

POLICY

ALLIANZ TRAVEL PROTECT POLICY WORDING



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TRAVEL INSURANCE TERMS AND CONDITIONS

In consideration of the payment of premium and subject to the definitions, exclusions, limitations, provisions and terms contained herein, endorsed hereon, or attached hereto, Allianz Global Corporate & Specialty SE Hong Kong Branch (hereinafter called “**The Company**”) agrees to provide insurance to the **Insured Persons** named in the **Certificate of Insurance** issued in relation to a **Journey** that commenced and occurred within the **Period of Insurance** subject to terms and conditions of this Policy and promises to pay indemnity for loss to the extent provided herein. Please refer to the **Schedule of Benefits** in the **Certificate of Insurance** for the details of your coverage and the limits thereof.

The Company has appointed **Allianz Global Assistance** as its **Authorised Assistance Service Provider**, to provide you with claim and assistance services, and for the administration of your Policy.

The **Certificate of Insurance**, Travel Insurance Terms and Conditions and endorsements (if any), shall constitute the entire contract of insurance (hereinafter called the “**Policy**”). Please be sure to read and print a copy of your **Certificate of Insurance** and Travel Insurance Terms and Conditions, and pay attention to the General Exclusions and General Provisions which apply in all instances.

DEFINITION OF WORDS

The following defined terms shall have the meaning set out as follows in this Policy:

Accident or **Accidental** means a sudden, unforeseen and unexpected event happening by chance.

Allianz Global Assistance (AGA) means the trading name of Allianz Worldwide Partners (Hong Kong) Limited, a legal entity duly registered under HK laws.

Annual Cover means that the period specified in the **Certificate of Insurance** and any subsequent period for which you shall have paid and we shall have accepted a renewal premium. Insurance is only effective for any **Journey** not exceeding ninety (90) days, Allianz Travel Protect Policy Wording
Effective Date: 9th August 2017

which commences from and returns to Hong Kong within **Period of Insurance**.

Authorised Assistance Service Provider means the independent service provider appointed by **The Company** to provide overseas assistance services to **Insured Persons**.

Black Travel Alert means the black travel alert issued by the Hong Kong Security Bureau under the Outbound Travel Alert (OTA) System. This definition may be changed by **The Company** from time to time based on changes to the OTA System communicated by the Hong Kong Security Bureau.

Bodily Injury means physical injury caused solely and independently by an **Accident** and sustained during the **Period of Insurance**.

Business Partner means one or more persons engaged in, and sharing the profits and risks of the same business enterprise as an **Insured Person**.

Certificate of Insurance means the document issued to the **Insured Person** showing details of cover, including the **Schedule of Benefits**.

Chinese Medicine Practitioner means a person other than an **Insured Person** or an **Extended Family Member** who is a Chinese bonesetter, acupuncturist or person duly registered as a Chinese medicine practitioner according to the Chinese Medicine Ordinance (Cap. 549).

Company means Allianz Global Corporate & Specialty SE Hong Kong Branch.

Confinement or **Confined** means the period the **Insured Person** is registered as **Resident Inpatient** in a **Hospital** because of a medical necessity under the professional care of a **Qualified Medical Practitioner** and which the **Hospital** levies a charge for room and board for the treatment of **Bodily Injury** or **Sickness** for such **Confinement**.

Departure Date means the date where **Insured Person** departs from **Hong Kong** to their destination.

Effective Date means the date the **Period of Insurance** starts as stated in the **Certificate of Insurance**.

Expiry Date means the date the **Period of Insurance** ends as stated in the **Certificate of Insurance**.

Family means the policyholder, his/her spouse and dependent children aged (regardless of number) between 60 days and 17 years of age travelling together during the insured **Journey**

Hong Kong means the Hong Kong Special Administrative Region.

Hospital means a **Hospital** (other than an institution for the aged, chronically ill or convalescent rest or nursing home or a place for alcoholics or druge addicts, or for any similar purpose) operated pursuant to law for the care and treatment of sick or injured person with organized facilities for diagnosis and surgery and having 24 hours nursing service and medical supervision.

Household Contents means property owned by an **Insured Person** and located at their **Principal Home** at the time of burglary but does not include diamonds, gems, antiques, valuable paintings or art, jewelry and accessories (including but not limited to, for example crystals, earrings, necklaces, rings or brooches etc.) or cash.

Extended Family Member means an **Insured Person's** spouse, parents, parents-in-law, grandparents, children, siblings, grandchildren or legal guardians.

Insured Person means the person or persons named in the **Certificate of Insurance** or subsequent endorsement(s) (if any).

Journey wherever used in this Policy shall mean the **Journey** with the period of travel commencing from the **Insured Person** leaves the **Hong Kong** immigration counter on the **Departure Date** for the purpose of commencement of his/her insured **Journey**, and until either: (i) the **Expiry Date** as described in the **Certificate of Insurance**; or (ii) the **Insured Person's** arrival at any immigration counter for returning to **Hong Kong** after the insured **Journey**, whichever first occurs.

Loss of hearing shall mean **Permanent** total and irrecoverable loss of complete hearing in an ear in that the ear is beyond remedy by surgical or other treatment.

Loss of limb shall mean **Permanent** total and irrecoverable loss of use or loss by physical separation at or above the wrist or ankle joint of a limb.

Loss of sight shall mean **Permanent** total and irrecoverable loss of complete sight of an eye in that the eye is beyond remedy by surgical or other treatment.

Loss of speech shall mean **Permanent** total and irrecoverable loss of speech beyond remedy by surgical or other treatment.

Medical Equipment means the following **Medical Equipment** or medical appliances: wheel-chairs, prostheses, spectacles, crutches, walking frames, orthopedic braces and supports, cervical collars and hearing aids, which are certified by a **Qualified Medical Practitioner** as being medically necessary to improve an **Insured Person's** condition resulting from a **Bodily Injury** or **Sickness**.

Medical Expenses means all **Usual, Reasonable and Customary Medical Expenses** necessarily incurred by an **Insured Person** as a result of **Bodily Injury** sustained or **Sickness** contracted, for **Confinement**, surgical, medical, or other diagnostic or remedial treatment given or prescribed by a **Qualified Medical Practitioner**, including employment of a nurse, x-ray examination or the use of an ambulance as the result of an emergency.

Mobile Device means a portable computing device such as smartphone, laptop or tablet computer.

Pandemics means a form of an epidemic that extends throughout an entire continent, even the entire human race.

Period of Insurance means: (for **Single Trip**)

- a) In respect of Section E - Trip Cancellation, the **Period of Insurance** starts from the Policy Issue Date shown on the **Certificate of Insurance** or thirty (30) days prior to the **Departure Date**, whichever is later. The cover expires on the **Departure Date** at the moment of the **Journey's** commencement.
- b) In respect of sections other than Section E – Trip Cancellation, the **Period of Insurance** starts on the **Departure Date**, at the moment of the **Journey's** commencement. The cover expires upon any of the following (whichever comes first):
 - i. The **Expiry Date** as stated in the **Certificate of Insurance**
 - ii. Your return back to **Hong Kong**
 - iii. When the insurer determines that you should return to **Hong Kong** for the treatment.

For items a) and b) above, cover will automatically be extended for a maximum of fourteen (14) calendar days in the event of the Journey being unavoidably delayed by any event covered under this Policy. The **Period of Insurance**, exclusive of the extension, shall not be longer than one hundred and eighty-two (182) days.

Period of Insurance means (for **Annual Cover**):

- a) For Section E - Trip cancellation, Period of Insurance shall be effective from the time you arrange the **Journey** until the **Departure Date** at the moment of the **Journey's** commencement.
- b) For sections other than Section E – Trip Cancellation, the Period Of Insurance starts on the **Departure Date** at the moment of the **Journey's** commencement. The cover expires upon any of the following (whichever comes first):
 - i. The **Expiry Date** as stated in the **Certificate of Insurance**
 - ii. Your return back to **Hong Kong** within ninety (90) days of the **Departure Date** of the **Journey**
 - iii. When the insurer determines that you should return to **Hong Kong** for treatment

Permanent shall mean lasting twelve (12) consecutive months from the date of an **Accident** and at the expiry of the twelve (12) months period being beyond any hope of improvement.

Permanent Total Disability shall mean disablement which commences ninety (90) days from the date of the **Accident** and which is **Permanent** and which entirely prevents an **Insured Person** from attending to any business or gainful occupation of any and every kind or, if he/she has no business or occupation, from attending to any duties, which would normally be carried out by him/her in his/her daily life.

Personal Baggage means your suitcases, trunks and similar containers including their contents and articles worn or carried by you including your valuables. It does not include any camera and accessories, mobile phone, smart watch, bicycle, business samples or items that you intend to trade, passport or travel documents, cash, bank notes, currency notes, cheques, negotiable instruments, watercraft of any type (other than surfboards), furniture, furnishings, household appliances, hired items or any other item listed as excluded on your **Certificate of Insurance**.

Pre-Existing Condition means any condition for which the **Insured Person, Extended Family Member, Travel Companion** or **Business Partner** received from or were recommended by a **Qualified Medical Practitioner** prior to the **Effective Date** of this Policy for: a) any medical treatment; b) any diagnosis; c) any consultation; or d) any prescribed drugs leading to a claim under this Policy; or any **Symptom** which existed prior to the **Effective Date** leading to a claim under this Policy.

Principal Home means an **Insured Person's** primary place of residence in **Hong Kong**.

Public Conveyance means any mechanically propelled carrier operated by a company or an individual licensed to carry passengers for hire.

Qualified Medical Practitioner shall mean any person legally authorized by the Government with jurisdiction in the geographical area of his or her practice to render medical or surgical service, but excluding a **Qualified Medical Practitioner** who is the **Insured Person** or an **Extended Family Member** of the **Insured Person**.

Red Travel Alert means the red travel alert issued by the Hong Kong Security Bureau under the Outbound Travel Alert (OTA) System. This definition may be changed by **The Company** from time to time based on changes to the OTA System communicated by the Hong Kong Security Bureau.

Rental Vehicle means a campervan/motorhome that does not exceed 4.5 tonnes, a sedan, coupe, hatchback, station wagon, SUV, four-wheel-drive or mini bus/people mover rented from a licensed motor vehicle rental company.

Resident Inpatient means an **Insured Person** whose **Confinement** as a resident bed patient is necessary for the medical care, diagnosis and treatment of **Bodily Injury** or **Sickness** and not merely for any form of nursing, convalescence, rehabilitation, rest or extended-care.

Schedule of Benefits means the table of benefits presented in the **Certificate of Insurance** that sets out the coverage that is provided under each Policy and the maximum limits we will pay in total for all claims under each section.

Sickness means illness or disease commencing during the **Period of Insurance**.

Single Trip means insurance coverage effective for a single Journey, details of which is provided in the Certificate of Insurance.

Specially Designated List means names of a person, entities, groups, corporate specified on a list that are subject to trade or economic sanctions or other such similar laws or regulations of the United States of America, Australia, United Nations, European Union, Hong Kong or United Kingdom.

Sum Insured means, in relation to each benefit available to an **Insured Person** under this Policy, the maximum amount listed in the **Schedule of Benefits** or any endorsement(s) corresponding to that benefit.

Symptom means a sign or an indication of disorder or disease experienced by an individual.

Travel Companion means a person who accompanies an **Insured Person** for the entire **Journey**.

“**Usual, Reasonable And Customary**” means an expense which: (1) is charged for treatment, supplies or medical services medically necessary for caring of Insured Person(s) under the care, supervision, or order of a Qualified Medical Practitioner; (2) does not exceed the usual level of charges for similar treatment, supplies or medical services in the locality where the expense is incurred; and (3) does not include charges that would not have been made if no insurance existed.

DESCRIPTION OF COVER

The Company's maximum limit of liability under each section of benefits hereunder involving the **Insured Person** occurring within the **Period of Insurance** shall not exceed the relevant amount of **Sum Insured**, as specified under the **Schedule of Benefit** in the **Certificate of Insurance**.

SECTION A – PERSONAL ACCIDENT

1. **Accident** whilst travelling on a Public Conveyance (17 up to and including 75 years of age):

If an **Insured Person** of seventeen (17) up to and including seventy-five (75) years of age on the first day of the **Period of Insurance** sustains **Bodily Injury** while travelling as a

fare-paying passenger on board a **Public Conveyance** or a carrier arranged by a travel agent and, as a direct and unavoidable result, suffers within twelve (12) consecutive months a loss of the type listed in the Loss Table in this Section A, **The Company** will pay the percentage stated for that type of loss in the Loss Table in this Section A of the **Sum Insured** stated in Section A(a) of the **Schedule of Benefits**.

2. Other **Accident** (17 up to and including 75 years of age):

If an **Insured Person** of seventeen (17) up to and including seventy-five (75) years of age on the first day of the **Period of Insurance** sustains **Bodily Injury** other than as set out at Section A(a) above, and, as a direct and unavoidable result, suffers within twelve (12) consecutive months a loss of the type listed in the Loss Table in this Section A, **The Company** will pay the percentage stated for that type of loss in the Loss Table in this Section A of the **Sum Insured** stated in Section A(b) of the **Schedule of Benefits**.

3. **Accident** (under 17 or above 75 years of age):

If an **Insured Person** under seventeen (17) or over seventy-five (75) years of age on the first day of the **Period of Insurance** sustains **Bodily Injury**, and, as a direct and unavoidable result, suffers within twelve (12) consecutive months a loss of the type listed in the Loss Table in this Section A, **The Company** will pay the percentage stated for that type of loss in the Loss Table in this Section A of the **Sum Insured** stated in Section A(c) of the **Schedule of Benefits**

SECTION A: LOSS TABLE

Type of Loss		Percentage of Sum Insured
1	Death	100%
2	Permanent total disablement	100%
3	Permanent and Incurable paralysis of all limbs	100%
4	Permanent total loss of sight of both eyes	100%
5	Permanent total loss of or the of use of two limbs	100%
6	Permanent total loss of speech	100%
7	Permanent total Loss of Hearing in: a) Both ears b) One ear	75% 15%
8	Permanent total loss of sight in one eye	50%
9	Loss of or the Permanent total Loss of Use of one limb	50%

SPECIAL CONDITIONS TO SECTION A:

1. Where an **Insured Person** suffers more than one type of loss listed in the Loss Table in this Section A in the same **Accident**, **The Company's** liability under this Section A shall be limited to one payment for the type of loss which, of all the types of loss actually suffered, attracts the largest percentage stated in the Loss Table in this Section A of the relevant **Sum Insured** stated in Section A of the **Schedule of Benefits**.
2. Where the use or enjoyment of an **Insured Person's** limb or organ was partially impaired before an **Accident** occurred, **The Company** may, in its sole discretion and after considering a medical assessment by **The Company's** appointed medical adviser of the extent to which any **Bodily Injury** was, in the medical adviser's opinion, caused solely and independently by that **Accident**, pay such percentage of the relevant **Sum Insured** as it considers reasonable. No payment shall be made for a limb or organ which was totally unusable before an **Accident** occurred.
3. Exposure: If an **Insured Person** is unavoidably exposed to the elements by reason of sustaining **Bodily Injury** and, as a direct and unavoidable result, suffers death within twelve (12) consecutive months, **The Company** will pay the percentage stated for **Accidental** death in the Loss Table in this Section A of the relevant **Sum Insured** stated in Section A of the **Schedule of Benefits**.
4. Disappearance: If the **Insured Person** disappears as a result

of the disappearance, sinking or wrecking of the **Public Conveyance** caused by an **Accident** in which the **Insured Person** was traveling at the time of the **Accident** during the course of the insured **Journey** and remains missing after twelve (12) months from the date of the **Accident**, and **The Company** has reason to believe that the **Insured Person** has died in the **Accident**, **The Company** will pay the Personal Accident benefit, subject to receipt of a signed undertaking by the personal representative of the **Insured Person's** estate that any such payment shall be refunded to **The Company** if it is later discovered that the **Insured Person** did not die as a result of the **Accident**.

