance request;
 - 2.6. arranging and paying for the transport set out in Article 1.1 'Repatriation Assistance' for minor ailments or injuries that can be treated locally and do not prevent the Insured Person from continuing their insured service;
 - 2.7. voluntary termination of pregnancy, childbirth or in vitro fertilisation and their consequences, as well as pregnancies leading to hospitalisation in the six (6) months prior to the assistance request;
 - 2.8. the Insured Person participating in any sport as part of an official competition or as a professional or under a paid contract, including preparatory training;
 - 2.9. failure by the Insured Person to comply with official prohibitions and safety rules related to taking part in a sports activity;
 - 2.10. the consequences of an Accident occurring when the Insured Person participates in one of the following sports or leisure activities, whether individually or as part of an activity organised by a sports federation: kite-surfing, skeleton, bob-sleigh, ski jumping, any off-piste sliding, mountaineering above 3,000 m, rock climbing, caving, hang-gliding, gliding, paragliding, any parachuting activity and any sports activity done with or from an ultralight motorised aircraft in accordance with the French Civil Aviation Code;
 - 2.11. the consequences of an Accident occurring when the Insured Person does bungee jumping and underwater diving with independent equipment when the activity is not organised by an approved professional;
 - 2.12. expenses not explicitly mentioned as reimbursable, in addition to any expense for which the Insured Person is unable to provide a receipt.
 - 2.13. failure by the Insured Person to comply with official travel bans issued by the authorities of their Home country or destination country.

- Under the Charges for "Emergency Hospitalisation Abroad" cover and "Reimbursement of Emergency Medical Expenses paid Abroad by the Insured Person" cover, the following are also excluded:
 - 2.14. the costs of spa treatment, heliotherapy, weight-loss treatments, any elective or cosmetic treatment and physiotherapist fees, as well as expenses for care or treatments not resulting from a medical emergency;
 - 2.15. fees for implanting internal, ocular, dental, hearing, functional, or other prostheses as well as the cost of the equipment;
 - 2.16. vaccination costs;
 - 2.17. expenses resulting from care or treatment, the therapeutic nature of which is not recognised by French law;
 - 2.18. expenses charged by local rescue agencies, excluding expenses covered by the "Search and/or Rescue Expenses" cover;
 - 2.19. Medical Expenses incurred Abroad, when the Insured Person, on sick leave, has not obtained prior approval from their health insurance agency to travel Abroad.

3. WHAT THE INSURED PERSON MUST DO IN ORDER TO USE THE ASSISTANCE SERVICE

3.1. In order to request assistance

The Insured Person or a third party should contact Allianz Travel:



by telephone 24 hours a day, 7 days a week:
 From France on **01 42 99 02 02 (standard rate call)** or
 From outside France on **00 33 1 42 99 02 02**

They will immediately be given a case number and should inform the assistance representative of:

- his contract/policy number,
- their address, the telephone number which can be used to contact them, as well as the contact information for the persons who are looking after them,

and allow the Allianz Travel doctors to access all relevant medical information on the person who needs help from Allianz Travel.

3.2. For a reimbursement claim

In order to receive a reimbursement of expenses paid by the Insured Person with the agreement of Allianz Travel, the Insured Person must submit to Allianz Travel all the supporting documents that will enable the company to determine the validity of the claim.



- either by post, to the address set out in Article 9 "Address for sending supporting documents to be provided should a claim be made" of the "Administrative Provisions"
- or by telephone, from Monday to Friday, from 9:00 am to 5:30 pm (Metropolitan France time zone):
 From France on **01 42 99 08 83 (standard rate call)** or
 From outside France on **+33 (0)1 42 99 08 83**

Services that were not requested in advance and were not arranged by Allianz Travel departments cannot be reimbursed and will not be compensated.

4. LIMITS OF ALLIANZ TRAVEL'S ASSISTANCE

Allianz Travel acts in compliance with national and international laws and regulations.

Its services may only be provided once approval has been obtained from the relevant administrative authorities.

Moreover, Allianz Travel cannot be held liable for delays or hindrances to the performance of the agreed services as a result of force majeure, or events such as strikes, riots, popular movements, restrictions on free circulation of goods and persons, sabotage, terrorism, Civil or Foreign War, notable political instability, reprisals, embargoes, economic sanctions (list of restrictive measures for each country available on the website of the French Ministry for the Economy and Finance: <https://www.tresor.economie.gouv.fr/Ressources/sanctions-financieres-internationales>), the consequential effects of a radioactive source, Natural Disasters or any other act of God.

Information for each country is also available in the 'Advice for travellers' section on the website of the French Ministry for Foreign Affairs and International Development: <http://www.diplomatie.gouv.fr/fr/conseils-aux-voyageurs/conseils-par-pays/>

**PLEASE NOTE**

Allianz Travel will arrange and pay for the Insured Person's covered transport up to the limit of the cost of first class train fares and/or economy class flights, or suitable medical transportation.

In any case, Allianz Travel will take ownership of any travel tickets that are not used by the Insured Person. The Insured Person will return them to Allianz Travel or to repay it the amount reimbursed to them by the organisation that issued these tickets.

