

# Wise Traveller Travel Insurance

## POLICY WORDING

This policy wording, serves to disclose the terms & conditions of the insurance policy issued by Zurich Insurance Company Ltd (Singapore Branch)

To understand this policy's significant features, benefits and risks, **We** advise that **You** read the following:

- **Table of Benefits** outlines the maximum amounts payable and applicable sub-limits for each policy benefit
- **Important Matters** contains important information on **Your** duty of disclosure, period of cover, choosing a doctor, accessing 24 hour medical assistance, and matters relating to **Hospitalization** or medical evacuation
- **Policy Definitions** defines words with special meanings
- **Policy Benefits** sets out what "**We Will Pay**" as well as what "**We Will Not Pay**" for each area of coverage
- **General Exclusions**, which are applicable to all Sections
- **Claims** which set out certain obligations that **You** and **We** have, which may determine the outcome of **Your** claims settlement

## INTRODUCTION

### ABOUT THE INSURANCE COVER

Each plan is offered for Annual Coverage Only. **Annual Coverage** provides cover for all **Journeys** made during the year to the geographical area **You** have selected, up to a maximum of 90 days per **Journey**.

**You** may include **Additional Adult** / **Additional Children** named in the Membership Confirmation issued by Wise Traveller as being eligible to become insured under this policy as approved by **Us**.

The **Insured Persons** are not required to travel together on any **Trip**. However, any **Child of Insured Person** under the age of twelve (12) years must be accompanied by a parent or adult guardian for any **Trip** made during the period of insurance.

### CONTACT US

**For any General Enquiries call +65 6329 0972**

Monday to Friday, 9:00am to 12:30pm and 1:30pm to 5:00pm (Singapore Time)

**E-mail: [wisetraveller@abacare.com](mailto:wisetraveller@abacare.com)**

**For Claims Enquiries call +65 6260 0168**

**E-mail: [claims.wisetraveller@zurich.com.sg](mailto:claims.wisetraveller@zurich.com.sg)**

**For 24 hour Emergency Assistance call +65 6260 0168**

## TABLE OF BENEFITS

	BENEFITS	Limit Per Person Per Trip (USD)	
		WiseTraveller Premium	Wise Traveller Secure
<b>SECTION A – PERSONAL ACCIDENT COVER</b>			
1	<b>Accidental Death and Permanent Disablement</b>	\$250,000	\$150,000
<b>SECTION B – MEDICAL EXPENSES COVER *</b>			
2	<b>Medical Expenses with Return Treatment</b> - Including <b>Chinese Physician</b> Expenses up to USD 750 and Dental up to USD 500 - Includes overseas medical expenses for COVID-19 and Section C – 3(b) Emergency Medical Evacuation & Repatriation	\$350,000 \$200,000	\$225,000 \$100,000
	<b>Out-of-country COVID-19 Diagnosis Quarantine Allowance</b>	\$100 Per Day Up To 14 Days	\$100 Per Day Up To 14 Days
<b>SECTION C –EMERGENCY ASSISTANCE SERVICES</b>			
3	<b>(a) Round-the-clock Hotline Service</b>	Included	
	<b>(b) Emergency Medical Evacuation &amp; Repatriation</b>	Actual Costs	
	<b>(c) Repatriation of Mortal Remains</b>	Actual Costs	
	<b>(d) Hospital Admission Guarantee</b>	\$5,000	
	<b>(e) Compassionate Visit</b>		
	(i) <b>Hospitalization of Insured Person</b>	Actual Cost	
	• Travel Fare (economy class)	910	
	• Accommodation (USD130/night)		
	(ii) <b>Death of Insured Person</b>	Actual Cost	
	• Travel Fare (economy class)	650	
	• Accommodation (USD130/night)		
	(iii) <b>Death of Immediate Family Member</b>	Actual Cost	
	• Travel Fare (economy class)		
	<b>(f) Return of Child(ren)</b>	Actual Costs	
	• Travel Fare (economy class)		

