

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 one hundred and
Allianz Travel Protect Policy Wording
Effective Date: 9th August 2017

eighty-two (182) days, 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 one hundred and eighty-two (182) 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.