5. SUPPORTING DOCUMENTS TO BE PROVIDED

Based on the assistance services implemented, Allianz Travel will inform the Insured Person of the documentation to be furnished to support the request:

COVERED SERVICES	SUPPORTING DOCUMENTS TO BE PROVIDED
Traveller Assistance	<ul style="list-style-type: none"> - the original used or unused travel tickets (including boarding passes for flights); - a death certificate, where applicable; - a copy of an official administrative document substantiating the family relationship to the Insured Person, if applicable, - any other supporting documents requested by Allianz Travel.
Reimbursement of Medical Expenses	<ul style="list-style-type: none"> - bank account details, - a copy of the booking form for the Trip; - copies of the medical bill(s) paid by the Insured Person; - a copy of the Social Security reimbursement statement, - the original reimbursement claim from the insurance company; - after assessment of the case, any other supporting document requested by Allianz Travel.
Reimbursement for Search/Rescue Expenses	<ul style="list-style-type: none"> - bank account details, - a copy of the booking form for the Trip; - the original paid invoice for the Search/Rescue Expenses; - any other supporting documents requested by Allianz Travel.
Reimbursement of lawyers' fees	<ul style="list-style-type: none"> - The invoice for fees
Reimbursement of Accommodation Costs	<ul style="list-style-type: none"> - the invoice for Accommodation Costs

PRIVATE THIRD PARTY LIABILITY OVERSEAS - Options KLM 2 and KLM 3**SPECIFIC DEFINITIONS FOR THIS COVER**

CLAIM: all prejudicial consequences resulting from the same Operative Event likely to result in one or more types of cover in this policy being implemented. Therefore, all damage arising from the same initial cause constitutes one and the same claim.

OPERATIVE EVENT: initial cause leading to damage to one or more persons.

PHYSICAL INJURY: any unintentional injury to an individual's physical or psychological integrity, as well as any resulting financial loss.

THIRD PARTY: any individual or legal entity, **except for:**

- the Insured Person themselves,
- family members, namely, the Insured Person's collateral ascendants or descendants, to the second degree,
- any person accompanying the Insured Person on their Trip.

THIRD PARTY LIABILITY: an obligation to pay compensation for the consequences of damage caused to a Third Party by you or by persons for whom you are responsible or by items of which you are in charge.

The definitions of the terms common to all types of cover appear in the "Common Definitions for all types of cover" chapter at the beginning of the policy.

1. PURPOSE OF THE COVER

The Insurer will cover the financial consequences of any Third Party Liability that the Insured Person may incur while on the Trip, pursuant to the laws or jurisprudence of the country where they are located, as a result of the following types of Damages:

- Physical Injury;
- Material Damage;
- Immaterial Damage as a direct result of the covered Bodily Injury or Material Damage;

resulting from an Accident occurring in their private life and caused to a Third Party by:

- the Insured Person;
- persons for whom they are responsible;
- items or animals of which they are in charge.

2. SUBSIDIARITY OF THE COVER

This cover is valid for the Insured Person for their Trips outside of the country where they reside **and**

- Only in countries where they do not have insurance cover for their Third Party Liability elsewhere; **or**
- If their Third Party Liability insurance does not cover or partially covers the damage for the Claim submitted.

3. COVER AMOUNTS

The cover is provided up to the limits stated in the Cover Table, on the understanding that:

- the Limit per Covered Event appearing in the Cover Table (marked with an *) constitutes the maximum coverage amount for the same Operative Event, all damage combined: Physical Injury, Material Damage, directly Consequential Immaterial Damage,
- one Excess per Covered Event, the amount of which is stated in the Cover Table, which is always paid by the Insured Person.

4. COVER EXCLUSIONS

In addition to the 'General Exclusions' stated at the start of this policy, as well as any exclusions stated in the definitions, the following consequences are excluded:

- 4.1. damage caused by the Insured Person to the members of their family, i.e., their collateral ascendants and descendants to the second degree, as well as any person with the Insured Person during their Trip;**
- 4.2. damage caused to animals or items belonging to the Insured Person or that are rented, loaned or entrusted to them;**
- 4.3. damage caused by:**
 - any land motor vehicle meeting the definition in Article L 211-1 of the French Insurance Code;
 - any land vehicle designed to be towed by a land motor vehicle;

- any air, sea or river craft;
- 4.4. damage as a result of the Insured Person taking part in hunting, any mechanical sports involving any land motor vehicle and one of the following sport or leisure activities, whether individually or as part of an activity organised by a sports federation: bungee-jumping, underwater diving with standalone equipment, kite-surfing, skeleton, bob-sleigh, ski jumping, any off-piste sliding, rock climbing above 3,000 m, rock climbing, caving, hang-gliding, paragliding, aerobatics, gliding, any parachuting activity and any sport practised with or from an ultralight motorised aircraft in accordance with the French Civil Aviation Code;
- 4.5. damage as a result of arranging, preparing for or taking part in a competition arranged by a sports federation, subject to administrative authorisation or to a statutory insurance obligation;
- 4.6. damage caused to the Insured Person during professional activity (including professional internships) or taking part in an activity arranged by an association subject to the Law of 1901, an institution authorised to organise the activity;
- 4.7. the contractual liability of the Insured Person;
- 4.8. liability incurred by the Insured Person due to a fire, an explosion, an implosion or water damage.
- The following will also be excluded:
- 4.9. fines and any financial penalties handed down as a sanction and not considered direct compensation for a Bodily Injury, Material Damage and/or Consequential Immaterial Damage.

5. IMPLEMENTATION PROCEDURES OVER TIME

The procedures for cover over time are set out by Law 2003-706 of 1st August 2003.

The cover, triggered by the Operative Event, will cover the Insured Person against the financial consequences of their liability, when this Operative Event occurs between the time that the cover initially commences and its cancellation or expiration date, irrespective of the date of the other elements which make up the Claim.