SECTION D – TRAVEL INCONVENIENCE COVER / LOSS AND DAMAGE TO BELONGINGS			
4	<b>Trip Cancellation</b> <i>- Includes COVID-19 trip cancellation up to</i>	\$10,000 \$2,500	\$7,500 \$1,500
5	<b>Trip Curtailment / Interruption</b> <i>- Includes COVID-19 trip curtailment up to</i>	\$10,000 \$2,500	\$7,500 \$1,500
6	<b>Trip Postponement</b> <i>- Includes COVID-19 trip postponement up to</i>	\$1,000 \$350	\$750 \$250
7	<b>Travel Misconnection</b>	\$150	\$150
8	<b>Travel Delay</b> - USD 150 per each continuous 6 hours of delay	\$1,500	\$750
9	<b>Luggage Delay</b> - USD 150 per each continuous 6 hours of delay	\$1,500	\$750
10	<b>Loss or Damage to Luggage and Personal Effects</b>	\$10,000	\$3,500
11	<b>Loss of Travel Documents</b>	\$500	\$500
12	<b>Theft of Cash</b>	\$200	\$200
13	<b>Adventurous Activities Cover</b> <i>- Inclusion of trekking up to 4,500 metres, excludes evacuation and activities requiring ropes</i>	\$50,000	-
14	<b>Terrorism Cover</b> – Related to delays or <b>Trip</b> curtailment only	\$5,000	-
15	<b>Hostage / Kidnap</b> – USD 100 per each continuous 6 hours of confinement	\$1,000	-
16	<b>Loss of Credit Card</b>	\$500	-
17	<b>Golf Insurance (Hole-In-One)</b>	\$150	-
SECTION E – LIABILITY			
18	<b>Personal Liability</b>	\$1,000,000	\$750,000
SECTION F – COLLISION DAMAGE WAIVER (CDW)			
19	<b>Rental Vehicle Excess</b>	\$1,000	\$500

Extension			
20	<b>Cruise Vacation</b>		
	- Cruise Cancellation	\$6,000	\$4,500
	- Excursion Tour Cancellation	\$1,000	\$750
	- Satellite Phone Fee	\$200	\$200

\* Standard excess of USD 50 applicable on Medical Expenses Benefit for each claim.

## IMPORTANT MATTERS

### ABOUT THIS POLICY WORDING

By virtue of **You** being an active member of THE WISE TRAVELLER PTE LTD (hereinafter called Wise Traveller), the provision of these benefits is enabled by the master insurance policy held by Wise Traveller and issued by Zurich Insurance Company Ltd (Singapore Branch).

Wise Traveller is the only Policyholder under the insurance policy and only they have direct rights under the Policy against the Insurer. This agreement does not give **You** direct rights under the policy of insurance. Strict compliance with the terms and conditions of this agreement is required if **You** are to receive its benefit.

This policy wording, **Your** certificate of insurance, and any endorsements written by **Us** make up **Your** contract with the Insurer. Please retain these documents in a safeplace.

### ELIGIBILITY

The benefits summarised in this document are dependent upon **You** being a valid member of Wise Traveller with one of their memberships: Wise Traveller Premium Worldwide, Wise Traveller Secure Worldwide, Wise Traveller Premium Asia Pacific or Wise Traveller Secure Asia Pacific, at the time of any incident giving rise to a claim. Wise Traveller will give **You** notice if there are any material changes to these terms and conditions or if the policies supporting the benefits available under these agreements are cancelled or expire without renewal on equivalent terms.

This is **Your** benefit guide and agreement with **Us**. It contains details of benefits, conditions and exclusions relating to Wise Traveller's members and is the basis on which all claims **You** make will be settled.

Benefits set forth in this document are to be asserted, in accordance with the terms and conditions provided for in this document, against the Insurer exclusively.

### WHO IS YOUR INSURER?

This travel insurance policy is underwritten by Zurich Insurance Company Ltd (Singapore Branch). The insurer may be referred to as "**We**", "**Our**" and "**Us**" in this policy wording.

### USE OF YOUR PERSONAL DATA

In using these benefits **You** also agree We may:

- a) disclose and use information about **You** and **Your** benefits – including information relating to **Your** medical status and health – to Zurich Insurance Company Ltd (Singapore Branch), Our partners, service providers and agents in order to administer and service **Your** benefits, process and collect relevant payments and for fraud prevention;
- b) monitor and/ or record **Your** telephone calls in relation to cover to ensure consistent servicing levels and account operation.
- c) use advanced technology and well defined employee practices to help ensure that **Your** information is processed promptly, accurately and completely and in accordance with applicable data protection law. If **You** want to know what information is held about You by Zurich Insurance Company Ltd (Singapore Branch), please write to:

Name: Zurich Insurance Company Ltd (Singapore Branch)  
Address: 50 Raffles Place, Singapore Land Tower #29-01 Singapore 048623

### YOUR DUTY OF DISCLOSURE

Before commencing this contract of insurance, **You** have a duty to disclose to **Us** the information **We** need to enable **Us** to decide whether and on what terms **Your** proposal for insurance is acceptable. **You** have the duty to:

- Disclose every matter that **You** know, or could reasonably be expected to know
- Give **Us** honest and complete answers
- Disclose any information that is relevant to **Our** decision whether to accept the risk of the insurance and if so, on what terms

The same duties apply for policy amendment, extension, and any other endorsement.