EXCLUSIONS TO SECTION A:

This Section A does not cover loss caused by an injury or otherwise which is a consequence of any kind of **Sickness**, disease or bacterial infection.

SECTION B – MEDICAL EXPENSES

1. Medical Expenses:

If an **Insured Person** incurs **Medical Expenses** during the **Period of Insurance** arising from **Bodily Injury** or **Sickness**, **The Company** will reimburse the **Insured Person** for those **Medical Expenses** up to the **Sum Insured** stated in Section B of the **Schedule of Benefits**.

2. Follow-up Medical Expenses:

If an **Insured Person** incurs **Medical Expenses** overseas arising from **Bodily Injury** or **Sickness** and, after returning to **Hong Kong**, that **Insured Person** still requires ongoing treatment in **Hong Kong** for the same **Bodily Injury** or **Sickness** as given or prescribed by a **Qualified Medical Practitioner** and/or **Chinese Medicine Practitioner**, **The Company** will continue to reimburse the **Insured Person** for the **Medical Expenses** incurred in **Hong Kong**, up to ninety (90) days after the **Insured Person's** return to **Hong Kong**, including the **Medical Expenses** up to the **Sum Insured** stated in Section B(a) "Follow-up Medical Expenses" of the **Schedule of Benefits** per visit per day. Specifically, for treatment by Chinese Medicine Practitioner, **The Company** will continue to reimburse the **Insured Person** for the **Medical Expenses** incurred in **Hong Kong** up to the **Sum Insured** stated in Section B(b) "Maximum Amount for Chinese Medical Practitioner" of the **Schedule of Benefits** in total, provided they are supported by receipts from a **Chinese Medicine Practitioner** or until the **Sum Insured** stated in Section B(b) has been exhausted, whichever comes first.

SPECIAL CONDITIONS TO SECTION B:

1. **The Company** or the **Authorised Assistance Service Provider** must be notified of any **Medical Expenses** incurred overseas as a **Resident Inpatient** during the **Period of Insurance** within thirty (30) days of their being incurred. Failure to give the notice required by this condition precedent will result in **The Company** having no liability under this Policy for those **Medical Expenses**.
2. The maximum daily amount incurred by **Chinese Medical Practitioners** shall be the amount stated in Section B(b) of the **Schedule of Benefits**.

EXCLUSIONS TO SECTION B:

This Section B does not cover:

1. Any expense included or contemplated in the cost of a **Journey** at the time it was paid for.
2. Surgery or medical treatment which, in the opinion of the **Qualified Medical Practitioner** attending the **Insured Person**, can reasonably be delayed until the **Insured Person** returns to **Hong Kong**.
3. Any expense incurred after an **Insured Person** has failed, within a reasonable period, to follow a **Qualified Medical Practitioner's** advice to return to **Hong Kong** to continue treatment for **Bodily Injury** suffered or **Sickness** contracted whilst overseas.
4. Any expense incurred during a **Journey** after an **Insured Person** has been advised by a **Qualified Medical Practitioner** prior to the departure of the **Journey** that he or she is unfit to travel.
5. Any follow-up expense incurred more than ninety (90) days after the end of the **Period of Insurance** during which the **Bodily Injury** or **Sickness** occurred.
6. Any expenses incurred under Section B after twelve (12) months from the date the first expenses were incurred.
7. Health check-ups or any investigation(s) not directly related to admission diagnosis, **Bodily Injury** or **Sickness** or any treatment or investigation which is not medically necessary.
8. The cost of prostheses, contact lenses, spectacles, hearing aids, dentures and other **Medical Equipment** or optical treatment, unless it is a valid claim under Section B(a).

SECTION C – HOSPITAL CASH

Upon the overseas **Confinement** of an **Insured Person** as a direct and unavoidable result of **Bodily Injury** or **Sickness**, **The Company** will pay an **Insured Person** a daily benefit of the amount stated in Section C of the **Schedule of Benefits** for each complete and consecutive 24 hours period of **Confinement**, up to the **Sum Insured** stated in Section C of the **Schedule of Benefits**.

SPECIAL CONDITIONS TO SECTION C:

Payment of benefits under this Section C shall only be made after the **Confinement** ends.

EXCLUSIONS TO SECTION C:

This Section C does not cover:

1. Any **Confinement** which occurs after the **Insured Person's** return to **Hong Kong**.
2. Any **Confinement** which occurs under Section C other than those caused by **Bodily Injury** or **Sickness** set out at Section B above

SECTION D – 24 HOUR WORLDWIDE ASSISTANCE SERVICES

1. **Medical Evacuation and Repatriation:**
 - i. Where a **Qualified Medical Practitioner**, designated by an **Authorised Assistance Service Provider**, certifies that **Bodily Injury** or **Sickness** renders an **Insured Person** unfit to travel or continue with their **Journey** or is a danger to their life or health; and the necessary medical treatment is not available, either at the nearest **Hospital** where the **Insured Person** was transported to or in the immediate vicinity thereof, after suffering the **Bodily Injury** or **Sickness**, **The Company** may, based on the advice of a **Qualified Medical Practitioner** that the **Insured Person** is medically fit to be evacuated, determine in its sole discretion, that the **Insured Person** should be evacuated to another location for the necessary medical treatment.
 - ii. The **Authorised Assistance Service Provider** shall arrange for the evacuation within a reasonable timeframe and utilize the best suited means, based on the medical severity of the **Insured Person's** condition for the transportation of the **Insured Person**, including but not limited to air ambulance, surface ambulance, regular air transportation, railroad or any other appropriate means.
 - iii. All decisions as to the means of transportation and the final destination will be made by **Authorised Assistance Service Provider**, and will be based solely upon medical necessity. The **Insured Person** may, in appropriate circumstances, be returned to **Hong Kong**.
 - iv. **The Company** will pay the actual cost of the **Insured Person's** emergency medical evacuation and/or repatriation and associated medical services and medical supplies directly to **Authorised Assistance Service**

Provider.

2. Return of Remains:

Upon the death of an **Insured Person** as a direct and unavoidable result of **Bodily Injury** or **Sickness**, **The Company** will pay the cost for transporting the **Insured Person's** mortal remains from the place of death to **Hong Kong** as approved by the **Authorised Assistance Service Provider**, up to the **Sum Insured** stated in Section D(b) of the **Schedule of Benefits**.

3. Overseas Funeral Expenses:

Upon the death of an **Insured Person** as a direct and unavoidable result of **Bodily Injury** or **Sickness**, **The Company** will pay, up to the **Sum Insured** stated in Section D(c) of the **Schedule of Benefits**, the reasonable cost of local burial at the place of death as approved by the **Authorised Assistance Service Provider**.

4. Relative Visit:

If a **Qualified Medical Practitioner** certifies that **Bodily Injury** or **Sickness** renders an **Insured Person** unfit to travel or continue with their **Journey** and is expected to be **Confined** in a **Hospital** for medical treatment in excess of seven (7) days, **The Company** will pay up to the **Sum Insured** stated in Section D(d) of the **Schedule of Benefits**: (i) the cost of one (1) economy class round-trip ticket for one (1) **Extended Family Member** to visit the **Insured Person** overseas, and (ii) the cost of one (1) ordinary room accommodation in a reasonable hotel overseas, excluding the cost of drinks, meals and other room services.

5. Relative Return:

If the **Insured Person's** **Extended Family Member** sustains an **Bodily Injury** or **Sickness** in **Hong Kong** and as a result dies during the insured **Journey** in **Hong Kong**. **The Company** shall reimburse the reasonable and necessary expenses of one economy class round-trip ticket for the **Insured Person** to travel back to **Hong Kong**, up to the **Sum Insured** stated in Section D(e) of the **Schedule of Benefits**.

6. Return of Minor:

Where:

- i. An **Insured Person** is **Confined** as a direct and unavoidable

result of **Bodily Injury** or **Sickness** which a **Qualified Medical Practitioner** certifies as either rendering that **Insured Person** unfit to travel or continue with their **Journey** or as being a danger to their life or health; and

- ii. That **Insured Person** is accompanied by a child who is an **Insured Person** and was under seventeen (17) years old on the first day of the **Period of Insurance**; and
- iii. That child is at risk of being left unattended as a result of the **Insured Person's** **Confinement**.

The Company will arrange and pay up to the **Sum Insured** stated in Section D(f) of the **Schedule of Benefits**, for an economy class one-way ticket, together with escort services, for that child to be escorted back to **Hong Kong**.

SPECIAL CONDITIONS TO SECTION D:

1. Services under Section D are provided by the **Authorised Assistance Service Provider**. **The Company** or the **Authorised Assistance Service Provider** must be promptly notified of the occurrence of any event which may give rise to a potential claim under Section D(a)–(f). Failure to give the notice required by this condition could result in **The Company** having no liability under this Section of the Policy.
2. The arrangements for, means and final destination of medical evacuation and repatriation will be decided by the **Authorised Assistance Service Provider** and will be based entirely upon medical necessity.
3. Upon payment being made under this Section D, **The Company** shall be entitled to any monies refundable from an original return airfare.

EXCLUSIONS TO SECTION D:

This Section D does not cover any:

1. Expense included or contemplated in the cost of a **Journey** at the time it was paid for.
2. Expense incurred during a **Journey** after an **Insured Person** has been advised by a **Qualified Medical Practitioner** prior to the departure of the **Journey** that he or she is unfit to travel.
3. Expense incurred for services provided by another party for which the **Insured Person** is not liable to pay.
4. Expense for a service not approved and arranged by an **Authorised Assistance Service Provider**.

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5. Treatment performed or ordered by a person who is not a **Qualified Medical Practitioner**.
 6. Expenses incurred in relation to treatment that can be reasonably delayed until the **Insured Person** returns to **Hong Kong**.

SECTION E – TRIP CANCELLATION

The Company shall reimburse the **Insured Person** up to the **Sum Insured** as stated in the **Schedule of Benefits** for loss of travel cost paid in advance by the **Insured Person** and for which the **Insured Person** is legally liable and which is not recoverable from any other source consequent upon the cancellation of the insured **Journey** necessitated by the occurrence of any of the following, within thirty (30) days before the **Departure Date** of the insured **Journey** (except for sub- paragraphs 3 to 6 below):

1. Death or **Bodily Injury** Or **Sickness** of the **Insured Person**, **Extended Family Member**, **Traveling Companion** and/or **Business Partner**;
2. Witness summons, jury service or compulsory quarantine of the **Insured Person**;
3. Sudden occurrence of strike by the employees of the **Public Conveyance**, unanticipated outbreak of riot or civil commotion at the destination within the period of one (1) week before the **Departure Date** of the planned insured **Journey** ;
4. Serious damage to the **Principal Home** of the **Insured Person** or **Traveling Companion** in **Hong Kong** from fire, flood, earthquake or similar natural disasters within the period of one (1) week before the **Departure Date** of the planned insured **Journey** which requires the **Insured Person**'s presence in the premises on the **Departure Date** of the insured **Journey** .
5. The unexpected issuance of a **Black Travel Alert** for a destination scheduled in the **Journey** at least one (1) day after this Policy becomes effective and which is in force at any time within one (1) week of the **Departure Date** of the planned insured **Journey**, resulting in cancellation of the **Journey**.
6. The unexpected issuance of a **Red Travel Alert** for a destination scheduled in the **Journey** at least one (1) day after this Policy becomes effective and which is in force at any time

within one (1) week of the **Departure Date** of the planned insured **Journey**, resulting in cancellation of the **Journey**,

SPECIAL CONDITION TO SECTION E:

1. Where a **Journey** is cancelled as a result of **Bodily Injury** or **Sickness** of an **Insured Person**, **Extended Family Member**, **Travel Companion** or **Business Partner**, that **Bodily Injury** or **Sickness** must be certified by a **Qualified Medical Practitioner** as rendering that **Insured Person**, **Extended Family Member**, **Travel Companion** or **Business Partner** unfit to travel or as being a danger to their life or health.
2. Failure to obtain the certifications required by this condition precedent will result in **The Company** having no liability under this Section E for the **Insured Person**'s loss of travel and/or accommodation expenses paid in advance or forfeited.

EXCLUSIONS TO SECTION E:

This Section E does not cover the whole or any part of travel and/or accommodation expenses which are:

1. Refundable to, or recoverable by, an **Insured Person** from any other source of indemnity or reimbursement.
2. Any amount which an **Insured Person** is not legally obligated to pay.
3. Cancelled as a direct or indirect result of a prohibition or regulation issued by any national, regional or local government.
4. Cancelled due to the negligence, misconduct or insolvency of the travel agent through whom the **Journey** was booked.
5. Cancelled due to the inability of a tour operator or wholesaler to complete a group tour due to a deficiency in the number of persons.
6. Cancelled as a direct or indirect result of financial hardship experienced by an **Insured Person**, changes in an **Insured Person**'s circumstances or contractual obligations or an **Insured Person**'s general disinclination to proceed with the **Journey**.
7. Arising from a circumstance which, at the time of booking a **Journey**, existed or might reasonably have been anticipated as being likely to result in the **Journey** being cancelled.
8. Any travel when **Black Travel Alert** or **Red Travel Alert** were hosted or announced by Hong Kong Security Bureau prior to the **Effective Date** of the Policy.