6. WHAT THE INSURED PERSON MUST DO SHOULD THEY NEED TO MAKE A CLAIM



PLEASE NOTE

The Insured Person must not accept any admission of liability or any settlement, without approval from the Insurer. Admitting a material fact or fulfilling a duty to assist do not constitute an admission of liability.

The Insured Person must submit a Claim in writing to the Insurer **within five (5) working days of the day on which they became aware of it**, except in the case of an act of God or force majeure, to the following address:



- either by email to the following address: responsabilite.civile@votreassistance.fr
- either by post, to the address set out in Article 9 "Address for sending supporting documents to be provided should a claim be made" of the "Administrative Provisions"

After this period, if the Insurer incurs a loss because of the Insured Person's late submission, the compensation may be reduced based on the loss incurred.

If proceedings are instituted against the Insured Person, they give the Insurer full authority to manage the process and pursue all means of recourse before the civil courts, or to work with them on their defence and pursue all means of recourse on civil interests before criminal courts.

The Insured Person must pass on to the Insurer, as soon as they are received, all summonses, subpoenas, extrajudicial documents, and procedural documents sent to or served on them.

Should there be a delay in sending these documents, the Insurer will be able to claim compensation from the Insured Person proportional to the loss incurred by the Insurer (Article L113-11 of the French Insurance Code).

If the Insured Person breaches their obligations after the Claim, the Insurer will pay compensation to the injured Third Parties or their Beneficiaries, but it may take legal action against the Insured Person to recover the amounts paid out.

7. PROVISIONS IN PLACE SHOULD AN ANNUITY PAYMENT BE AWARDED TO A VICTIM THROUGH A COURT RULING

If an order is made to acquire securities in order to guarantee the payment of an annuity, the Insurer will set up this guarantee for the amount that it will cover.

If no guarantee is ordered, the capital value of the annuity payment is calculated based on the applicable rules for calculating the mathematical reserve for that annuity payment. If this value is lower than the amount of the Insurer's cover, the annuity payment will be fully paid by the Insurer. If it is greater, only the share, in capital, of the annuity payment corresponding to the cover amount is paid by the Insurer.

8. SUPPORTING DOCUMENTS TO BE PROVIDED

The Insurer will inform the Insured Person of the information required to file a claim. The Insured Person must provide the Insurer with any documents and information to help to justify their Claim and to help with assessing the loss amount, in particular:

DAMAGE CAUSED TO THE VICTIM	SUPPORTING DOCUMENTS TO BE PROVIDED
IN ALL CASES	<ul style="list-style-type: none"> - the booking form for the Trip, - the refusal letter from the Insured Person's primary Civil Liability Insurer (comprehensive home insurer).
MATERIAL DAMAGE and/or CONSEQUENTIAL IMMATERIAL DAMAGE	<ul style="list-style-type: none"> - the original bill for repairing the damaged item and the proof of payment, along with the original purchase invoice, in the name of the purchaser, for the damaged item, or - a certificate from a professional stating that the damaged Covered Property cannot be repaired, along with the original proof of purchase receipt for the damaged item, - any other item related to the claim filed by the victim, - any other supporting document requested by the Insurer.
PHYSICAL INJURY and/or CONSEQUENTIAL IMMATERIAL DAMAGE	<ul style="list-style-type: none"> - the victim's full contact information, - any supporting medical documents submitted by the victim, - any other item related to the claim filed by the victim, - any other supporting document requested by the Insurer.

DELAYED RETURN - KLM 2 and KLM 3 options

1. PURPOSE OF THE COVER

The purpose of the cover is to pay out compensation to the Insured Person should it clearly be impossible to return on the originally scheduled dates and times for their Trip after an event expressly set out in Article 2 "Covered Events" for this cover.

2. COVERED EVENTS

The Insured Person will be eligible for all the types of cover appearing in Article 3 'Types of Cover', should a Covered Event set out below occur, making it clearly impossible to return on the originally scheduled dates and times for their Trip:

2.1. Illness linked to an Epidemic or a Pandemic, which must lead to the Insured Person:

- either being hospitalised locally,
- or requiring a medical appointment, along with medical treatment or medical examinations prescribed by a Doctor, which, in all cases, will be paid for by one of the health insurance organisations with which the person in question is registered, occurring to the Insured Person.

2.2 The Insured Person, or an insured travel companion being placed in **Quarantine** during their Trip.

3. TYPES OF COVER

3.1. Trip Extension

The Insurer will reimburse the Accommodation Costs and food and drink expenses as a result of a Covered Event set out in Article 2 of this cover, incurred by the Insured Person in order to deal with the temporary extension of their Trip, as well as the expenses of the insured members of their family or an insured travel companion.

The cover will only apply should there be a delay **of more than twelve (12) hours** from the original Departure time stated on the insured travel ticket or on the notification given by the carrier.

3.2. Redirection to the original return location

The Insurer will reimburse the travel costs incurred by the Insured Person in order to get to the return location specified on the travel ticket booked for the Trip.

4. COVER AMOUNT

The Insurer will reimburse the expenses stated in Article 3 above, up to the limits stated in the Cover Table.

5. COVER EXCLUSIONS

In addition to the General Exclusions (except for Article 12), and any exclusions appearing in the definitions and exclusions set out in the Traveller Assistance cover, the following are also excluded:

- 5.1. all expenses and payments which are legally incumbent on the Authorised Organisation or Intermediary for the Trip or on the transportation operator;
- 5.2. the consequences of previously announced strikes
- 5.3. the Insured Person not being permitted on board by the transportation operator, as a result of behaviour deemed aggressive and/or dangerous by the staff responsible for transporting passengers, or after failing to comply with the deadline for checking in baggage and/or appearing at the boarding area;
- 5.4. failure by the Insured Person to comply with official travel bans issued by the authorities of their Home country or destination country.