This policy will be void and automatically expire in the event of misrepresentation, mis-description, non-disclosure or concealment of any material circumstances, such as but not limited to **Your** health conditions, **Your Country of Residence**, and **Your** destination.

### PERIOD OF COVER

**Your** cover commences at different time for different sections of the policy:

- The cover for **Trip** cancellation commences 30 days prior to **Your** scheduled departure of **Your** individual **Trip** and the cover will expire at the moment of **Your** scheduled departure.

- The cover for all other policy benefits starts from the time when **You** leave **Your Home** in **Your Country of Residence** to go directly to the place **You** depart from, and ends when **You** return to **Your Country of Residence**, or when **Your** policy expires or 90 days, whichever is earlier

The maximum period of cover per one **Journey** will be 90 consecutive days from the date **You** depart from **Your Country of Residence**. If **Your** policy will expire before **Your Journey** ends, please ensure **You** renew **Your** policy before **Your Journey** commences.

### PRE-EXISTING MEDICAL CONDITIONS

**Pre-Existing Medical Conditions** are not covered under this policy (see General Exclusions). The term “**Pre-Existing Medical Condition**” has a special meaning and is defined in “Words With Special Meanings”.

### GEOGRAPHICAL AREA INSURED

You will only be covered for the entire regional geographic area that is related to Your Wise Traveller membership of which **Your** destination corresponds to the geographies indicated below.

- **For Wise Traveller Premium Asia Pacific and Wise Traveller Secure Asia Pacific:** Brunei Darussalam, Indonesia, Cambodia, Laos, Myanmar, Malaysia, Singapore, Philippines, Thailand, Vietnam, Australia, Bangladesh, Bhutan, China (excluding Tibet), Fiji, Guam, Hong Kong, India, Japan, N. Korea, S. Korea, Sri Lanka, Mongolia, Macau, Maldives, New Zealand, Pakistan, Papua New Guinea, E. Timor, and Taiwan, as well as other Pacific nations but/and excluding **Your Country of Residence**.
- **For Wise Traveller Premium WorldWide and Wise Traveller Secure Worldwide:** Asia and anywhere in the world, including the United States of America and Canada.

### EMERGENCY ASSISTANCE AND HOSPITALISATION

We have appointed Zurich Emergency Assist to administer all **Emergency** assistance services of this insurance. You may contact them in an **Emergency** 24 hours a day, 7 days a week.

If **You** are hospitalized, **You** or a member of **Your** travelling party, **MUST** contact **Our** assistance team as soon as possible. If **You** do not, **We** will not pay for these expenses or for any evacuation or airfares that have not been approve or arranged by **Us**.

### YOU CAN CHOOSE YOUR OWN MEDICAL PRACTITIONER

**You** are free to choose **Your** own **Medical Practitioner** or **We** can appoint an approved **Medical Practitioner** to see **You**. **You** must, however, advise **Us** of **Your** admittance to **Hospital** or **Your** intended early return to **Your Country of Residence** based on medical advice. To guarantee cover **You** must follow set instructions from **Us** or Zurich Emergency Assist team.

If **You** do not get the medical treatment **You** expect, **We** can assist **You** but **We** and/or the agent, are not liable for anything that results from that advice.

### JURISDICTION AND CHOICE OF LAW

This insurance policy document is subjected and interpreted in accordance to the laws of the Republic of Singapore.

## POLICY DEFINITIONS

**“Accident”, “Accidental” or “Accidentally”** means an unexpected, unintended, unforeseeable and external event causing **Injury**, disablement, or death.

**“Adventurous Activities”** means activities that involve greater than normal risk which may include:

1. Travel into a relatively undeveloped area of the country in which vehicle contact is difficult and/or uncertain.
2. Confrontation with natural environmental challenges requiring greater reliance upon personal resources than would normally be required in day-to-day life.
3. Less than normal contact by person or by telephone, with medical and other public services available in normal day-to-day life.
4. Exposure to the natural elements with less than the normal physical protection provided in day-to-day life.