SECTION F – TRIP INTERRUPTION

A) Trip Curtailment:

The Company shall reimburse the **Insured Person** up to the **Sum Insured** as stated under Section F(a) in the **Schedule of Benefits** for the unused and forfeited travel cost where the **Insured Person** has to terminate and cut short the insured **Journey** and return to **Hong Kong** as a result of the following reasons:

1. Death, **Bodily Injury** Or **Sickness** of the **Insured Person, Insured Person's Extended Family Members, Traveling Companion** or **Business Partner**;
2. Sudden occurrence of strike by the employees of a **Public Conveyance**, unanticipated outbreak of riot or civil commotion or natural disasters which prevents the **Insured Person** from continuing with his/her scheduled insured **Journey**
3. The unexpected issuance of a **Black Travel Alert** for a destination scheduled in the **Journey** after this Policy's **Effective Date** and which is in force at any time during the **Journey**, resulting in curtailment of the **Journey**.
4. The unexpected issuance of a **Red Travel Alert** for a destination scheduled in the **Journey** after this Policy's **Effective Date** and which is in force at any time during the **Journey**.

B) Trip Re-route:

In the event that a **Journey** has to be re-routed because of the unanticipated occurrence during the **Period of Insurance** of a strike by the employees of a **Public Conveyance**, riot or civil commotion, adverse weather, natural disaster or epidemic at the scheduled destination, which prevents the **Insured Person** from continuing his/her scheduled **Journey**; **The Company** will pay the reasonable and necessary additional travel fare and/or accommodation incurred by an **Insured Person** to enable him or her to arrive at their scheduled destination, up to the **Sum Insured** stated in Section F(b) of the **Schedule of Benefits**.

SPECIAL CONDITIONS TO SECTION F:

1. Where a **Journey** is curtailed as a result of **Bodily Injury** or **Sickness** of an **Insured Person, Extended Family Member, Travel Companion** or **Business Partner**, that **Bodily Injury** or

Sickness must be certified by a **Qualified Medical Practitioner** as rendering that **Insured Person, Extended Family Member, Travel Companion** or **Business Partner** unfit to travel or as being a danger to their life or health.

2. Failure to obtain the certifications required by this condition precedent will result in **The Company** having no liability for the **Insured Person's** loss which may otherwise have been covered by this Section F.

EXCLUSIONS TO SECTION F:

This Section F does not cover the whole or any part of the cost of the unused part of a **Journey** or additional travel fare and/or accommodation incurred by an **Insured Person** to enable him or her to arrive at their scheduled destination, which is:

1. Refundable to, or recoverable by, an **Insured Person** from any other source of indemnity or reimbursement.
2. Incurred as a direct or indirect result of a prohibition or regulation issued by any national, regional or local government.
3. Incurred due to the negligence, misconduct or insolvency of the travel agent through whom the **Journey** was booked.
4. Incurred due to the inability of a tour operator or wholesaler to complete a group tour due to a deficiency in the number of persons.
5. Incurred as a direct or indirect result of financial hardship experienced by an **Insured Person**, changes in an **Insured Person's** circumstances or contractual obligations or an **Insured Person's** general disinclination to proceed with the **Journey**.
6. Arising from a circumstance which, at the time of booking a **Journey** or on the date the **Journey** first begins, existed or might reasonably have been anticipated, as being likely to result in the **Journey** being interrupted.
7. Any travel when **Black Travel Alert** or **Red Travel Alert** were hosted or announced by **Hong Kong Security Bureau** prior to **Departure Date**.
8. Claimed under Section G – Travel Delay arising from the same cause or event.

SECTION G – TRAVEL DELAY

In the event that the **Public Conveyance** is delayed due to adverse weather, natural disaster, strike involving the employees of the operator of a **Public Conveyance** or mechanical fault of a **Public Conveyance** during the **Period of Insurance, The**

Company will pay the amount stated in Section G of the **Schedule of Benefits** up to the **Sum Insured** stated in Section G.

SPECIAL CONDITIONS TO SECTION G:

1. Each period of delay will be calculated by reference to the difference between the scheduled local arrival time stated in the **Insured Person's** original itinerary for the **Journey** and the **Insured Person's** actual local arrival time at the same destination.
2. Where a **Journey** involves a sequence of connecting flights, the total period of delay will be calculated by reference to the difference between the original scheduled and actual local arrival times of the last flight in the sequence.
3. An **Insured Person** must take reasonable steps to mitigate any period of delay. Failure to take reasonable steps to mitigate any period of delay as required by this condition precedent will result in **The Company** having no liability under this Section G.
4. Any claim under this Section G must be accompanied by written confirmation from the carrier of the Public Conveyance associated with the delay stating the actual local arrival time at the stated destination and the reason for the delay in reaching that destination. Failure to provide the written confirmation required by this condition precedent will result in **The Company** having no liability under this Section G.

EXCLUSIONS TO SECTION G:

This Section G does not cover loss:

1. Arising from the late arrival of an **Insured Person** at any point of departure stated in the **Insured Person's** original itinerary for the **Journey**, other than late arrival due to strike of the employees of a **Public Conveyance** during the **Period of Insurance**.
2. Arising from an event or occurrence announced before the Policy is purchased which might reasonably have been anticipated, at that time, would be likely to result in the **Journey** being delayed.
3. Claimed under Section F – Trip Interruption.
4. Any amount which an **Insured Person** is not legally obliged to pay.

SECTION H – LOSS OF TRAVEL DOCUMENTS

The Company will reimburse an **Insured Person** up to the **Sum Insured** stated in Section H of the **Schedule of Benefits** for:

1. the replacement cost of travel documents necessary for immigration clearance and/or travel tickets which are lost or stolen during the **Period of Insurance**, the absence of which would otherwise lead to delay of the **Journey**; and/or
2. the reasonable additional cost of travel expenses and/or accommodation necessarily incurred by an **Insured Person** for the sole purpose of arranging the replacement travel documents and/or travel tickets referred to in point 1 above.

SPECIAL CONDITION TO SECTION H:

1. The local police or equivalent local law enforcement officials must be notified within twenty-four (24) hours of the occurrence of any event which may give rise to a claim under this Section H. Failure to give the notice required by this condition precedent will result in **The Company** having no liability under this Section H.
2. Any claim under this Section H must be accompanied by written proof of loss having been reported to the police or equivalent local law enforcement officials. Failure to provide written proof of the notice required by this condition precedent will result in **The Company** having no liability under this Section H.

EXCLUSIONS TO SECTION H:

This Section H does not cover loss arising from an **Insured Person's** negligence including, but not limited to, leaving travel documents necessary for immigration clearance and/or travel tickets unattended.

SECTION I – BAGGAGE LOSS OR DAMAGE

Subject to a reduction or allowance for physical deterioration, depreciation or obsolescence, **The Company** will, at its absolute discretion, reinstate, repair or replace a piece of **Personal Baggage** lost, stolen or damaged during the **Period of Insurance**, up to the **Sum Insured** stated in Section I(a) of the **Schedule of Benefits**.

SPECIAL CONDITIONS TO SECTION I:

1. The local police or equivalent local law enforcement officials must be notified within twenty-four (24) hours of the occurrence

of any **Personal Baggage** lost, stolen or damaged by the willful act of a third party and which may give rise to a claim under this Section I. The claim must be accompanied by written proof of loss having been reported to the local police or equivalent local law enforcement officials, along with receipt(s) or other relevant document(s) which stipulates the **Insured Person's** ownership and purchase value of the lost, stolen or damaged **Personal Baggage**. Failure to give the notice and written proof required by this condition precedent will result in **The Company** having no liability under this Section I.

2. If loss, theft or damage occurs in transit, the **Public Conveyance** carrier must be promptly notified of the loss or damage within twenty-four (24) hours of the discovery of the loss or damage. Failure to give the notice required by this condition precedent will result in **The Company** having no liability under this Section I of the Policy.
3. **The Company's** maximum liability for loss or theft of, or damage to, each item of **Personal Baggage** during the **Period of Insurance** will be restricted to the amount stated in Section I(a) of the **Schedule of Benefits**.
4. Where any item of lost, stolen or damaged **Personal Baggage** forms part of a pair or set, **The Company's** maximum liability for that item and that pair or set will be restricted to the amount stated in Section I(a) of the **Schedule of Benefits**.
5. Upon any payment being made under this Section I, **The Company** shall be entitled to take and retain the benefit and value of any recovered or damaged **Personal Baggage** from any other source of indemnity or reimbursement and to deal with salvage at its absolute discretion.

EXCLUSIONS TO SECTION I:

This Section I does not cover:

1. Loss, theft or damage arising from an **Insured Person's** negligence including, but not limited to, leaving **Personal Baggage** unattended.
2. Any unexplained loss, theft or damage to **Personal Baggage** which was left unattended in a vehicle (except locked in the trunk) or **Public Conveyance** or in other public places.
3. The following classes of property: business goods or sample, foodstuffs, animals, motor vehicles (including accessories), motorcycles, bicycles, boats, motors, any other conveyances,

household furniture, antiques, jewelry or accessories, cellphone (including PDA phone and other accessories), **Mobile Device**, smart watch, money (including checks, traveler's checks, etc.), plastic money (including the credit value of credit card, Octopus cards, etc.), securities, tickets or documents.

4. Loss of, or damage to, any **Personal Baggage** due to moth, vermin, wear and tear, atmospheric or climatic conditions, gradual deterioration, mechanical or electrical failure, any process of cleaning, restoring, repairing, alteration, confiscation or detention or destruction by customs or any other authority.
5. Any hired or leased equipment;
6. Loss or theft of, or damage to, or any **Personal Baggage** forwarded in advance of a **Journey** or separately mailed or shipped in a **Public Conveyance** other than a **Public Conveyance** carrying the **Insured Person** at the same time.
7. Loss claimed under Section J – Baggage Delay for the same incident.

SECTION J – BAGGAGE DELAY

In the event that, during the **Period of Insurance**, **Personal Baggage** is delayed, misdirected or temporarily misplaced by a **Public Conveyance** for the period of time as specified in the **Schedule of Benefits** after an **Insured Person's** arrival at the airport of the destination stated in the **Insured Person's** original itinerary for the **Journey**, **The Company** will reimburse the **Insured Person** for the cost of purchasing essential toiletries and clothing (hereafter referred to as "**Essential Items**"), up to the **Sum Insured** stated in Section J of the **Schedule of Benefits**.

SPECIAL CONDITION TO SECTION J:

1. Any claim under this Section J must be accompanied by written confirmation from the carrier associated with the delay, misdirection or temporary misplacement of the **Personal Baggage** for the period of time as specified in the **Schedule of Benefits** after an **Insured Person's** arrival at the airport of the destination stated in the **Insured Person's** original itinerary for the **Journey**, along with receipt(s) which specifies the cost of purchasing the **Essential Items**. Failure to provide the written confirmation required by this

condition precedent will result in **The Company** having no liability under this Section J.

EXCLUSIONS TO SECTION J:

This Section J does not cover the cost of purchasing of the

Essential Items:

1. For which an **Insured Person** has received or is due compensation from the carrier or operator responsible for the delay, misdirection or temporary misplacement of the **Personal Baggage**.
2. Where the delay, misdirection or temporary misplacement of the **Personal Baggage** by the **Public Conveyance** occurs during or after the **Insured Person's** trip to return to **Hong Kong**.
3. Where the delay, misdirection or temporary misplacement of the **Personal Baggage** is unexplained or is due to confiscation or detention by customs or any other authority.
4. For **Personal Baggage** forwarded in advance of a **Journey** or separately mailed or shipped in a **Public Conveyance** other than a **Public Conveyance** carrying the **Insured Person** at the same time.
5. Claimed under Section I – Baggage Loss or Damage and arising from the same cause or event.

SECTION K – LOSS OF PERSONAL MONEY

The Company will pay loss of an **Insured Person's** cash, banknotes or traveler cheques due to burglary, theft or robbery occurring during the **Period of Insurance**, up to the **Sum Insured** stated in Section K of the **Schedule of Benefits**.

SPECIAL CONDITIONS TO SECTION K:

The local police or equivalent local law enforcement officials must be notified within twenty-four (24) hours of the occurrence of any event which may give rise to a claim under this Section K. The claim must be accompanied by written proof of loss having been reported to the local police or equivalent local law enforcement officials. Failure to give the notice and written proof required by this condition precedent will result in **The Company** having no liability under this Section K.

EXCLUSIONS TO SECTION K:

This Section K does not cover:

1. Loss arising from an **Insured Person's** negligence including,

but not limited to, leaving cash, banknotes or travelers cheques unattended.

2. Any unexplained loss or loss due to confiscation or detention by customs or any other authority, devaluation of currency or shortages due to errors or omissions during money exchange transactions.
3. Loss arising from the use or misuse of any form of plastic money including, but not limited to, the credit value held on any card, electronic purse or equivalent store of credit.

SECTION L – RENTAL VEHICLE EXCESS

If the **Insured Person** is on a **Journey**, **The Company** will reimburse the **Insured Person** for any excess or deductible which an **Insured Person** becomes legally liable to pay in respect of loss or damage to the **Rental Vehicle** caused by an **Accident** whilst the **Rental Vehicle** is under the control of the **Insured Person** during the rental period on the **Journey**, up to the **Sum Insured** as specified in Section L of the **Schedule of Benefits** subject to the terms and conditions of this Policy.

SPECIAL CONDITIONS TO SECTION L:

1. The **Rental Vehicle** must be rented from a licensed rental agency.
2. As part of the hiring arrangement the **Insured Person** must take up all comprehensive motor insurance against loss or damage to **Rental Vehicle** during the rental period.
3. **Insured Person** must comply with all requirements of the rental organization under the hiring agreement of the **Rental Vehicle** and of the insurer under such insurance, as well as the laws, rules and regulations of the jurisdiction where the **Rental Vehicle** is rented or operated in.
4. In no event shall this benefit be paid more than once per insured **Journey**.

EXCLUSIONS TO SECTION L:

The Section L does not cover the **Insured Person** in respect of any claim which is, directly or indirectly, caused by, a consequence of, arises in connection with, or is contributed to by any the following:

1. Loss or damage arising from operation of the **Rental Vehicle** in violation of the terms of the rental agreement, or loss or damage which occurs beyond the limits of any public roads

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- or in the violation of laws, rules and regulations of the jurisdiction where the Rental Vehicle is rented or operated in.
2. Loss or damage arising from wear and tear, gradual deterioration, damage from insects or vermin, inherent vice, latent defect or damage.
 3. Any non-operation charge (NOC) or loss of use charge.