6. WHAT THE INSURED PERSON MUST DO IN THE EVENT OF A CLAIM

The Insured Person must submit a claim to the Insurer **within five (5) working days of the day on which they became aware of the event**, except in the case of an act of God or force majeure.

In order to expedite the claim and streamline processing on the case, we recommend submitting the claim on the following website: www.allianz-protection.com

A confidential access code means that the Insured Person can track the progress of the case 24/7. The Insured Person can also contact the Insurer by telephone from Monday to Friday, between 9:00 am and 6:00 pm (Mainland France time zone):

From France (if the Insured Person's current location is in France)

- 01 42 99 03 95* for French speakers
- 01 42 99 03 97* for non-French-speaking Insured Persons

Outside France (if the Insured Person's current location is not in France)


- 00 33 (1) 42 99 03 95 * for French speakers
- 00 33 (1) 42 99 03 97* for non-French-speaking Insured Persons

*standard rate numbers

After this period, if the Insurer incurs a loss because of the Insured Person's late submission, the compensation may be reduced based on the loss incurred.



7. SUPPORTING DOCUMENTS TO BE PROVIDED

	<p><u>PLEASE NOTE</u></p> <p>It is up to the Insured Person to prove that all the conditions required for the implementing this "Delayed Return" cover are satisfied, based on the supporting documents set out below.</p>
---	--

These documents and any information provided by the Insured Person will help to prove the damage sustained and to assess the amount of compensation due.

If no supporting documents are provided or if the supporting documents do not provide material proof of the damage sustained, the Insurer will be entitled to refuse the Insured Person's reimbursement claim.

DELAYED RETURN	SUPPORTING DOCUMENTS TO BE PROVIDED	
IN ALL CASES	<ul style="list-style-type: none"> - the original unused tickets <p>In all cases:</p> <ul style="list-style-type: none"> - the original supporting documents for the expenses incurred (Accommodation Costs and food and drink expenses) - any other supporting documents requested by the Insurer after the claim has been assessed 	
Trip Extension	<p>For an Illness linked to an Epidemic or a Pandemic</p> <p>Should the Insured Person be put into Quarantine</p>	<ul style="list-style-type: none"> - the prescriptions for medical treatment, where applicable - examination reports, where applicable - the hospitalisation form, where applicable - after the claim has been assessed and at the request of the Insurer: the reimbursement statements from the health insurance organisation with which the Insured is registered - the supporting document issued by the relevant local health authorities <p>In all cases:</p> <ul style="list-style-type: none"> - the invoice for the newly purchased tickets
Redirection to the original return location	<p>For an Illness linked to an Epidemic or a Pandemic</p> <p>Should the Insured Person be put into Quarantine</p>	<ul style="list-style-type: none"> - the prescriptions for medical treatment, where applicable - examination reports, where applicable - the hospitalisation form, where applicable - after the claim has been assessed and at the request of the Insurer: the reimbursement statements from the health insurance organisation with which the Insured is registered - the supporting document issued by the relevant local health authorities

ADMINISTRATIVE PROVISIONS

1. LEGISLATION GOVERNING THE POLICY AND WHERE IT IS TAKEN OUT

The Policy is governed by the French Insurance Code, **except for the Assistance Cover**, and the General Terms and Conditions.

This policy has been drawn up in French and is governed by French law.

Since this involves transactions carried out on a website hosted in France, the virtual space made up of the web pages of the site **www.klm.fr** is deemed to be located in the French territory and policies taken out on it are therefore located in France, without prejudice to the protection given to the consumer by the law of the country in which the consumer normally lives.

2. PROCEDURES FOR TAKING OUT THIS POLICY, ENTRY INTO FORCE AND CESSATION OF COVER

a. Procedures for taking out this policy and its entry into force

The policy must be taken out:

- **for the "Cancellation or Change" and "Missed Flight" types of cover:** on the same date as the Trip is booked, or no later than two (2) working days after this booking.
- **for all other types of cover:** at the latest on the day of your departure.

This policy will enter into force when it is taken out.

b. Entry into force and cessation of cover

The types of cover will start:

- **for the "Cancellation or Change" and "Missed Flight" types of cover:** at 00:00 hours on the day after payment of the premium.
They end at the start of the insured service.
- **for the "Traveller Assistance" cover:** from the time the Insured Person leaves the Point of Departure for the Trip (a maximum of forty-eight (48) hours before the date of Departure indicated on the sales agreement for the insured service and, at the earliest, at 12 noon on the day after the premium has been paid)
It will end forty-eight (48) hours at the latest after the end of the insured Trip, the date of which appears in the sales agreement for the insured service;
- **For the 'Delayed Return' (Trip Extension and Redirection to the Original Return Location) cover:** from the time that the Insured Person leaves the Departure location for the Trip (a maximum of 24 hours before the Departure date stated in the sales agreement) and after the premium is paid by the Insured Person, at the earliest.
- **for all other types of cover:** at 00:00 hours on the date of Departure indicated in the sales agreement for the insured service, and at 12 noon on the day after the premium has been paid at the earliest.
The cover will end twenty-four (24) hours after the return time stated in the sales agreement for the insured service.