**“Arises” or “Arising”** means directly or indirectly **Arising** or in any way connected with.

**“Carrier”** means any bus, coach, ferry, cruise ship, train (including underground train, light rail and magnetic train companies) operated by a **Carrier** duly licensed from relevant government authorities for the regular transportation of fare-paying passengers, including any fixed, wing aircraft provided by a regular flight operating airline or an air charter company; and any helicopter provided and operated by an airline operating only between established commercial airports or licensed commercial heliports.

**“Checked in Luggage”** means non-commercial **Luggage** that an **Insured Person** has given over to the care of the **Carrier** or other responsible party, and includes **Personal Effects** contained within.

**“Additional Adult” or “Additional Insured”** means an individual not older than 70 years old and permanently residing with the **Insured Person**.

**“Additional Child”, “Dependent Child” or “Child” or “Children”** means named **Dependent Children** including adopted and step **Children** of the **Insured Person** not older than eighteen (18) years or twenty five (25) years if attending as a full time student of an accredited Institution of Higher Learning, who are unmarried, who permanently reside with the **Insured Person**, and receive the majority of maintenance and support from the **Insured Person**.

**“Chinese Physician”** means a registered herbalist, acupuncturist and bone setter duly licensed under any applicable laws. **You** should not be the attending **Chinese Physician** nor **Your** spouse or **Your** business partner or **Your** employer or employee or **Your** agent or a person booked to accompany **You** on the **Trip** or a person who is related to **You** in any way.

**“Depreciation”** means the loss in value due to age and / or wear and tear that will be applied to claims for lost or damaged belongings, including **Luggage** and **Personal Effects, Golfing Equipment**, and others. The rate of **Depreciation** is 15% of the original value of each item per complete 365 days of ownership.

**“Emergency”** means a sudden and unforeseen situation or condition requiring immediate action, assessment or treatment.

**“Epidemic”** means a sudden development and rapid spreading of a contagious disease or

**Illness** in an area as documented by a recognized public health authority.

**“Extreme Sports and Sporting Activities”** means any sports or sporting activities that presents a high level of inherent danger (i.e. Involves a high level of expertise, exceptional physical exertion, highly specialised gear or stunts) including but not limited to big wave surfing, canoeing down rapids, cliff jumping, horse jumping, ultra- marathons, biathlons, triathlons and stunt riding. It does not mean usual tourist activities that are accessible to the general public without restriction (other than height or general health or fitness warnings) and which are provided by a recognised local tour operator but always providing that **You** are acting under the guidance and supervision of qualified guides and/or instructors of the tour operators when carrying out such tourist activities.

**“Golfing Equipment”** means golf clubs and golf bags only.

**“Home”** means the place where **You** normally live in **Your Country of Residence**. Country to which **You** are granted rights of citizenship or permanent residence by the respective government.

**“Hospital”** means an institution which meets all of the following requirements: 1) it must be operated according to law; 2) it must give 24 hour medical care, diagnosis and treatment to the **Sick** or **Injured** on an inpatient basis; 3) it must provide diagnostic and surgical facilities supervised by **Medical Practitioner**; 4) registered nurses must be on 24 hour call or duty; and 5) the care must be given either on the **Hospital’s** premises or in facilities available to the **Hospital** on a pre-arranged bases.

A **Hospital** is not a rest, convalescent, extended care, rehabilitation or other nursing facility; a facility which primarily treats mental **Illness** alcoholism, or drug addiction (or any ward, wing, or other section of the **Hospital** used for such purposes); or a facility which provides hospice care (or wing, ward, or other section of a **Hospital** used for such purposes.)

**“Immediate Family Member”** means any of the following who are resident in **Your Country of Residence**: fiancé, fiancée, spouse, legally recognized de facto, parent, parent-in-law, grandparent, grandparent-in-law, grandchild, brother, sister, son, daughter, daughter-in-law or

son-in-law.

**“Injure” or “Injured” or “Injury”** means bodily **Injury** caused solely and directly by violent, **Accidental**, visible and external means, which occurs during **Your** period of cover, and occurs independently and does not result from any **Illness, Sickness** or other bodily disease.

**“Insolvency”** means the inability of an individual or entity to pay its debt when they are due and resulting in the total cessation of their operations due to either:-

1. **Insolvency**, with or without the filing of a bankruptcy petition; or
2. Abscondment with monies belonging to the organization by an owner or employee who has prior convictions of any fraudulent or dishonest act, or is under investigation on a charge of fraudulent or dishonest act.

**“Insured Person(s)”** being a valid member of Wise Traveller with one of their memberships and who is not more than 70 years of age.