SECTION M – HOME GUARD

In the event of loss of or damage to **Household Contents** as a result of burglary during the **Period of Insurance** involving the use of forcible and violent entry to or exit from the **Principal Home** whilst the **Principal Home** is uninhabited, **The Company** will pay an **Insured Person** the replacement cost of the **Household Contents** up to the **Sum Insured** stated in Section M of the **Schedule of Benefits**.

SPECIAL CONDITIONS TO SECTION M:

1. The local police or equivalent local law enforcement officials must be notified within twenty-four (24) hours of the discovery of the occurrence of any event which may give rise to a claim under this Section M. Failure to give the notice required by this condition precedent will result in **The Company** having no liability under this Section M.
2. Any claim under this Section M must be accompanied by written proof of loss having been reported to the police or equivalent local law enforcement officials. Failure to provide written proof of the notice required by this condition precedent will result in **The Company** having no liability under this Section M.

EXCLUSIONS TO SECTION M:

This Section M does not cover:

1. Any special or unique value possessed by any item of lost or damaged **Household Contents** forming part of a pair or set.
2. Replacement costs which are covered for the same risk by any other insurance policy

SECTION N – PERSONAL LIABILITY

In the event that an **Insured Person** becomes legally liable to pay compensation for an **Accident** occurring during the **Period of Insurance** which causes **Bodily Injury** to any other person or destruction of the property of others, **The Company** will pay

that compensation on behalf of the **Insured Person** up to the **Sum Insured** stated in Section N of the **Schedule of Benefits**.

EXCLUSIONS TO SECTION N:

This Section N does not cover any liability:

1. Arising from **Bodily Injury** sustained by an **Extended Family Member** or by a person in the **Insured Person's** custody or control.
2. Arising from damage to property which belongs to the **Insured Person** or an **Extended Family Member** or which is in the **Insured Person's** custody or control.
3. Assumed under a contract.
4. Relating to the willful, malicious, unlawful or criminal act on the part of the **Insured Person**.
5. For liability arising from the ownership, possession, lease or rental of any vehicle, aircraft, firearm or animal.
6. For liability arising from the undertaking of any trade or profession.

SECTION O – LOSS OF MOBILE DEVICE

Subject to a reduction or allowance for physical deterioration, depreciation, deductibles or obsolescence, **The Company** will, at its absolute discretion, reinstate, repair or replace **Mobile Device** damaged or lost as a result of theft or robbery during the **Period of Insurance**, up to the **Sum Insured** stated in Section O of the **Schedule of Benefits** with a deductible stated in Section O(a) for the **Mobile Device**.

SPECIAL CONDITIONS TO SECTION O:

1. The local police, local customs or equivalent local law enforcement officials must be notified within twenty-four (24) hours of the occurrence of theft or robbery of the **Mobile Device** by the willful act of a third party and which may give rise to a claim under this Section O. The claim must be accompanied by written proof of loss having been reported to the local police or equivalent local law enforcement officials. Failure to give the notice required by this condition precedent will result in **The Company** having no liability under this Section O
2. Upon any payment being made under this Section O, **The Company** shall be entitled to take and retain the benefit and value of any recovered or damaged **Mobile Device** and to deal with salvage at its absolute discretion.

EXCLUSIONS TO SECTION O:

This Section O does not cover:

1. Loss, theft or damage arising from an **Insured Person's** negligence including, but not limited to, leaving the **Mobile Device** unattended.
2. Any unexplained loss, theft or damage to the **Mobile Device** which was left unattended in a vehicle (except locked in the trunk) or **Public Conveyance** or in other public places.
3. Loss or theft of, or damage to, or any **Mobile Device** forwarded in advance of a **Journey** or separately mailed or shipped in a **Public Conveyance** other than a **Public Conveyance** carrying the **Insured Person** at the same time.
4. Any costs relating to telecommunication charges, loss / recover of data, or any other direct, indirect or consequential loss arising from the usage of the Mobile Device after its lost, theft or damage.

SECTION P – MISSED EVENT

The Company will reimburse the actual cost of purchasing of ticket which has been paid in advance and forfeited by the **Insured Person**, up to the **Sum Insured** stated in Section P of the **Schedule of Benefits**; if during the Period of Insurance the **Insured Person** is unable to participate in a planned visit of theme parks, concerts, artistic performance or any additional activities (save and except any event arranged as part of the group tour's original itinerary due to the following reasons:

1. The sudden and unexpected death of an **Insured Person**, an **Extended Family Member** or **Travel Companion**, or the **Bodily Injury** or **Sickness** of an **Insured Person**, occurring after this Policy has been purchased and within thirty (30) days of the date of the **Journey** is scheduled to begin; or
2. The event being missed due to mechanical fault and/or electrical failure of a **Public Conveyance** which directly prevents the **Insured Person** from participating in the missed event

SPECIAL CONDITIONS TO SECTION P:

1. Any claim under this Section P must be accompanied by the documents relating to the occurrence of the incident which makes **Insured Person** missed a covered event and the original receipts for the ticket.

2. Where the cancellation is as a result of **Bodily Injury** or **Sickness** of an **Insured Person**, that **Bodily Injury** or **Sickness** must be certified by a **Qualified Medical Practitioner** as rendering that **Insured Person** unfit to participate in the covered event or as being a danger to their life or health.
3. Where the cancellation is as a result of mechanical fault and/or electrical failure as stated in P(3) above, written confirmation from the **Public Conveyance** carrier associated with the delay stating the actual local arrival time at the stated destination and the reason for the delay in reaching that destination is required.
4. Failure to provide the documents required by this condition precedent will result in **The Company** having no liability under this Section P for the **Insured Person's** actual loss of the covered cost mentioned under Section P which paid in advance or forfeited.

EXCLUSIONS TO SECTION P:

This Section P does not cover any amount which:

1. an **Insured Person** is not legally obliged to pay; or
2. Is refundable to, or recoverable by, an **Insured Person** from any other source of indemnity or reimbursement.

SECTION Q – CREDIT CARD PROTECTION

The Company will pay the **Insured Person** for the money for purchase made by any person (other than the **Insured Person**) using the **Insured Person's** credit card by fraudulent means, at shops or website during the **Period of Insurance** within (15) minutes of the purchase, up to the **Sum Insured** stated in Section Q of the **Schedule of Benefits**. Any claim must be accompanied by written documentation from the police having jurisdiction at the place of robbery or fraudulent purchase event occurs and is reported within twenty-four (24) hours of the loss.

GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS:

This Policy does not cover loss, consequential loss or liability arising from any of the following:

1. Any **Pre-Existing Condition**, congenital or heredity condition.

2. Travelling abroad contrary to the advice of a **Qualified Medical Practitioner**, or for the purpose of obtaining medical treatment or services.
 3. Suicide, attempted suicide or intentional self-infliction of **Bodily Injury**.
 4. Any condition resulting from pregnancy, abortion, childbirth, miscarriage, infertility and other complications arising therefrom, cosmetic surgery or venereal disease.
 5. Dental care.
 6. Mental or nervous disorders, insanity, psychiatric condition or any behavioral disorder.
 7. War (whether declared or not), invasion, act of foreign enemies, civil war, revolution, rebellion, insurrection, hostilities (whether war is declared or not).
 8. Direct participation in a strike/ riot/civil commotion or from the **Insured Person** performing duties as a member of armed forces, or armed service or disciplined forces (which shall include but not be limited to policemen, customs officers, firemen, immigration officers/inspectors and correctional service officers/inspectors etc.), or as a volunteer and engaged in war or crime suppression.
 9. Participation in: (a) professional sports events where an **Insured Person** would or could earn income or remuneration from engaging in such sport; (b) any stunt activity; (c) racing (except on foot); or (d) any kind of climbing or mountaineering necessitating the use of rope or guides.
 10. Prohibition or regulation by any government, or detention or destruction by customs or any other authority.
 11. An unlawful, willful, malicious or reckless act or omission of an **Insured Person**.
 12. The actions of an **Insured Person** while under the influence of alcohol or drugs to the extent of legal impairment.
 13. Riding in any aircraft other than as a passenger in an aircraft.
 14. Any dishonest or criminal activity.
 15. An **Insured Person's** failure to mitigate the loss.
 16. AIDS or AIDS Related Complex, any **Bodily Injury** or **Sickness** commencing at the time of or subsequent to a zero-positive test for HIV or related disease, or any other sexually transmitted diseases.
 17. The **Insured Person** engaging in manual labor or hazardous work including but not limited to offshore drilling, mineral extraction, handling of explosives, site working, stunt works and aerial photography.
 18. Any loss and expenses that can be reimbursed or recovered from any other source.
 19. **Pandemics** or epidemics.
 20. This Policy does not cover any loss or expenses with respect to Iran, North Korea, Syria, Sudan, Cuba or a specially designated person, entity, group or company on the **Specially Designated List** or which if reimbursed or paid by **The Company** would result in **The Company** being in breach of trade or economic sanctions or other such similar laws or regulations.
- For the avoidance of doubt, no (re)insurer shall be deemed to provide cover and no (re)insurer shall be liable to pay any claim or provide any benefit hereunder to the extent that the provision of such cover, payment of such claim or provision of such benefit would expose that (re)insurer to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, United States of America, Australia, the United Kingdom and/or any other applicable national economic or trade sanction law or regulations.

GENERAL PROVISIONS

1. ENTIRE CONTRACT

The **Certificate of Insurance**, Travel Insurance Terms and Conditions, and endorsements (if any) shall constitute the entire contract of insurance. No statement made by the applicant for insurance not included herein shall avoid the Policy or be used in any legal proceedings hereunder unless such statement is fraudulent. No agent has authority to change this insurance or to waive any of its provisions. No change in this insurance shall be valid unless approved by **The Company** and such approval is endorsed hereon.

ALLIANZ GLOBAL CORPORATE AND SPECIALTY SE HONG KONG BRANCH is the underwriter (insurer) of the insurance covers described in this booklet.

2. TIME OF NOTICE OF CLAIM

Written notice of loss on which a claim may be based must be given to **The Company** within thirty (30) days after the date of the incident

causing such loss and in the event of **Accidental** death, immediate notice thereof must be given to **The Company**.

3. FORMS FOR PROOF OF LOSS

The Company, upon receipt of such notice, will furnish to the claimant such forms as are usually furnished by it for filing proofs of loss. If such forms are not so furnished within fifteen (15) days after the receipt of such notice, the claimant shall be deemed to have complied with the requirements of this Policy as to proof of loss upon submitting within the time fixed in this Policy for filing proofs of loss, written proof covering the occurrence, character and extent of the loss for which a claim is made. All certificates, information and evidence required by **The Company** shall be furnished at the expense of the **Insured Person**/claimant or his legal personal representatives and shall be in such form and of such nature as **The Company** may prescribe.

4. TIME FOR FILING PROOF OF LOSS

Affirmative proof of loss must be furnished to **The Company** at its said office in case of a claim for such loss within sixty (60) days after the termination of the period for which **The Company** is liable. If it shall be shown not to have been reasonable possible to give such notice within such time, such proof is furnished as soon as reasonable possible and within one (1) year after the date of such loss.

5. SUFFICIENCY OF NOTICE

Such notice by or on behalf of the **Insured Person** given to **The Company**, with particulars sufficient to identify the **Insured Person** shall be deemed to be notice to **The Company**. Failure to give notice within the time provided in this Policy shall not invalidate any claim if it shall be shown not to have been reasonably possible to give such notice and that notice was given as soon as was reasonably possible.

6. IMMEDIATE PAYMENT OF INDEMNITIES

All indemnities provided in this Policy for loss other than that of time on account of disability will be paid immediately after receipt of due proof.

7. TO WHOM INDEMNITIES PAYABLE

Any indemnity paid for loss of life shall be payable to the **Insured**

Person's estate. All other indemnities shall be payable to the **Insured Person** except for Emergency Medical Evacuation and Repatriation of Mortal Remains where relevant amounts will be paid directly to the provider of service in accordance with the terms of this Policy.

8. FRAUDULENT CLAIMS

If the claim be in any respect fraudulent or if any fraudulent means or devices be used by the **Insured Person** or anyone acting on the behalf to obtain any benefit under this Policy, all benefit in respect of such claims shall be forfeited.

9. RIGHT OF RECOVERY

In the event that authorization of payment and/or payment is made by **The Company** and/or its **Authorised Assistance Service Provider** for a claim which is not covered under this Policy or when the limit of liability of this insurance exceeds, **The Company** reserves the right to recover the said sum or excess from the **Insured Person**.

10. RIGHTS OF THIRD PARTIES

Nothing in this Policy is intended to confer a direct enforceable benefit on any party other than the **Insured Person(s)** and **The Company**, whether pursuant to the Contracts (Rights of Third Parties) Ordinance or otherwise. It is hereby noted and agreed, however, that **The Company** and the **Insured Person(s)** named in the **Certificate of Insurance** alone have the right to amend this Policy by agreement or (if any such rights exist in the Policy) to cancel or terminate the Policy, without giving notice, or requiring the consent of any other person.

11. MEDICAL EXAMINATION AND TREATMENT

The Company at its own expense shall have the right and opportunity to conduct medical examination on the **Insured Person** when and as often as it may reasonably require during a pending claim under this Policy and to make an autopsy in the case of death where it is not forbidden by law. The **Insured Person** shall as soon as possible after the occurrence of any **Bodily Injury** or **Sickness** obtain and follow the advice of a duly Qualified Medical Practitioner and **The Company** shall not be liable for any consequences arising by reason of the **Insured Person's** failure to obtain or follow such advice and use such appliances or remedies as may be prescribed.

12. SUBROGATION

In the event of any payment under this Policy, **The Company** shall be subrogated to all the **Insured Person**'s rights of recovery therefore against any person or organization and the **Insured Person** shall execute and deliver instruments and papers and do whatever else is necessary to secure such rights. The **Insured Person** shall take no action after the loss to prejudice such rights.

13. LEGAL ACTIONS

No action at law or in equity shall be brought to recover on this Policy prior to the expiration of sixty (60) days after written proof of loss has been furnished in accordance with the requirements of this Policy. No such action shall be brought after the expiration of three (3) years after the time written proof of loss is required to be furnished.

14. LIMITATIONS CONTROLLED BY STATUTE

If any time limitation of this insurance, with respect to giving notice of claim or furnishing proof of loss, is less than that permitted by the law of **Hong Kong**, such limitation is hereby extended to agree with the minimum period permitted by such law.

15. COMPLIANCE WITH POLICY PROVISIONS

Failure to comply with any of the provisions contained in this Policy shall invalidate all claims hereunder.