PLEASE NOTE

When the Insured Person cancels their Trip, they may not benefit from the other types of cover provided in this policy.

3. CANCELLATION OPTION

The Insured Person may exercise a Cancellation option after taking out an insurance policy.

1. Cancellation scenarios

- **Multi-insurance**
Under Article L112-10 of the French Insurance Code, the Insured Person who takes out, for non-professional purposes, **an insurance policy supplementing goods or services sold by an intermediary**, may cancel this policy, at no expense or penalty, when it has not been executed in full or when the Insured Person has not made a claim. This cancellation must occur within thirty (30) calendar days from the date on which this policy is taken out. When the Insured Person benefits from one or more free insurance premiums, the cancellation period does not start until payment of all or part of the first premium.
- **Remote sales**
Under Article L 112-2-1 of the French Insurance Code, a cancellation option applies to insurance policies taken out remotely, in particular sold online, without the parties to the policy being simultaneously physically present, during cold calling or outside the seller's usual place of business. The Insurer accepts that this cancellation will occur within thirty (30) calendar days from the conclusion of this policy.

This cancellation option does not apply to travel or baggage insurance policies or to similar short-term insurance policies with a duration of less than one (1) month. The term of the insurance policy runs between the date on which it was taken out and the date on which all types of cover end.

- **Procedure for exercising the cancellation option**

When the insurance policy is eligible for the cancellation option under the conditions defined above, the Insured Person may exercise this option by returning a letter or any other durable format addressed to the Insurer duly dated and signed, before the expiry of the period indicated above as from the date on which this policy is taken out, by e-mail to the following e-mail address: resilier@votreassistance.fr

The Insured Person may, if they so wish, use the template cancellation letter below:

'I, the undersigned, surname, first name, date and place of birth, would like to cancel insurance policy no. ... which I took out with AWP P&C on ... (Date).

Signed in ... (Place). On ... (Date) and Signature: ...'.

If the Insured Person exercises this option, the policy shall be terminated on its effective date. The Insured Person shall be refunded the corresponding premium within thirty (30) days of the date of receipt of his waiver request.

The Cancellation option may not be exercised if the Insured Person has implemented the cover in this insurance policy as part of a Claim submitted within the time period indicated above, and, as a result, no premium will be reimbursed in such a case.

4. CUMULATIVE INSURANCE

If the Insured Person is covered for the same risks with other insurance companies, they must inform the Insurer and provide them with their contact information and the scope of their cover, under Article L121-4 of the French Insurance Code.

The Insured Person may receive compensation for their damage by contacting the Insurer of their choice.

These provisions do not apply to assistance services.

5. SUBROGATION IN THE INSURED PERSON'S RIGHTS AND ACTIONS

In return for payment of the compensation and up to the amount of this compensation, the Insurer will become the beneficiary of the rights and legal actions that the Insured Person had against any party liable for the Claim, under Article L121-12 of the French Insurance Code.

If, due to the actions of the Insured Person, the Insurer can no longer perform this action, it may be discharged of all or part of its obligations to the Insured Person.

6. PENALTIES APPLICABLE IN THE EVENT OF MISREPRESENTATION WHEN TAKING OUT THE POLICY

- **Any non-disclosure or intentional misrepresentation by the Insured Person in the statement of risk is punishable by the policy being rendered null and void under the conditions set out in Article L113-8 of the French Insurance code.**

- **Any omission or inaccurate statement by the Insured Person when their bad faith has not been proven will be punished under the conditions set out in Article L113-9 of the French Insurance Code:**

- if it is ascertained before any claim: the Insurer will be entitled either to uphold this policy with an increase in the premium, or to terminate the policy within ten (10) days by registered letter, by reimbursing the overpayment of the premium.

- if it is only ascertained after the Claim: the Insurer may reduce the compensation in proportion to the amount of premium paid compared with the amount of premium that would have been due if the risk had been declared fully and accurately.

7. APPLICABLE PENALTIES SHOULD THERE BE INTENTIONAL MISREPRESENTATION ON THE CLAIM DATE

Any fraud, non-disclosure or intentional misrepresentation by the Insured Person about the circumstances or consequences of a Claim will result in any entitlement to benefits or compensation for this Claim being lost.

8. LIMITATION PERIOD

The provisions relating to the limitation period for legal action arising from this insurance policy are set out in Articles L114-1 to L114-3 of the French Insurance Code, reproduced below:

- Article L 114-1 of the French Insurance Code

"Any legal action arising from the insurance policy will be covered by a limitation period of two years from the event giving rise to it. By way of exception, actions deriving from an insurance policy relating to damage resulting from ground movements as a result of drought-rehydration of soil, recognised as a natural disaster under the conditions provided for in Article L. 125-1, shall be time-barred five years after the event giving rise to it.

However, this period will run:

- 1) Should there be non-disclosure, omission or misrepresentation, only from the date on which the insurer became aware of it;
- 2) Should there be a claim, only from the date on which the relevant parties became aware of it, if they prove that they were unaware up until then. When the legal action by the Insured Person against the Insurer is due to redress by a Third Party, the limitation period will run only from the date on which that Third Party filed legal proceedings against the insured person or the insured person paid out the compensation.

The limitation period will be increased to ten years for life-insurance policies when the beneficiary is a person other than the policyholder and, in personal accident insurance policies, when the beneficiaries are the deceased Insured Person's legal successors.
For life insurance policies, notwithstanding the provisions of paragraph (2), the actions of the beneficiary will be covered by a limitation period of a maximum of thirty years from the insured person's death."