**“Journey” or “Trip”** means **Your** travel during the period of cover. **Your Journey** starts from the time when **You** leave **Your Home** in **Your Country of Residence** to go directly to the place **You** depart from, and ends when **You** return to **Your Country of Residence**, or when **Your** policy expires, whichever is earlier.

**“Jewellery”** means objects such as rings, bracelets, brooches, necklaces, bangles, earrings or lockets which have inclusions of precious metals, precious stones, or semi-precious stones, and that is owned (not rented or hired) by **You**.

**“Locked Storage Compartment”** means a boot, trunk, glove box, enclosed centre console, or concealed cargo area of an automobile, which is not **Your Carrier**.

**“Loss of Sight”** means complete and permanent irrecoverable sight which is beyond the remedy by surgical or other treatment.

**“Loss of Limb”** means the total functional disablement or loss by complete and permanent physical severance of a hand at or above the wrist or of a foot at or above the ankle.

**“Loss of Speech”** means the disability in articulating any three of the four sounds which contribute to the speech such as the labial sounds, the alveololabial sounds, the palatal sounds and the velar sounds or total loss of vocal cord or damage of speech centre in the brain resulting in aphasia total and irrecoverable loss of speech which is beyond remedy by surgical or other treatment.

**“Loss of Hearing”** means total and irrecoverable loss of hearing which is beyond remedy by

surgical or other treatment. Permanent irrecoverable **Loss of Hearing** where:

- If a dB = hearing loss at 500 Hertz
- If b dB = hearing loss at 1000 Hertz
- If c dB = hearing loss at 2000 Hertz
- If d dB = hearing loss at 4000 Hertz
- $1/6$  of  $(a+2b+2c+d)$  is above 80 dB

**“Luggage (and/or) Personal Effects”** means personal items owned by **You** and that **You** take with **You**, or buy, on **Your Journey**.

**“Medical Practitioner”** means a qualified doctor of medicine or dentist registered in the place where **You** received the services/ or treatment or who is licensed and legally entitled to practice medicine in the applicable field for which services are delivered. A **Medical Practitioner** cannot be related to **You**.

**“Overseas”** means any country outside of **Your Country of Residence**.

**“Pair or Related Set of Items”** means a number of items of **Luggage** and **Personal Effects** that belong together or can be used together, for example but not limited to:

- A camera, lenses (attached or not), Tripod and accessories;
- A matching pair of shoes.

**“Pandemic”** means a form of an **Epidemic** that extends throughout an entire continent or even the entire human race.

**“Permanent Disablement”** means **You** have lost either: all sight in one or both eyes, or the use of a hand or foot at or above the wrist or ankle, and the loss is for at least 12 months and in **Our** opinion after consultation with an appropriate medical specialist, that loss will continue indefinitely.

**“Personal Computer”** means a lap top or handheld computer, including accessories or attachments. This does not include iPhone, Blackberry, other smart phones, or personal digital assistants.

**“Pre-Existing Medical Condition” means:**

1. An ongoing **Injury**, medical or dental condition of which **You** are aware, or related complication **You** have, or the symptoms of which **You** are aware;
2. A medical or dental condition that is currently being, or has been investigated, or treated by a health professional (including dentist or chiropractor) at any time in the past, prior to policy purchase;



3. Any condition for which **You** take prescribed medicine;
4. Any condition for which **You** have had surgery;
5. Any condition for which **You** see a medical specialist;

This definition of **Pre-Existing Medical Condition** applies to **You, Your** travelling companion(s), dependant(s) or any other person.

**“Public Place”** means any place that the public has access to, including but not limited to planes, trains, taxis, buses, shops, airports, railway stations, streets, museums, galleries, hotel foyers and general access areas, beaches, restaurants and public toilets.

**“Reasonable”** means:

- the standard level of medical or dental care given in the country **You** are in;
- the standard level of accommodation and travel that **You** have booked for the rest of **Your Journey** or, as determined by **Us**;
- the actions that a **Reasonable** person could be expected to take in a given scenario, as determined by **Us**.

**“Resident(s) of Singapore”** means Singapore citizens and permanent residents (holders of re-entry permits) as well as holders of employment passes, work permits, students' passes or dependant's passes.