16. POLICY INTERPRETATION

This Policy is subject to the laws of **Hong Kong** and the parties hereto agree to submit to the exclusive jurisdiction of the courts of **Hong Kong**.

17. ASSIGNMENT

No notice of assignment of interest under this Policy shall be binding upon **The Company** unless and until the original or a duplicate thereof is filed at the Home Office of Allianz Worldwide Partners (**Hong Kong**) Limited, Suite 304-306, 3/F., Cityplaza Four, 12 Taikoo Wan Road, Taikoo Shing, **Hong Kong** and **The Company**'s consent to such assignment is endorsed. **The Company** does not assume any responsibility for the validity of an assignment. No provision of the charter, constitution or by-laws of **The Company** shall be used in defense of any claim arising

under this Policy, unless such provision is incorporated in full in this Policy.

18. DATA PRIVACY

The **Insured Person**/Policyholder/Applicant agrees that:

- a) the personal data collected during the application process or administration of this Policy may be used by **Authorised Assistance Service Provider** **The Company** or by **The Company** for the purposes stated in its Data Privacy Policy, which include underwriting and administering the insurance policy being applied for (including obtaining reinsurance, underwriting renewals, data matching, claim processing, investigation, payment and subrogation).
- b) Allianz Worldwide Partners (Hong Kong) Limited may transfer the personal data to the following classes of persons (whether based in **Hong Kong** or overseas) for the purpose identified. Such persons may be located in other countries such as Mainland China, France and Switzerland. You agree that while those parties will often be subject to confidentiality or privacy obligations, they may not always follow the particular requirements of Hong Kong's privacy laws. This transfer of personal data may apply to:
 - i. third parties providing services related to the administration of this Policy, including reinsurers (per (a) above);
 - ii. financial institutions for the purpose of processing this Policy and obtaining policy payments (per (a) above);
 - iii. in the event of a claim, loss adjusters, assessors, third party administrators, emergency providers, legal services providers,
 - iv. medical providers and travel carriers (per (a) above); or
 - v. another member of the Allianz Worldwide Partners (for all of the purposes stated in (a) and (b)) in any country.
- c) **The Insured Person**/Policyholder/Applicant may gain access to, or request correction of his/her personal data (in both cases, subject to a reasonable fee), or change the option he/she previously elected in relation to the use of his/her contact details for direct marketing at any time, by writing to the Privacy Compliance Officer of Allianz Worldwide Partners (Hong Kong) Limited at Suite 304-306, 3/F, Cityplaza Four, 12 Taikoo Wan Road, Taikoo Shing, Hong Kong. The same addresses may be used to contact Allianz

Worldwide Partners (Hong Kong) Limited with any comments in relation to the services it provides.

19. CLERICAL ERROR

Clerical errors by **The Company** shall not invalidate insurance otherwise valid nor continue insurance otherwise not valid.

20. AGE RESTRICTION

The age of **Insured Person** should be between 60 days and 85 years old (both dates inclusive), unless otherwise stipulated in any specific sections under these terms and conditions.

21. CANCELLATION

For Single Trip

No refund of premium will be allowed once the Policy is issued unless the trip is cancelled by the travel agent before the Departure Date,

For Annual Cover

The Policy may be cancelled by giving **The Company** written notification, in which case the prorated portion of the premium paid shall be refunded as per the refund premium table below, provided no claim has occurred and made in respect of the Annual Cover.

Calendar Months since Effective Date	Refund Premium
Up to one (1) month	60% of premium paid
Up to two (2) months	50% of premium paid
Up to three (3) months	30% of premium paid
Up to four (4) months	10% of premium paid
Over four (4) months	No refund

The Company may cancel the Policy by giving seven (7) days' notice by registered letter to **the Insured Person's** last known address. A proportionate part of the premium may be refunded.

22. POLICY LANGUAGE

The terms and conditions in the Chinese policy wording is translated from this English version only for your reference. Should there be any inconsistency between Chinese and English versions in policy wording, the English version shall prevail.

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旅遊保險條款及條件

當Allianz Global Corporate & Specialty SE Hong Kong Branch (以下稱為“本公司”)收妥保費後，即依據本保單或批註內或附件所載的的定義、不受保事項、限制、規定和條款，同意承保名字列於保險證明書內之受保人及根據本保單的條款和條件對在**受保期間**內所出發和發生的**旅程**之損失作出賠償。有關您的保障的詳情，請參考**保險證明書**內的**保障表**。

本公司委任**安聯全球救援**為其**授權救援服務提供者**，為您提供索償和支援服務，與及管理您的保單。

保險證明書、**旅遊保險**的條款及條件和批註(如有者)將構成完整的保險契約(以下稱為「**保單**」)。請您務必細讀及列印一份**保險證明書**及**旅遊保險**的條款及條件，並留意適用於所有章节的**一般不受保事項**及**一般條款**。

詞彙釋義:

在本保單內，下列詞彙應具有以下涵義：

「**意外**」指突然、不可預見及預料之突發事件。

「**安聯全球支援 (AGA)**」指Allianz Worldwide Partners (Hong Kong) Limited 的營商品牌，為一間根據香港法律正式註冊的法律實體。

「**全年保障**」指**保險證明書**中指定的期間，及您已支付而我們已接受續保保費的任何後續期間。保險只於在**保險期**內從香港出發並返回香港的不超過九十(90)天的任何單次來回**旅程**。

「**授權救援服務提供者**」指由本公司任命的獨立服務提供者向受保人提供海外援助服務。

「**黑色外遊警示**」指由香港保安局於「外遊警示制度」下就旅遊目的地發出的**黑色外遊警示**。就此定義，本公司會配合**香港保安局**就「外遊警示制度」的修訂不時作出修改。

「**身體損傷**」指純粹及獨立地由**意外**造成並於**受保期間**發生的生理傷害。

「**商業夥伴**」指一名或多名人與**受保人**從事同一商業企業並共享利潤及分擔風險的人仕。

「**保險證明書**」指發給**受保人**的列明保障詳情(包括保障表)的文件。

「**中醫**」是指一位跌打、針灸或中醫師根據中醫藥條例(香港法例第549章)合法註冊成為中醫，但是若果中醫為**受保人**本人或其**親屬**則除外。

「**本公司**」指Allianz Global Corporate & Specialty SE Hong Kong Branch。

「**住院**」是指**受保人**因醫療需要被**醫院**接收為**住院病人**以接受**執業醫生**專業護理的期間，並就相關住院的受傷或疾病須治療向醫院支付病房及膳食費用。

「**出發日期**」指**受保人**從**香港**出發前往目的地的日期。

「**生效日期**」指**保險證明書**上**保險期**開始之日。

「**屆滿日期**」指**保險證明書**上**保險期**完結之日。

「**家庭**」是指保單持有人、其**受保旅程**同行之合法配偶及年齡由60天至17歲的子女(子女人數不限)。

「**香港**」指香港特別行政區。

「**醫院**」指依法運作的**醫院**(不包括用作照顧老人或長期病患者的機構或療養、休養或護理機構、或酗酒或吸毒者治療所，或類似目的機構)，用以照顧及治療患病或受傷人，設有診斷及施行手術的設施，並提供24小時護理服務及醫療監察。

「**家居財物**」指被爆竊時由**受保人**擁有且位於其主要住所的財物，惟不包括鑽石、寶石、古董、名畫、藝術品、珠寶和配飾(包括但不只限於例如水晶、耳環、項鏈、戒指或領針等)或現金。

「**親屬**」是指**受保人**的配偶、父母、配偶之父母、祖父母、子女、兄弟姊妹、孫兒或合法監護人。

「**受保人**」是指名字列於**保險證明書**內或隨後批註內之**受保人士**(如有)。

「**旅程**」每當於本保單中使用時是指**受保人**為開始其**受保旅程**於出發日期離開香港入境櫃檯開始，至 (i) **保險證明書**述明的**屆滿日期**; 或 (ii) **受保人**於**受保旅程**後返回香港並到達任何入境櫃檯為止(以較早者

為準)的旅遊期間。

「失聰」是指永久完全及無法恢復失去的全部聽力，耳部無法透過手術或其他治療治癒。

「喪失肢體」是指永久完全及無法恢復失去功能或因損傷引致其自手腕或足踝關節以上從身體分離而不能使用有關肢體。

「失明」是指永久完全及無法恢復失去的全部視力，眼睛無法透過手術或其他治療治癒。

「喪失語言能力」是指永久完全及無法恢復失去的全部語言能力，無法透過手術或其他治療治癒。

「醫療設備」是指以下醫療設備或醫療器具：輪椅，義肢，眼鏡，拐杖，步行架，矯形支架和支架，頸環和助聽器，經執業醫生證明為醫療上必需的，以改善受保人身體因受傷或疾病造成的病情。

「醫療費用」是指受保人因遭受身體損傷或患病，於接受住院、手術、醫療或由執業醫生給予或處方的其他診斷或治療，包括聘請護士、X光檢查或因緊急情況使用救護車而必須引致的所有正常、合理及慣常的醫療費用。

「流動設備」指便攜式電腦設備，如智能手機，筆記本電腦或平板電腦。

「大流行病」是指有關流感流行病毒擴散規模遍及世界各地，並導致大部份人類感染的一種流行病。

「保險期」(就單次來回行程而言)是指：

- a) 就章節E — 取消旅程而言，保險期由保險證明書所示的保單發出日期或出發日期前三十(30)日開始(以較遲者為準)。保障於出發日期時旅程開始的時候屆滿。
- b) 就章節E — 取消旅程以外的各章節而言，保險期由出發日期旅程開始的時候開始。保障於以下任何一項發生時屆滿(以較早者為準)：
 - i. 保險證明書所示的屆滿日期；
 - ii. 您返抵香港；
 - iii. 當保險人認為您應返回香港接受治療。

對於上述(a)和(b)項，如果本保險範圍內的任何事件不可避免地延遲了受保旅程，則保險將自動延長最多十四(14)個日曆日。保險期若不包括延長日計算最多不得超過一百八十二(182)日。

「保險期」(就全年保障而言)是指：

- a) 就章節E — 取消旅程而言，保險期從您安排旅程時起至出發日期旅程開始的時候有效。
- b) 就章節E — 取消旅程以外的各章節而言，保險期由出發日期旅程開始的時候開始。保障於以下任何一項發生時屆滿(以較早者為準)：
 - i. 保險證明書所示的屆滿日期；
 - ii. 您於旅程出發日期後不超過九十(90)天返抵香港；
 - iii. 當保險人認為您應返回香港接受治療。

「永久」指由意外發生之日期起喪失功能連續十二(12)個月，且於該期間結束時情況仍無改善希望。

「永久完全傷殘」是指由意外發生之日九十(90)天後變成傷殘，且屬永久及完全妨礙受保人從事任何類型的業務或有薪工作，或倘受保人沒有從事任何業務或工作，則指完全不能進行其日常一般會進行的活動。

「個人行李」指您的行李、行李箱及類似容器，包括其存放的物品或您穿戴或攜帶的物品，包括您的貴重物，但不包括任何相機和配件、手機、智能手錶、單車、商業樣本或您計劃交易的物品、護照或旅遊文件、現金、鈔票、紙幣、支票、可轉讓票據、任何類型的船隻(衝浪板除外)、傢俬、家具陳設、家居電器、租用品或任何其他於您的保險證明書列為不包括的物品。

「受保前已存在之傷病」指受保人、親屬、同行夥伴或商業夥伴於本保單生效日期前接受執業醫生治療或建議並引致本保單項下索賠的任何情況，治療或建議指：a)任何藥物治療；b)任何確診；c)任何醫療意見；或d)任何處方藥物；或於生效日期前已存在並引致本保單項下索賠的任何病徵。

「主要住所」指受保人於香港的主要居住地點。

「公共交通工具」指由領有牌照可以出租方式運載乘客的公司或個人營運並以機械推動的任何運載工具。

「執業醫生」指在提供治療所處司法管轄區的主管醫療當局已向其發出牌照的合資格執業的醫生，並提供其牌照及接受培訓的範圍內的醫療服務，惟有關人士不包括受保人及親屬。

「紅色外遊警示」指由香港保安局於「外遊警示制度」下就旅遊目的地發出的紅色外遊警示。就此定義，本公司會配合香港政府保安局就「外遊警示制度」的修訂不時作出修改。

「出租汽車」是指從授權汽車租賃公司或機構租用的不超過 4.5 噸的露營車/房車、轎車、轎跑車、兩廂車、旅行車、越野車、四輪驅動或小巴/捷運。

「住院病人」指因**身體損傷**或**患病**必須作為住院病人住院接受醫療、診斷及治療的**受保人**（而並非僅是接受任何形式的護理、療養、康復、休養或延展看護）。

「保障表」指本保單的保障計劃表。

「患病」指於**保險期**身體不適或罹患疾病。

「單次來回行程」指為單次不超過九十（90）天的旅程提供的保障，而保障的詳情列明於保險證明書。

「特別指定名單」指於美國、澳洲、聯合國、歐盟、香港或英國之經貿制裁或其他近似的法律或條例內相關的名單上所列之人士、實體、團體或企業。「**投保額**」指就**受保人**根據保障表於本保單下可享用的各項保障而言，在**保障表**或任何相應批註中所列最高金額。

「病徵」指一名人士出現失調或染病的跡象或症狀。

「同行夥伴」是指在整個**旅程**中與**受保人**同行的人士。

「正常、合理及慣常的醫療費用」指以下的費用是：
（1）在**執業醫生**照料、監督或命令下為照料**受保人**和醫療所需而使用的治療、藥物或醫療服務；（2）在局部地區引出的治療、藥物或醫療服務，其收費不超出類似項目的正常水平；及（3）不包括當沒有保險時將不會收取的費用。

保障項目說明

本公司根據就涉及**受保人**於**受保期**內發生的事故而於項下各個保障章節承擔的最高責任限額不可超過相關**投保額**（列明於**保險證明書**的**保障表**）。

章節 A — 個人意外

1. 乘搭公共交通工具時發生的意外（適用於年齡為**17歲**至並包括**75歲**的人士）：

若**受保人**（於**受保期間**首日其年齡為十七(17)歲至並包括七十五(75)歲），以繳費乘客身份乘搭**公共交通工具**或乘坐旅行代理安排的交通工具時遭受身

體損傷，而直接及無可避免地於連續十二(12)個月內蒙受本**章節 A** 的**損傷表**上列任何類別的損失，**本公司**將按照本**章節 A** **損傷表**上所列損失類別的百分比，支付**保障表** **章節 A(a)** 所列**投保額**。