- Article L114-2 of the French Insurance Code

"The limitation period will be interrupted by one of the ordinary grounds for interrupting the limitation period and by the appointment of an expert following a claim. The limitation period for the legal action may also be interrupted by a registered letter or electronic registered mail, with acknowledgement of receipt, being sent by the Insurer to the Insured Person, in relation to legal action for paying the premium, and by the Insured Person to the Insurer in relation to paying the compensation."

- Article L114-3 of the French Insurance Code

"Notwithstanding Article 2254 of the French Civil Code, the parties to the insurance policy may not, even by mutual agreement, either amend the duration of the limitation period or add to the causes for suspension or interruption thereof."

Additional information:

The ordinary grounds for interruption of the limitation period are set out in Articles 2240 et seq. of the French Civil Code, including recognition of the right by the debtor; legal action, even in summary proceedings; and the act of compulsory enforcement.

For a full list of ordinary grounds for interruption of the limitation period, please refer to the aforementioned articles of the French Civil Code.

With regard to the "Private Third Party Liability Abroad" cover, the time period runs only from the date when a Third Party advised the Insured Person of their intention to obtain compensation from the Insured Person, provided that this action is not subject to a time limitation, pursuant to Article 2226 of the Civil Code.

9. ADDRESS FOR SENDING SUPPORTING DOCUMENTS TO BE PROVIDED SHOULD A CLAIM BE MADE

Supporting documents for each of the following types of cover should be sent to the addresses below:

"Cancellation or Change", "Missed Flight", "Damage to Baggage" and "Delayed Return" types of cover	"Private Third Party Liability Abroad" cover	"Traveller Assistance" cover
AWP FRANCE SAS Service Indemnisation Assurances [Insurance Compensation Department] DOP01 7 rue Dora Maar CS 60001 93488 Saint-Ouen Cedex	AWP FRANCE SAS DT - Service Juridique - DT03 7 rue Dora Maar CS 60001 93488 Saint-Ouen Cedex	AWP FRANCE SAS Service Relations Clientèle - RELAC01[Customer Relations Department] 7 rue Dora Maar CS 60001 93488 Saint-Ouen Cedex

10. DAMAGE ASSESSMENT

The causes and consequences of the Claim will be assessed by mutual agreement and, if not, by jointly agreed expert assessment, subject to the respective rights of the Insurer and the Insured Person. The fees for this expert assessment will be shared between the parties.

If the parties are unable to agree on selecting the third party expert, one will be appointed by the Presiding Judge of the Tribunal de Grande Instance [Regional Court] of the Home of the Policyholder.

This appointment will be made in a written request signed by the Insurer or by only one of the parties, with the other having been summoned by registered letter.

11. SETTLING CLAIMS

a. Calculating the compensation

When the invoices provided are not denominated in euros, the compensation amount will be based on the exchange rate applying on the date on which the compensation is calculated.

b. Time period

Once the Insured Person's claim has concluded, their compensation will be paid within ten (10) days following agreement between the Insurer and the Insured Person, or the enforceable court decision.

12. COMPLAINTS HANDLING PROCEDURES

If your complaint, expressed verbally or via instant messaging, could not be fully resolved immediately, it must be sent to us in writing as follows:

- By e-mail to: reclamation@votreassistance.fr
- By post to the following address: *AWP France SAS - Traitement des réclamations - TSA 70002 - 93488 Saint-Ouen Cedex*

We will acknowledge receipt of your written complaint within ten (10) working days of it being sent and provide you with a written response within a maximum of two (2) months.

In any event, you may refer the matter to the independent ombudsman after a period of two (2) months from the date on which your first written complaint is sent:

- By electronic means: www.mediation-assurance.org
- By post to the following address: *Monsieur le Médiateur de l'Assurance - TSA 50110 - 75441 Paris Cedex 09*

Your request to the insurance ombudsman must, where necessary, be made **within one (1) year** of your first written complaint to us.

However, this does not remove the option of taking legal action.

If you take out your insurance policy online, as a consumer, you can use the European Commission's Online Dispute Resolution (ODR) platform at the following link: <http://ec.europa.eu/consumers/odr>

13. LEGAL JURISDICTION

The address for service of AWP P&C is: **7 rue Dora Maar, 93400 Saint-Ouen.**

Any disputes arising against AWP P&C concerning this policy will be exclusively submitted to the competent French courts, and all notices should be made to one of the addresses stated above, depending on the date on which the legal information of AWP P&C is changed.

14. PERSONAL DATA PROTECTION

The processing of personal data is governed by the Amended French "Data Protection Act" of 6 January 1978 and Regulation (EU) 2016/679 of 27 April 2016 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data.

AWP P&C is the data controller for the personal data collected for the purposes of taking out, managing and implementing policies.

These data are stored for the period required for executing the policy and in accordance with the provisions relating to the limitation period. Only managers of assistance services and/or insurance cover may use them and they may be disclosed to data processors, located inside or outside the European Union.

Under the legislation and regulations applying for data protection matters, the Insured Person may exercise their right to access data about them or have them corrected by contacting: informations-personnelles@votreassistance.fr

For more information, please see the Privacy Statement explaining, among other things, how and why personal data are collected. The most recent version was given to the Insured Person when the policy was taken out.

As part of its risk management policy and anti-fraud activities, AWP France SAS reserves the right to review all information and, if necessary, to inform the competent authorities in accordance with the legislation in force.

15. REGULATORY AUTHORITY

The body responsible for the regulation of AWP P&C is the Autorité de Contrôle Prudentiel et de Résolution [French insurance industry regulatory authority], 4 Place de Budapest, CS92459, 75436 Paris Cedex 09 - www.acpr.banque-france.fr

16. LEGAL INFORMATION

The insurance cover is provided by AWP P&C

A French société anonyme [limited company] with a share capital of € 18,510,562.50, Bobigny Trade and Companies Register under No. 519 490 080, registered office: 7 Rue Dora Maar - 93400 Saint-Ouen

A private company governed by the French Insurance Code.

The assistance services are delivered by AWP FRANCE SAS

A French société par actions simplifiée [simplified joint-stock company] with capital of €7,584,076.86, registered with the Bobigny RCS [Register of Companies] under No. 490 381 753, and with its registered office at: 7 Rue Dora Maar - 93400 Saint-Ouen, an insurance brokerage company - ORIAS No. 07 026 669 - <http://www.orias.fr>

Referred to above by its trading name "Allianz Travel".

Privacy Statement

We take the security of your personal data very seriously

AWP P&C, an entity of Allianz Partners SAS, is an insurance company approved by the **Autorité de contrôle prudentiel et de résolution [French insurance industry regulatory authority, ACPR]**, offering insurance products and services. Protecting your privacy is our number one priority. This Privacy Statement will explain how we collect personal data, what type of data we collect and why, with whom we share it and to whom we disclose it. Please read this statement carefully.

1. Who is the data controller?


The data controller is the person, natural or legal, who controls and is responsible for the storage and use of personal data, in paper or electronic format. **AWP P&C** ('We', 'Our') is the data controller, as defined by the applicable data protection laws and regulations.

2. Which personal data are collected?

We will collect and process various types of personal data about you, as follows:

- identification data for persons who are party to, affected by or involved in the policy and
- any other data required for drawing up and/or executing the policy.

In doing so, we may be required to collect and process "sensitive personal data" about you.

 **By taking out this policy, you undertake to disclose the information referred to in this privacy statement to any third party for whose personal data may be transmitted to us (e.g. other Insured Persons, beneficiaries, third parties involved in the insured loss, persons to be notified in an emergency, etc.) and you agree not to disclose this information otherwise.**

3. How are my personal data collected and processed?

We will collect and process the personal data that you send to us and personal data that we receive from third parties (as explained below) for a number of purposes and provided that you explicitly consent to this, unless this is not required by applicable laws and regulations, as stated below:

Purpose	Is my explicit consent necessary?
<ul style="list-style-type: none"> • Getting a quotation and taking out the insurance policy 	<ul style="list-style-type: none"> • No, as these processing activities are required for implementing the insurance policy to which you are party and for taking the required measures prior to taking out this policy.
<ul style="list-style-type: none"> • Administration for the insurance policy (such as handling complaints, investigations and estimates required for establishing that the Covered Event occurred and the amount of compensation to be paid or the type of assistance to be provided) 	<ul style="list-style-type: none"> • Yes, if necessary. However, in circumstances where we need to process your personal data for handling your complaint, we will not request your explicit consent.
<ul style="list-style-type: none"> • In order to conduct quality checks on the services provided, in order to ascertain, and ideally improve, your level of satisfaction 	<ul style="list-style-type: none"> • No. We have a legitimate interest in contacting you after handling a request or providing a service so we can make sure we have fulfilled our contractual obligations to your satisfaction. However, you are entitled to object to this by contacting us as set out in section 9 below.
<ul style="list-style-type: none"> • In order to meet all statutory obligations (such as obligations deriving from laws relating to insurance policies and insurance 	<ul style="list-style-type: none"> • No, as these processing activities are specifically and legally

Purpose	Is my explicit consent necessary?
activities, regulations on tax, accounting and administrative obligations)	authorised.
<ul style="list-style-type: none"> For monitoring purposes, in order to adhere to statutory obligations or internal procedures 	<ul style="list-style-type: none"> No. We may process your data as part of internal or external audits, which may be required either by law or our own internal procedures. We will not request your consent for these processing activities if they are justified under the regulations in force or for the purposes of our legitimate interest. However, we will ensure that only personal data that are strictly required will be used and that they will be processed in complete confidentiality. <p>Internal audits will generally be conducted by our parent company, Allianz Partners SAS (7 Rue Dora Maar, 93400 Saint-Ouen, France).</p>
<ul style="list-style-type: none"> In order to produce statistical and qualitative analyses based on compensation claim data and frequency 	<ul style="list-style-type: none"> If we carry out one of these processing activities, the personal data used will be rendered anonymous. Therefore, any such 'anonymous' data will no longer be considered as 'personal' data and your consent will not be required.
<ul style="list-style-type: none"> For debt recovery management 	<ul style="list-style-type: none"> No, if processing your data (even if this involves sensitive categories of personal data) is required for establishing, exercising or protecting rights in legal proceedings, which we may also invoke in respect of our legitimate interest.
<ul style="list-style-type: none"> In order to prevent and combat fraud and money laundering, and comply with regulations applying to economic sanctions, including, where applicable and as an example, comparing your information with information appearing in previous claims, or verifying the current claim-submission procedures. 	<ul style="list-style-type: none"> No. Identifying and preventing fraud and money laundering, as well as complying with the regulations applying to economic sanctions, is a legitimate interest for the Data Controller. Therefore, we are entitled to process your data for this purpose without having obtained your consent first.
<ul style="list-style-type: none"> In order to transfer risks via reinsurance and co-insurance 	<ul style="list-style-type: none"> We may process and share your personal data with other insurance or reinsurance companies, with whom we have signed or will sign co-insurance or reinsurance agreements. <p>Co-insurance is when more than one insurance company covers the risk through a single policy, with each company then assuming a percentage of the risk or sharing the types of cover between them.</p> <p>Reinsurance is the process of 'subcontracting' the cover for part of the risk to a third-party reinsurer. However, this is an internal agreement between us and the reinsurer, and you have no direct contractual relationship with the reinsurer.</p> <p>These risk transfers occur for the purposes of the legitimate interests of insurance companies, which are generally specifically authorised by law (including the sharing of personal data strictly required for this purpose)</p>

As mentioned above, for the purposes listed above, we will process the personal data about you that we receive from our business partner **KLM**.