2. 其他意外（適用於年齡為**17歲**至並包括**75歲**的人士）：

若**受保人**（於**受保期間**首日其年齡介為十七(17)歲至並包括七十五(75)歲），遇上上**文章節 A(a)** 所載者以外的意外並遭受**身體損傷**，而直接及無可避免地於連續十二(12)個月內蒙受本**章節 A** 的**損傷表**上列任何類別的損失，**本公司**將按照本**章節 A** 的**損傷表**上所列損失類別的百分比，支付**保障表** **章節 A(b)** 所列**投保額**。

3. 意外（適用於年齡為**17歲**以下或**75歲**以上的人士）：

若**受保人**（於**受保期間**首日其年齡為十七(17)歲以下或七十五(75)歲以上）因遭受**身體損傷**，而直接及無可避免地於連續十二(12)個月內蒙受本**章節 A** 的**損傷表**所列任何類型的損失，**本公司**將按照本**章節 A** 的**損傷表**上所列損失類別的百分比，支付**保障表** **章節 A(c)** 所列**投保額**。

章節 A 損傷表

	損害事項	投保額百分比
1	死亡	100%
2	永久完全傷殘	100%
3	永久及無法痊癒之四肢癱瘓	100%
4	雙眼永久完全失明	100%
5	喪失任何雙肢或任何雙肢永久完全殘廢	100%
6	永久喪失說話能力	100%
7	永久完全失聰	
	a) 雙耳	75%
	b) 單耳	15%
8	一眼永久完全失明	50%
9	喪失任何一肢或任何一肢永久完全殘廢	50%

章節 A 的特別條款：

1. 假若**受保人**在同一**次意外**中遭遇超過一類**章節 A** 的**損傷表**所列的損失，**本公司**於本**章節 A** 的責任僅限於支付一種損失類別，即根據所有實際遭遇的損失類別中，在本**章節 A** 的**損傷表**列百分比為最高的一種損失類別，而支付**保障表** **章節 A** 所列相關**投保額**。

2. 假若**受保人**的肢體或器官於**意外**發生前在運用上或感覺上已部分受損，則**本公司**可按其絕對酌情權決定及經考慮由**本公司**委任的醫療顧問所作的醫療評估後，按醫療顧問的意見認為純粹及單獨由該**意外**導致的任何身體損傷程度，支付其認為合理的相關**投保額**百分比。**本公司**不會就**意外**發生前完全不能運用的肢體或器官支付費用。
3. 風險：假若**受保人**因遭遇**身體損傷**而不可避免地暴露於致命風險因素，以及因此直接及不可避免地導致於連續十二(12)個月內身故，**本公司**將按照本**章節A**的**損傷表**內**意外**死亡所列百分比，支付**保障表****章節A**所列相關**投保額**。
4. 失蹤：倘若**受保人**在**受保旅程**期間遇上**意外**，導致其乘坐的**公共交通工具**失蹤、沉沒或失事及**受保人**失蹤，而在**意外**當日起計十二(12)個月後**受保人**仍然失蹤時，並**本公司**有理由相信**受保人**已在**意外**中死亡，**本公司**將支付個人**意外**保障，惟必須先收到由**受保人**的遺產代理人簽署的承諾書，承諾如果日後發現**受保人**沒有因該**意外**死亡，**本公司**將獲所支付金額的退還。

章節 A 的不受保事項：

本**章節A**並不保障因**患病**、**疾病**或**細菌感染**造成的受傷或任何種類病症原而招致的損失。

章節 B — 醫療費用

1. 醫療費用：

若**受保人**於**受保期間**內因**身體損傷**或**患病**而引致**醫療費用**，**本公司**將向**受保人**賠償有關**醫療費用**，惟金額上限為**保障表****章節B**所列**投保額**。

2. 覆診醫療費用：

若**受保人**因**身體損傷**或**患病**而在海外引致**醫療費用**，返回**香港**後，**受保人**仍須就同一**身體損傷**或**患病**在**香港**持續求診，由**執業醫生**及／或**中醫師**給予治療或處方藥物，則**本公司**將繼續向**受保人**賠償因在**香港**接受診治而引致的**醫療費用**，直至**受保人**返回**香港**後九十(90)日內，包括**醫療費用**直至用盡**保障表****章節B(a)**「覆診醫療費用」所載按求診次數及日數所列之**投保額**。特別是就**中醫師**給予治療，**本公司**將繼續向**受保人**賠償在**香港**接受診治而引致的**醫療費用**，直至用盡**保障表****章節B(b)**「**中醫師**最高賠償額」所列之**投保額**（惟此等**醫療費用**須提供**中醫師**發出的收據），或直至用盡**保障表****章節B(b)**所列**投保額**，以較早者為準。

章節 B 的特別條款：

1. 於**受保期間**於海外作為**住院病人**並引致的任何**醫療費用**，須在引致費用時起計三十(30)天內通知**本公司**或**授權救援服務提供者**。如未能按照此項先決條款規定而發出通知，**本公司**恕不承擔本保單項下有關**醫療費用**的任何責任。
2. 由**中醫師**收取的每日最高金額應為**保障表**的第**B(b)(ii)**項所列金額。

章節 B 的不受保事項：

本**章節B**並不保障：

1. 於支付**旅程**費用當時已包括或預期的任何費用。
2. 按照診治**受保人**的**執業醫生**認為，可合理地延遲至**受保人**返回**香港**後才接受的手術或醫治。
3. **受保人**未有於合理時間內遵循**執業醫生**的意見，返回**香港**繼續治療於海外遭受的**身體損傷**或**患病**，因而而在其後引致的任何費用。
4. **受保人**在**旅程**出發前，經**執業醫生**診斷認為不適宜旅行後，他／她在**旅程**內引致的任何費用。
5. 在該遭受的**身體損傷**或**患病**的**受保期間**結束後九十(90)天以外引致的任何覆診費用。
6. 引致首次費用之日期起計十二(12)個月後根據**章節B**引致的任何費用。
7. 健康檢查或任何並非與入院診斷、**身體損傷**或**患病**直接有關的檢驗，或並非醫療上必需的任何治療或檢驗。
8. 義肢、隱形眼鏡、眼鏡、助聽器、假牙及其他**醫療設備**或眼科治療的費用，除非為根據**章節B(a)**的有效索償。

章節 C - 醫院現金津貼

受保人於海外因**身體損傷**或**患病**而直接和不可避免需要**住院**時，**本公司**將向**受保人**按**保障表**第**C**()項所列支付津貼，最多為**保障表****章節C**所列的**投保額**。

章節 C 的特別條款：

根據**章節C**項支付津貼的款項只能在**住院**結束之後方能發放。

章節 C 的不受保事項：

本章節C並不保障：

1. 受保人返回香港後的任何住院。
2. 因章節 C 節所載及發生的任何住院，由章節 B 項所列的**身體損傷**或**患病**造成除外。

章節 D — 24 小時環球支援服務

1. 緊急醫療運送及／或運返：

i. 當**授權救援服務提供者**指定的**執業醫生**證實受保人的**身體損傷**或**患病**令其不適宜旅行或繼續其旅程或危及其生命或健康，以及在受保人受**身體損傷**或**患病**後受保人已經被送往最近的醫院或近處接受治療，而該處並無提供所須之治療，本公司可在**執業醫生**認為在醫療上適宜運送受保人的情況下，全權決定將受保人運送往其他地點接受所需治療。

ii. **授權救援服務提供者**將於合理時間內安排運送，以及按照受保人狀況的醫療嚴重性，以最合適方式運送受保人，包括但不限於空中救護車、陸上救護車、定期航班、鐵路或其他合適交通工具。

iii. 運送的工具及最終目的地將由**授權救援服務提供者**決定，並完全以醫療必要性作決定。在適當情況下，受保人可能被送返香港。

iv. 本公司將直接向**授權支援服務提供者**支付受保人的緊急醫療運送及／或運返、相關醫療服務及醫療物品的實際費用。

2. 遺體運返香港：

於受保人因**身體損傷**或**患病**而直接及不可避免地導致其身故時，本公司將支付由**授權救援服務提供者**批准把受保人的遺體由死亡地點運返香港的費用，其為不得超過**保障表**章節D (b) 所述的**投保額**。

3. 海外殯葬服務：

於受保人因**身體損傷**或**患病**而直接及不可避免地導致其身故時，本公司將支付由**授權支援服務提供者**批准於死亡地點當地殯葬的合理費用，其為不得超過**保障表**章節D (c) 所述的**投保額**。

4. 親友探望：

若**執業醫生**證實受保人的**身體損傷**或**患病**令其不適宜旅行或繼續其旅程，因而需於當地醫院治療而預計會住院超過七(7)天，本公司將支付：(i) 一(1)張來回經濟客位機票的費用予一(1)位親屬前往探望於海外的受保人；及(ii)於海外酒店內的一(1)間普通客房的合理住宿費用，但不包括飲料、膳食及其他房間服務的費用，惟金額上

限為**保障表**章節D(d)所列**投保額**。

5. 親友回程

若受保人的親屬遇到**身體損傷**或**患病**而直接導致其於受保旅程在香港身故時，本公司將賠償合理且必要的(1)張來回經濟客位機票的費用予受保人以往返香港，惟金額上限為**保障表**章節 D(e)項所列**投保額**。

6. 青少年回程：

i 當受保人因**身體損傷**或**患病**而直接及不可避免地令其住院，**執業醫生**證實其不適宜旅行或繼續其旅程或危及其生命或健康；及

ii 而該受保人伴隨的兒童亦為受保人及年齡以受保期間之首日起計少於十七(17)歲；及

iii 該兒童由於受保人須住院至使有被無人看顧的風險。

本公司將根據**保障表**章節D (f) 節所述的**投保額**，安排並支付購買一張經濟艙單程機票，及以備護送服務，讓該兒童被護送回香港。

章節 D 的特別條款：

1. 本章節D的服務由**授權救援服務提供者**提供。若發生根據章節D (a)至(f)可能導致潛在索償的任何事件，須立即通知本公司或**授權支援服務提供者**。如未能發出本特別條款規定的通知，本公司恕不承擔於保單本章節下的任何責任。

2. 緊急醫療撤離及返國運送的安排、方式及最終目的地將由**授權救援服務提供者**決定，並完全以醫療必要性作決定。

3. 本公司根據本章節D支付款項後，本公司有權收取來自原有回程機票的任何應退還款項。

章節 D 的不受保事項：

本章節D並不保障任何：

1. 於支付**旅程**費用時已包括或預期的費用。

2. 受保人在**旅程**出發前，經**執業醫生**診斷認為不適宜旅行後，他／她在**旅程**內引致的費用。

3. 由其他人士提供服務而產生的費用，該等費用受保人並不須負責的。

4. 並非由**授權救援服務提供者**批准及安排的服務而產生的費用。

5. 非由**執業醫生**給予或處方的治療。
6. 可合理地延遲至**受保人**返回**香港**後才接受治療而產生的費用。

章節 E — 取消旅程

倘在**受保旅程出發日期**前三十（30）天內發生下列任何事件（第3至6項除外），而**受保旅程**必須取消，及**受保人**已預先支付旅遊開支並對其承擔法律責任，而該責任不能經任何其他來源來彌補，本公司將賠償有關損失給**受保人**，賠償金額不超過保障表所載的相應投保額：

1. **受保人、親屬、擬定同行夥伴或商業夥伴死亡、身體損傷或患病**；
2. **受保人**被傳召擔任證人、出任陪審員或強制隔離；
3. 在**原定受保旅程出發日期**前一（1）星期，**公共交通工具**的僱員突然罷工、目的地爆發不能預料的暴亂或內亂；
4. 在**原定受保旅程出發日期**前一（1）星期，**受保人**或**同行夥伴**的**香港主要住所**因火災、水浸、地震或類似天災被嚴重損壞，因此需要**受保人**在**出發日期**出現在其住所。
5. 於保單生效不少於一（1）天後，在未能預計的情況下**旅程**的計劃目的地被發出**黑色外遊警示**，而此**黑色外遊警示**在**旅程**計劃開始日期前一（1）週內的任何時間內生效，導致**旅程**必須取消。
6. 於保單生效不少於一（1）天後，在未能預計的情況下**旅程**的計劃目的地被發出**紅色外遊警示**，而此**紅色外遊警示**在**旅程**計劃開始日期前一（1）週內的任何時間內生效，導致**旅程**必須取消。

章節 E 的特別條款：

1. 若**旅程**取消是由於**受保人、親屬、擬定同行夥伴或商業夥伴**的**身體損傷或患病**，該**身體損傷或患病**須得到**執業醫生**證明該**身體損傷或患病**令**受保人、親屬、擬定同行夥伴或商業夥伴**不適宜旅行或危及其生命或健康。
2. 如未能提供此項先決條件規定的證明，本公司恕不承擔在**章節E**項**受保人**因預付或被沒收的旅行及/或住宿費用所引致損失的責任。

章節 E 的不受保事項：

本章節E並不保障因下列原因引致的交通及/或住宿

費用的全部或任何部分：

1. **受保人**可從任何其他途徑獲得彌償或賠償退款或收回款項。
2. **受保人**並無法律責任需支付的任何款項。
3. 由於任何國家、地區或地方政府頒發禁令或規例而直接或間接取消。
4. 由於已接受**旅程**預訂的旅行代理的疏忽、行為失當或無力償債而取消。
5. 由於人數不足導致旅遊經營商或批發商無法令旅行團成行而取消。
6. 由於**受保人**出現財務困難；或**受保人**的情況或所承擔的契約責任改變；或**受保人**不願繼續**旅程**而直接或間接取消。
7. 因在預訂**旅程**時，已存在或於當時可合理地預期可能導致**旅程**取消的情況所致的損失。
8. 香港保安局在**受保人**旅遊保險生效日期之前就針對旅行目的地發出**黑色外遊警示**或**紅色外遊警示**的任何旅遊。

章節 F — 旅程中斷

A) 提早結束旅程

因下列原因使**受保人**必須終止及縮短**受保旅程**並返回**香港**時，對於未被使用及不獲發還的旅遊支出，本公司將賠償**受保人**，賠償金額不超過**保障表**章節 F(a) 所載的相應投保額：