For the purposes stated above for which we have indicated that your express consent is not required or in cases where we need your personal data for the purpose of taking out your insurance and/or handling your claim, we will process your personal data on the basis of our legitimate interests and/or in accordance with our statutory obligations.

Your personal data will be required for any purchase of our products and services. If you do not want to provide us with these data, we will not be able to guarantee you access to the products and services you have requested or that may interest you, or to suggest services tailored to your specific requirements.

4. Who is able to access my personal data?

We will ensure that your personal data are processed in compliance with the purposes set out above.

For the stated purposes, your personal data may be disclosed to the following parties, operating as third party data controllers:

- public sector bodies, other Allianz group companies, other insurers and reinsurers.

For the stated purposes, your personal data may be disclosed to the following parties, operating as data processors under our responsibility:

- other Allianz group companies (including AWP France SAS), technical consultants, experts, lawyers, claims adjusters, repairers, service providers, doctors and service companies to which we outsource our operations (complaints, IT, postal services and document management)

Finally, we may be required to share your personal data in the following cases:

- in planned or actual cases of restructuring, mergers, sales, joint ventures, assignments, transfers or other arrangement relating to all or part of our business, assets or securities (including in connection with insolvency or other similar proceedings); and
- in order to comply with any legal obligations, including obligations arising from the ombudsman's decisions should you submit a complaint about any of our products or services.

5. Where are my personal data processed?

Your personal data may be processed both within and outside of the European Union (EU) by the parties specified in section 4, which are always subject to contractual restrictions relating to privacy and security, in accordance with applicable data protection laws and regulations. We will not disclose your personal data to parties that are not authorised to process them.

Any transfer of your personal data for processing outside of the EU by another Allianz Group company will be performed following the internal company rules approved by the Regulatory Authority to which the Allianz Group belongs, establishing suitable rules for protecting personal data and legally binding on all companies in the Allianz Group. Allianz's internal corporate rules and the list of group companies that comply with them are available here: <https://www.allianz-partners.com/allianz-partners-binding-corporate-rules-.html>. Where Allianz's internal corporate rules do not apply, we will take measures to ensure that the transfer of your personal data outside of the EU is performed with a suitable level of protection, just as if it were a transfer within the EU. You can find out about the safeguards that we implement for this type of transfer (for example, standard contractual clauses) by contacting us as set out in section 9.

6. What are my rights in relation to my personal data?

Where permitted by applicable law or regulation, you are entitled to:

- access your personal data and discover their origin, the objectives and purposes for processing these data, information about the data controller(s), the data processor(s) and the recipients of any data that may be disclosed;
- withdraw your consent at any time, in situations where it is required for processing your personal data;
- update or correct your personal data so that they are always accurate;
- delete your personal data from our systems if storing them is no longer required for the purposes set out above;
- restrict the processing of your personal data in certain circumstances, for example, if you have contested the accuracy of your personal data, for the period necessary for our departments to verify the accuracy of your personal data;
- obtain your personal data in electronic format, for your personal use or for use by your new insurer; and
- submit a complaint to our company and/or the relevant data protection authority - [Commission Nationale de l'Informatique et des Libertés \(CNIL\)](#).

You may exercise these rights by contacting us as set out in section 9.

7. How can I object to my personal data being processed?

Where permitted by applicable law or regulations, you will be entitled to object to your personal data being processed by our department, or to request our company to stop processing these data (including for direct marketing purposes). Once your request has been sent, we will no longer process your personal data unless permitted by applicable laws or regulations.

You may exercise this right in the same way as your other rights set out in section 6.

8. How long will you store my personal data?

We will only store your personal data for as long as necessary for the purposes set out in this privacy statement and then they will be deleted or anonymised when no longer required. Please find below some of the retention periods that apply to the purposes set out in section 3 above.

- For a period of two (2) years from the end date of the insurance policy
- Should there be a claim - two (2) years from the claim being settled.
- Should there be a claim involving physical injury - ten (10) years from the claim.
- For any information on complaints - two (2) years from the date on which the complaint is received.
- For any information about the policy - two (2) years from expiry, termination or cancellation.

However, please be aware that additional specific obligations or events may sometimes cancel or alter these periods, such as ongoing regulatory disputes or investigations, which may replace or suspend these periods until the case is closed and the applicable review or appeal period has expired. In particular, retention periods based on periods of limitation for legal claims may be suspended and then subsequently resume.

9. How can I contact you?

If you have any questions about how we use your personal data, you can contact us by email or post:

AWP France SAS
Département Protection des Données Personnelles (Data Protection Department)
7 rue Dora Maar, 93400 Saint-Ouen
Email: informations-personnelles@votreassistance.fr

10. How often do you update this Privacy Statement?

We regularly review this Privacy Statement.