1. **受保人、親屬、同行夥伴或其商業夥伴死亡、身體損傷或患病**；
2. **公共交通工具**的僱員突然罷工、爆發不能預料的暴亂或內亂、天災或大規模流行性疾病，使**受保人**無法繼續原定**受保旅程**。
3. 於保單生效日期後，在未能預計的情況下**旅程**的計劃目的地被發出**黑色外遊警示**，而此**黑色外遊警示**在**旅程**計劃開始日期後及**旅程**計劃結束日期前的任何時間內生效，使**受保人****旅程**中斷。
4. 於保單生效日期後，在未能預計的情況下**旅程**的計劃目的地被發出**紅色外遊警示**，而此**紅色外遊警示**在**旅程**計劃開始日期後及**旅程**計劃結束日期前的任何時間內生效，使**受保人****旅程**中斷。

B) 更改行程：

假若**旅程**必須更改行程，事由在受保期間目的地未能預期發生公共交通工具職員罷工、暴亂、內亂，惡劣天氣、天然災難或傳染病，致使阻礙**受保人**繼續其**旅程**；**本公司**將以不超過**保障表 F(b)**所列的**投保額**賠償**受保人**因要繼續前往原本目的地而引致額外合理和必要的的交通費及/或住宿費。

章節 F 的特別條款：

1. 若**旅程**提早結束是由於**受保人**、**親屬**、**擬定同行夥伴**或**商業夥伴**的**身體損傷**或**患病**，該**身體損傷**或**患病**須得到**執業醫生**證明該**身體損傷**或**患病**令**受保人**、**親屬**、**擬定同行夥伴**或**商業夥伴**不適宜旅行或危及其生命或健康。
2. 如未能提供此項先決條件規定的證明，**本公司**恕不承擔根據**保障表**章節**F**項賠償損失的責任。

章節 F 的不受保事項：

本章節**F**並不保障因下列原因致使未享用**旅程**部份或**受保人**在繼續前往原本目的地而引致額外的交通費及/或住宿費的全部或任何部分的費用：

1. **受保人**可從任何其他途徑獲得彌償或賠償退款或收回款項。
2. 由於任何國家、地區或地方政府頒發禁令或規例而直接或間接作成。
3. 由於已接受**旅程**預訂的旅行代理的疏忽、行為失當或無力償債而作成。
4. 由於人數不足導致旅遊經營商或批發商無法令旅行團成行而作。
5. 由於**受保人**出現財務困難；或**受保人**的情況或所承擔的契約責任改變；或**受保人**不願繼續**旅程**而直接或間接作成。
6. 因在預訂**旅程**時，已存在或於當時可合理地預期可能導致**旅程**受阻的事件或情況所致的損失。
7. 香港保安局在**受保人**旅遊出發日期之前就針對旅行目的地發出**黑色外遊警示**或**紅色外遊警示**的任何旅遊。
8. 根據同一原因或事件引致**旅程** - 旅程延誤下的索償。

章節 G — 旅程延誤

假若在**受保期間**因出現惡劣天氣、自然災難、涉及**公共交通工具**營運商的僱員罷工、**公共交通工具**機件故障或遭到劫持造成**公共交通工具**延誤行程，**本公司**將按**保障表**章節**G**所列金額賠償，惟以**G(a)**項所列**投保額**為上限。

章節 G 的特別條款：

1. 各段延誤期間將參照**受保人**旅程的原定**旅程表**計劃抵達同一目的地的當地時間，與**受保人**實際抵達同一目的地的當地時間之間的差異計算。
2. 若行程涉及轉乘飛機，則總延誤時間將參照**受保人**行程的原定**旅程表**中最後轉乘航班的原定計劃抵達最終目的地的當地時間與實際抵達最終目的地當地時間之間的差異計算。
3. **受保人**須採取合理措施減少任何延誤時間。如未能按照此項先決條件的規定採取合理措施減少任何延誤時間，**本公司**恕不承擔本章節**G**的任何責任。
4. 任何根據本章節**G**提出的索償，須附上來自發生延誤的相關**公共交通工具**的運載乘客公司的確認書，當中須列明實際抵達所列目的地的當地時間及發生延誤抵達該目的地的原因。如未能提供此項先決條件規定的確認書，**本公司**恕不承擔本章節**G**的任何責任。

章節 G 的不受保事項：

本章節**G**並不保障下列損失：

1. **受保人**因延遲抵達其**旅程**的原定**旅程表**所列任何出發地點所引致的損失，但由於在**保險期**內**公共交通工具**營運商的僱員罷工造成延遲抵達所致的損失除外。
2. 因在購買本保單前已宣佈且於當時可合理地預計可能導致**旅程**延誤的事件或情況所致的損失。
3. 已根據**保障表** - 旅程中斷的損失索償。
4. **受保人**並無法律責任需支付的任何款項。

章節 H — 遺失旅遊證件

本公司將向**受保人**補償：

1. **受保人**於**受保期間**內補領因遺失或被盜且如不補領則會導致**旅程**延誤的**出入境**檢查所需**旅遊證件**及/或**車船機票**的費用；及/或
2. **受保人**僅為安排補領上述第1點所提及的**旅遊證件**

及／或車船機票而引致的合理額外旅遊費用及／或必須的住宿費用，惟金額上限為**保障表**章節H所列**投保額**。

章節 H 的特別條款：

1. 假若發生任何可能導致本章節H的索償事件，須在發生有關事件的二十四(24)小時內通知當地警方或相應的當地執法人員。如未能發出此項先決條款規定的通知，**本公司**恕不承擔本章節H的任何責任。
2. 根據本章節H提出的任何索償須附上顯示已向警方或相應的當地執法人員報告損失的書面證明。如未能提供此項先決條款規定的書面證明，**本公司**恕不承擔本章節H的任何責任。

章節 H 的不受保事項：

本章節H並不保障因**受保人**疏忽所致的損失，當中包括但不限於將出入境檢查所需的旅遊證件及／或車船機票置於無人看管狀態。

章節 I — 行李遺失或損毀

就實際損耗、折舊或報廢進行扣減或撥備後，**本公司**將按其絕對酌情權對於在**受保期間**內遺失或被盜或損毀的每件**個人行李**進行修復、修理或更換，惟上限為**保障表I(a)**章節所列**投保額**。

章節 I 的特別條款：

1. 假若發生任何**個人行李**遺失、被盜或因第三方的蓄意行為而損毀的情況而可能導致本章節I的索償的事件，須在發生有關事件的二十四(24)小時內通知當地警方或相應的當地執法人員。提出的索償須附上顯示已向警方或相應的當地執法人員報告損失的書面證明，及證明**受保人**擁有遺失、被盜或損毀的**個人行李**及其購買價值的收據或其他相關文件。如未能發出此項先決條款規定的通知及書面證明，**本公司**恕不承擔本章節I的任何責任。
2. 假若遺失、盜竊或損毀在運送時發生，須於發現遺失或損毀起計二十四(24)小時內，立即將有關遺失或損毀通知**公共交通工具**的承運人。如未能發出此項先決條款規定的通知，**本公司**恕不承擔本章節I的任何責任。
3. **本公司**對於在**受保期間**內遺失、盜竊或損毀的每件**個人行李**的最大責任，將以**保障表I(a)**項所列金額為限。
4. 假若任何一件遺失、被盜或損毀的**個人行李**為一對

或一套物品的一部分，**本公司**對該件及該對或該套物品的最大責任，將以**保障表**第I(a)項所列金額為限。

5. 於根據本章節I支付任何款項後，**本公司**有權取得及保留從任何其他途徑獲得彌償或賠償有關任何尋回或損毀的**個人行李**的利益及價值，並按其絕對酌情權處理剩餘價值。

章節 I 的不受保事項：

本章節I並不保障：

1. 因**受保人**疏忽所致的遺失、被盜或損毀，當中包括但不限於將**個人行李**置於無人看管的狀態。
2. **個人行李**因被置於汽車（鎖於車尾箱除外）或**公共交通工具**內或其他公共地方且無人看管而導致任何原因不明的遺失、被盜或損毀。
3. 屬於以下類別的財產：商業貨品或樣本、食品、動物、機動車輛（包括配件）、電單車、單車、船隻、摩打、任何其他運輸工具、家用傢俱、古董、珠寶首飾或飾物、手提電話（包括個人數碼助理電話及其他配件）、**流動設備**、智能手錶、金錢（包括支票、旅行支票等）、塑料貨幣（包括具信貸價值的信用卡、八達通卡等）、證券、門票或文件。
4. 任何**個人行李**因蟲蛀、蟲蝕、磨損、大氣或氣候狀況、逐漸損耗、機件或電力故障、任何清潔、修復、修理、改造的程序、海關或任何其他機關的充公、扣押或銷毀而導致的遺失或損毀。
5. 租借或租賃設備。
6. 在**旅程**前託運或單獨郵寄或以**公共交通工具**（而非同時運載**受保人**的**公共交通工具**）運載的任何**個人行李**的遺失、被盜或損毀。
7. 已根據章節J – 行李延誤就同一事件提出索償的損失。

章節 J — 行李延誤

於**受保期間**內，假若**個人行李**在**受保人**抵達**受保人****旅程**原定**旅程表**所列目的地的機場後，因**公共交通工具**延誤、誤送或暫時丟失**保障表**所列明的時間，**本公司**將向**受保人**補償購買必需盥洗用品及衣物的費用（下稱「必需品」），惟上限為**保障表**章節J所列**投保額**。

章節 J 的特別條款：

1. 根據章節J提出的任何索償，須附上承運人就有關個

人行李在受保人抵達受保人有關旅程的原定旅程表所列目的地的機場後延誤、誤送或暫時丟失保障表所列明的時間而發出的確認書，及證明購買必需品的價值的收據。如未能提供此項先決條款規定的確認書，本公司恕不承擔本章節J的任何責任。

章節 J 的不受保事項：

本章節J並不保障因下列原因購買必需品費用：

1. 受保人已收取或準備收取承運人或營運商對個人行李的延誤、誤送或暫時丟失負責的所作出賠償。
2. 個人行李的延誤、誤送或暫時丟失發生在受保人返回香港中時或之後。
3. 個人行李的延誤、誤送或暫時丟失屬於原因不明或因海關或任何其他機關充公或扣押而導致。
4. 於有關旅程前託運或單獨郵寄或以公共交通工具（而非同時運載受保人的公共交通工具）運送的個人行李。
5. 已根據章節I個人行李提出索償且因同一原因或事件所致。

章節 K — 個人金錢遺失

本公司將對在受保期間內所發生受保人的現金、銀行鈔票或旅行支票因爆竊、被盜或被劫引致的損失作出賠償，惟上限為保障表K項所列投保額。

章節 K 的特別條款：

假若發生任何情況可能導致本章節K的索償的事件，須在發生有關事件的二十四(24)小時內通知當地警方或相應的當地執法人員。提出的索償須附上顯示已向警方或相應的當地執法人員報告損失的書面證明。如未能發出此項先決條款規定的通知及書面證明，本公司恕不承擔本章節K的任何責任。

章節 K 的不受保事項：

本章節K並不保障：

1. 因受保人疏忽所致的遺失，當中包括但不限於將個人的現金，銀行鈔票或旅行支票等置於無人看管的狀態。
2. 任何不明原因的損失、由於海關或任何其他機構沒收或扣押的損失、或任何由於貨幣兌換交易中的錯誤或遺漏而導致的貨幣貶值或短缺的損失。
3. 使用或濫用任何形式的膠塑貨幣造成的損失，包括但不限於任何信用卡、電子錢包或同等的儲值信用

額度。

章節 L 一租賃車輛自負額

若受保人在旅程中，受保人在租賃車輛因意外造成事故致使租賃車輛損失或損壞並須有法律責任作出支付，而租賃期間受保人在控制該租賃車輛，本公司將向受保人賠償任何自負額或墊底費，惟不可超逾保障表章節L所列的投保額為限，並受本保單的條文和條款規限。

章節 L 的特別條款：

1. 租賃車輛必須從持牌租賃公司租用。
2. 作為租賃安排的一部分，受保人在出租期間必須購買對針對租賃車輛的損失或損壞的所有綜合性車輛保險。
3. 受保人必須遵守租賃機構根據租賃車輛的租賃協議、承保人的該份保險、及租賃車輛的司法管轄區的法律、法規和規定的所有要求。
4. 此保障每次受保旅程賠償次數不得超過一次。

章節 L 的不受保事項：

本章節L並不會就以下任何一種情況直接或間接引起的，或由此引致，或所產生的後果，或與之有關而產生，或所促成的任何索償，對受保人作出賠償：

1. 因操控該租賃車輛違反租賃協議的條款；或違反公共道路限制；或違反租賃車輛的司法管轄區的法律、法規、規定而引致的損失或損壞。
2. 磨損、逐漸惡化、昆蟲或害蟲、固有缺陷、潛在缺陷或損害所引致的損失或損壞。
3. 任何非操作費用（NOC）或使用費用的損失。

章節 M 一家居財物

若在受保期間主要居所無人居住而發生爆竊、涉及強行及暴力闖入或離開主要居所並導致的家居財物損失或損壞，本公司將向受保人賠償不超過保障表章節M項所述的投保額作為家居財物重置費用。

章節 M 的特別條款：

1. 假若發生任何可能導致本章節M的索償事件，須在發生有關事件的二十四(24)小時內通知當地警方或相應的當地執法人員。如未能發出此項先決條款

規定的通知，**本公司**恕不承擔本章節M的任何責任。

2. 根據本章節M提出的任何索償須附上顯示已向警方或相應的當地執法人員報告損失的書面證明。如未能提供此項先決條款規定的報告書面證明，**本公司**恕不承擔本章節M的任何責任。

章節 M 的不受保事項：

本章節 M 並不保障：

1. 任何遺失或損壞的**家居財物**(構成一對或一組)的任何特殊或獨特的價值。
2. 任何其他保險保單就相同風險已承保的重置費用。

章節 N — 個人責任

假若**受保人**因於**受保期間**內發生對任何其他人士造成**身體損傷**或損毀他人財物的**意外**，因而須承擔作出賠償的法律責任，**本公司**將代表**受保人**支付該賠償，惟上限為**保障表**章節N項所列**投保額**。

章節 N 的不受保事項：

本章節N並不保障符合下列各項責任的賠償：

1. **親屬**或受到**受保人**監護或控制的人士遭受**身體損傷**引起。
2. 屬於**受保人**或**親屬**或受到**受保人**監護或控制的人士的財物損毀引起。
3. 屬於根據契約須承擔的任何責任的賠償。
4. 因**受保人**蓄意、惡意或進行不法活動產生的責任。
5. 因擁有、管有、租賃或租用任何運輸工具、飛機、火器或動物所產生責任。
6. 因進行任何交易或專業所產生的責任。

章節 O — 遺失流動設備

就實際損耗、折舊、抵扣或報廢進行扣減或撥備後，**本公司**將按其絕對酌情權對於在**受保期間**內因被盜或搶劫而損壞或丟失的**流動設備**進行修復、修理或更換，惟上限為**保障表**O項所列**投保額**，及按章節O項所列的作扣減。

章節 O 的特別條款：

1. 假若發生**流動設備**被第三方蓄意盜去或搶去的情況可能導致本章節O的索償的事件，須在發生有關事件的二十四(24)小時內通知當地警方或當地海關或相

應的當地執法人員。提出的索償須附上顯示已向當地警方或相應的當地執法人員報告損失的書面證明。如未能發出此項先決條款規定的通知書面證明，**本公司**恕不承擔本章節O的任何責任。

2. 於根據本章節O支付任何款項後，**本公司**有權取得及保留任何尋回或損毀的**流動設備**的利益及價值，並按其絕對酌情權處理剩餘價值。

章節 O 的不受保事項：

本章節O並不保障：

1. 因**受保人**疏忽所致的遺失、被盜或損毀，當中包括但不限於將**流動設備**置於無人看管的狀態。
2. **流動設備**因被置於汽車（鎖於車尾箱除外）或**公共交通工具**內或其他公共地方且無人看管而導致任何原因不明的遺失、被盜或損毀。
3. 在**旅程**前託運或單獨郵寄或以**公共交通工具**（同時運載**受保人**的**公共交通工具**除外）運載的任何**流動設備**的遺失、被盜或損毀。
4. 任何有關電訊通話或流量收費，資料損失/復原的相關費用，或任何其他因**流動設備**遺失、被盜或損毀後被使用而直接、間接或相應而生的損失。

章節 P — 錯過事件

假若**受保人**於**保險期**因為以下原因不能參與已計劃遊覽的主題公園、音樂會或藝術表演或其他已安排的附加活動（團體原有行程的部份除外），**本公司**將補償**受保人**所預付及被沒收的實際購票費用(惟金額上限為**保障表**章節P所列**投保額**。

假若：

1. **受保人**、**親屬**或**同行夥伴**在購買本保單後及在旅程計劃開始日期前三十(30)天內突然及未能預期地身故或遭受**身體損傷**或患病；或
2. 事因出現**公共交通工具**機件及/或電子故障引致錯過行程而直接至使**受保人**不能參與已計劃遊覽的活動。

章節 P 的特別條款：

1. 任何與章節 P 項有關的索償須附上發生錯失事件的相關文件及原有的購票收據，以顯示**受保人**錯失已計劃遊覽的活動。
2. 當**受保人**因**身體損傷**或**患病**而引致取消事件，該**身體損傷**或**患病**須由**執業醫生**證實**受保人**不適宜參與

已計劃旅行或繼續其遊覽活動將危及其生命或健康。

3. 當若以上章節 P(3)項所述發生機件及/或電子故障而引致取消事件，須附上來自實際抵達所列目的地的當地時間的相關**公共交通工具**承運人的確認書；當中須列明發生延誤抵達該目的地的原因。
4. 如未能提供此項先決條款規定的確認書，**本公司**恕不承擔本**章節 P**的任何責任；按**章節 P**項賠償所述受保人所預付或被沒收的實際損失。

章節 P 的不受保事項：

本**章節 P**並不保障下列損失：

1. **受保人**並無法律責任需支付的任何款項；或
2. **受保人**可從任何其他途徑獲得彌償或賠償退款或收回款項。

章節 Q — 信用卡保障

本公司將向**受保人**支付在**保險期**被其他人使用**受保人**的信用卡以欺詐性地於商店或在網站上作出購買後的十五（15）分鐘內的款項，惟不得超過**保障表****章節 Q**項所述的**投保額**。任何索償必須附有來自在遇劫地點或欺詐性購買事件發生的管轄區內的警方所發出的書面文件，並在遇到損失的二十四（24）小時內報案。

適用於所有章節的一般不受保事項：

本保單並不保障因下列任何一項所致的損失或後繼損失或責任：

1. 任何**受保前**已存在之**傷病**、先天性或遺傳狀況。
2. 違反**執業醫生**意見而外出旅遊，或為了獲取醫治或醫療服務而外出旅遊。
3. 自殺、企圖自殺或故意引致自身的**身體損傷**。
4. 因懷孕、墮胎、分娩、流產、不育而引致的任何情況及其所致的其他併發症，整容手術或性病。
5. 牙醫護理。
6. 精神或神經失常、精神錯亂、精神狀況或任何行為失常。
7. 戰爭（不論宣戰與否）、侵略、外敵行動、內戰、革命、叛亂、暴動、敵對行為（不論宣戰與否）。
8. 直接參與罷工／暴亂／內亂，或因**受保人**履行身為

軍隊、武裝部隊或紀律部隊（包括但不限於警員、海關職員、消防員、入境處職員／督察及懲教處職員／督察等）成員或身為戰爭或滅罪行動志願者的職責。

9. 參與(a)職業體育賽事，而**受保人**可透過從事該運動而賺取收入或報酬、(b)任何特技活動、(c)競賽（徒步的競賽除外）或(d)任何利用繩索或嚮導的任何攀石或攀山活動。
10. 任何政府的禁令或規例，或海關或任何其他機關扣押或銷毀。
11. **受保人**的非法、蓄意、惡意或魯莽的行為或疏忽。
12. **受保人**因服用超越法定水平之酒精或藥物引起的有關損失。
13. 乘搭任何飛機，但作為飛機搭客除外。
14. 任何不誠實或犯罪活動。
15. **受保人**未有減輕損失。
16. 愛滋病或愛滋病相關綜合症、任何於人體免疫力衰退症或相關疾病的陽性測試當時或其後開始的任何身體損傷或患病、或任何其他經性接觸傳染之疾病。
17. **受保人**從事體力勞動或危險工作，當中包括但不限於離岸鑽探、礦物提煉、處理爆炸品、地盤作業、特技工作及空中攝影。
18. 任何損失或開支可從任何其他途徑獲得退款或收回款項。
19. 流行病或疫症。
20. 任何若由本公司補償或支付而涉及伊朗，北韓，敘利亞，蘇丹，古巴；或特別指定名單所列人士、實體、團體或公司有關之損失或費用，將導致本公司違反經貿制裁規定或相關法律或條例，本保單並不提供任何保障。為免生疑問，就會令(再)保險人因於提供保險、於保單項下支付任何索償或提供任何保障而蒙受聯合國決議的任何制裁、禁制或限制，或歐盟、美國、澳洲、英國的任何貿易或經濟制裁、法律或規例，及/或任何其他適用的國家級別的貿易或經濟制裁、法律或規例，(再)保險人不得被視作有責任提供該等保險及(再)保險人並無責任支付該等索償或提供該等保障。

一般條款

1. 完整契約:

保險證明書，連同旅遊保險的條款及條件並其他批註（如有）構成完整的保險契約。受保人未有在投保書上作出的任何陳述，除欺詐外，均不得作為廢除本契約或利用於合法的訴訟程序。任何營業員均無權更改或刪除本保險的任何條款，任何保險的更改需由本公司簽署同意並簽發批註後，方為有效。

ALLIANZ GLOBAL CORPORATE AND SPECIALTY SE HONG KONG BRANCH是本手冊中所述的保險保障的承銷商（保險人）。

2. 申請賠償通知的期限

任何賠償申請需於事故發生後三十(30)日內以書面通知本公司，倘若受保人因**意外**引致死亡，應立即以書面通知本公司。

3. 損失證明文件

本公司於接獲該書面通知後，會將申請賠償表格送交索償人，以作填寫損害證明之用。倘索償人於書面通知書發出後十五(15)日內仍未收到該申請賠償表格，索償人可將事故的發生、性質與損害程度於本保單內損害證明文件遞交之期限前提交本公司，本公司會將此書面證明視作已符合本保單條款之要求。本公司所需之任何證明文件，須依據本公司所定之形式及性質提交，而所需費用概由受保人或其合法代理人負責。

4. 提交損失證明的期限

受保人如要申索損失賠償時，則必須於本公司負責的投保期完結後六十(60)天內把損失證明提交本公司前文所述辦事處。倘若受保人在合理情況下未能於該限期內提交相關通知，則須於合理可行的情況下儘快在相關損失發生之日一(1)年內提交。

5. 充足的通知期

申請賠償通知書可由受保人或其代表人送交本公司，並提供足夠資料以證明受保人之身份，視為是為發送本公司的通知。倘有合理之緣由不可能於本保單指定之限期內將通知書送交本公司，而已盡可能將通知書於限期後即送出，不會被視為申請賠償無效。

6. 賠償金支付時間

除有關殘疾的損失索償外，當本公司接獲所需的證明文件後，將根據本保單立即作出合理賠償。

7. 賠償金之支付

倘受保人死亡，賠償金將賠償予受保人的遺產，其他賠償則賠償予受保人本人，而緊急醫療運送及遺體運返費

用之賠償則根據本保單的條款直接支付有關之服務提供機構。

8. 欺騙索償

倘若索賠存有**任何欺詐成份**，或受保人或其代表人以任何欺詐手段或方法獲取本保單任何保障，相關索賠的所有賠償均會作廢。

9. 追討權利

若本公司及/或其授權代表授權支付及/或支付了不包括在此保單保障範圍內的索償，或超過此保險的責任上限時，本公司會保留追討受保人上述款項或超額部份之權利。

10. 第三者權利

除**受保人**及本公司以外，此保單未有賦予其它人士享有按《合約（第三者權利）條例》或以其它方式直接強制執行此保單條款的權益。惟特此說明及同意，只有本公司及於保險證明書上列明的**受保人**方可享有在無須給予其它人士通知或無須獲其它人士同意的情况下，可藉協議修改本保單或取消/終止此保單（如此保單載有任何此權利）的權利。

11. 身體檢查及治療

於處理本保單的賠償申請時，在合理需要時本公司有權及有機會隨時要求受保人作合理需要次數的身體檢查，有關費用由本公司負責。倘受保人死亡，除法律不允許外，本公司有權要求解剖驗屍，而費用則由本公司負擔。受保人於遭遇身體損傷或患病後須儘快獲取聽從合資格執業醫生的建議，若受保人沒有獲取及依從相關建議及未有使用可能處方的相關用具或補救方法引致的任何後果，本公司無須負上任何責任。

12. 代位權

若本公司已向受保人作出本保單的賠償，便可取代其向有關人士或機構追討賠償的一切權利，而受保人必須簽署及遞交文件，或利用任何方法去保證此項本公司取得相關的權利。受保人不可採取任何對相關權利造成損害的行動。

13. 法律行動

依據本保單所規定將書面損失證明文件送交本公司後，六十(60)日屆滿前不得進行法律或衡平法上的行動以求賠償。任何倘須訴訟不得於損失證明提交時限後三(3)年屆滿後提出。

14. 國家之法律限制

倘本保險有關呈交賠償通知書或損失證明文件之期

限少於香港法例所允許之期限，則將依法例延長至所容許之最短期限。

15. 保單條款之遵從

倘受保人有違反本保單內所載的任何條文，所有賠償申請均屬無效。

16. 保單詮釋

本保單受香港法例之約束。本保單訂約各方謹此同意接受香港特別行政區法院之專屬司法管轄權管轄。

17. 轉讓

本保單的權益轉讓通知不會對本公司構成法律的約束力，除非及直至此轉讓權益的正本或副本已提交至 Allianz Worldwide Partners (Hong Kong) Limited 位於香港港島太古城太古灣道12號太古城中心第4期3樓304-306室的辦事處，並獲得本公司的確認相關轉讓方為有效。此外本公司不會對轉讓的有效性承擔責任。任何的憲章、條款或法規均不得用以妨礙本保單的任何索償，除非有關條款已完整納入本保單內。

18. 資料私隱

受保人/ 保單持有人/ 申請人謹此同意：

- a) 在本保單申請程序或管理本保單期間收集的個人資料可被授權救援服務提供者或本公司用作其私隱政策訂明的用途，包括核保及管理所申請的保單(包括獲取再保險、核保續保之保單、資料配對、處理索償、調查、付款及行使代位權)。
- b) Allianz Worldwide Partners (Hong Kong) Limited 亦可向以下類別的人士(不論在香港或海外)轉交該些個人資料，用作訂明的用途。該等人士或可在其他國家，如中國大陸，法國或瑞士。您同意，雖然該等人士一般會受到保密或隱私責任的約束，但可能不是具體符合香港隱私法例的要求。個人資料的轉移可能適用於：
 - i. 保單管理服務的第三方(包括再保險公司)(如上(a)項所述)；
 - ii. 財務機構，作處理此保單及收取保單款項(如上(a)項所述)；
 - iii. 若處理索償事宜，公證人、調查員、第三方管理人、緊急支援服務提供者、法律服務提供者；
 - iv. 醫療服務提供者、及旅遊承運商(如上(a)項所述)；或

- v. 其它在任何國家之Allianz Worldwide Partners 之成員公司，作上述(a)及(b)項所有列明之用途；

- c) 受保人/ 保單持有人/ 申請人可隨時致函予Allianz Worldwide Partners (Hong Kong) Limited私隱合規專員(地址為香港港島太古城太古灣道12號太古城中心第4期3樓304-306室)，以查閱或要求修改其個人資料(兩者均收取合理費用)，或更改有關其個人資料被使用作直接促銷用途的選擇。如對所提供的服務有任何意見，可按上述地址聯絡Allianz Worldwide Partners (Hong Kong) Limited。

19. 文書錯誤

本公司就文書上的錯誤不會令生效的保單因而失效，或令無效的保單因而生效。

20. 年齡限制

受保人的年齡必須在出生60日和85歲(首尾兩日亦包括在內)之間，除非在保障的任何特定部分另有規定。

21. 取消保單 單次來回行程

一經發出保單，將不允許退回保費，除非旅行代理商在旅程出發日期前取消旅程。

全年保障

您可藉給與本公司書面通知以取消保單，在此情況下，您將有權獲退還按照以下保費退款表計算按比例計算退還保費，惟此舉僅限於本保單未有就全年保障作出任何索償。

由保單生效日期起計已過日期	退還保費
直至一(1)個月	您已支付保費的60%
直至兩(2)個月	您已支付保費的50%
直至三(3)個月	您已支付保費的30%
直至四(4)個月	您已支付保費的10%
超過四(4)個月	沒有退款

本公司可寄掛號信到受保人的最後已知地址，以給予七(7)天通知期取消本保單。保費的按比例計算部分可能會退還。

22. 保單語言

本繁體中文版的保單條款和條件乃根據英文版翻譯而成，以供參考，如發現與英文版本的條款有差別，條款將以英文版本為準。