**“Rental Vehicle”** means a vehicle owned by a licensed rental company or agency, which **You** have agreed to hire from them according to the terms of **Your** rental agreement. The vehicle must:

- Be no more than 10 years old;
- Have no more than 9 seats
- Not be driven off a public highway

**“Serious Injury or Serious Sickness”** means **Injury** or **Sickness** which requires treatment by a **Medical Practitioner** and which results in **You** being certified by that **Medical Practitioner** as having a life threatening condition and being unfit to travel or continue with **Your Trip**. When **Serious Injury** or **Serious Sickness** is applied to the **Immediate Family Member** or **Your Travel Companion**, it means **Injury** or **Sickness** which requires treatments by a **Medical Practitioner** and which results in the **Immediate Family Member** or **Your Travel Companion** being certified by that **Medical Practitioner** as having a life threatening condition which leads to the discontinuation or cancellation of **Your Trip**.

**“Sick”, “Sickness” or “Illness”** means a physical condition marked by a pathological deviation from the normal healthy state manifesting itself during **Your** period of cover, excluding any pre-existing conditions.

**“Sound Natural Teeth”** means natural teeth that either are unaltered or are fully restored to their normal function and are Disease-free, have no decay and are not more susceptible to **Injury** than unaltered natural teeth.

**“Terrorism”** means an act or acts, of any person or group(s) of person, committed for political, religious, ideological or similar purposes with the intention to influence any government and/or to put the public, or any section of the public, in fear. **Terrorism** can include, but not be limited to, the actual use of force or violence and/or the threat of such use. Furthermore the perpetrators of **Terrorism** can either be acting alone, or on behalf of, or in connection with any organization(s) or governments(s).

**“Total Disablement”** means **Injury** of a permanent nature which solely and directly totally disables and prevents **You** from attending to any business, occupation of any and every kind or if **You** have no business or occupation, from attending to **Your** usual duties or activities.

**“Travel Companion”** means a person who made travel arrangements with **You** to accompany **You** on the **Trip** for at least 75% of **Your Journey**.

**“Unchecked Luggage and Personal Effects”** means non-commercial items that **You** retain in **Your** personal control during the **Journey**.

**“Unsupervised”** means that **You** leave **Your Luggage** and **Personal Effects**:

- With a person **You** did not know prior to commencing **Your Journey**
- Where it can be taken without **Your** knowledge
- At such a distance from **You** that **You** are unable to prevent it being taken.

**“Valuables”** means **Jewellery**, watches, items made of precious metals or precious stones, furs, leather ware/ goods, binoculars, telescopes.

**“We”, “Our” and “Us”** means the Insurer of **Your** policy Zurich Insurance Company Ltd (Singapore Branch).

**“You” and “Your”** means all **Insured Person(s)** under the policy.

**“Your Country of Residence”** means the country in which **You** are granted rights of citizenship or permanent residence by the government authorities or is a country where **You** spend more than 90 days in any one year.

## 1. Accidental Death and Permanent Disablement

### 1.1

We will pay in the event an **Accident** occurs during **Your Journey**, which causes death or **Permanent Disablement** within 90 days from the occurrence, or the transport vessel **You** are aboard disappears, sinks or crashes and **You** are presumed dead and **Your** body is not found within 12 months from the occurrence, **We** will pay a portion of the Maximum Amount Payable outlined in the Table of Benefits, according to the below Schedule of Compensation.

Schedule of Compensation	Percentage of Capital Benefit
1. Death	100%
2. Permanent Total Disablement	100%
3. Permanent total Loss of Sight of both eyes	100%
4. Permanent total loss of Use of two limbs	100%
5. Permanent total Loss of Speech	100%
6. Permanent total Loss of Hearing in:	
a) both ears	75%
b) one ear	15%
7. Permanent total Loss of Sight in one eye	50%
8. Loss of or the permanent total loss of use of one limb	50%

In relation to **Accidental** death, **We** will pay the capital benefit to the estate of the deceased.

The maximum amount **We** will pay for all claims combined under this Section is shown under the Table of Benefits.

### 1.2

**We** will not pay:

- a) For **Accidents** or disablements caused by any reason other than **Injury**.
- b) For **Accidents** incurred in **Your Country of Residence**.

- c) For **Accidents** incurred while travelling on an aircraft, unless it is a fixed wing aircraft operated by a commercial airline company, and is operating between two commercial airports.

**You must check General Exclusions for other reasons why We will not pay.**

## 2. Medical Expenses with Return Treatment

### 2a. Emergency Medical and Dental Expenses

#### 2a.1

**We** will reimburse the **Reasonable** medical or **Hospital** expenses **You** incur until **You** return to **Your Country of Residence**, if **You** become **Sick** or **Injure** yourself **Overseas** whilst on **Your Journey**.

- a) The medical or **Hospital** expenses must have been incurred on the advice of a

**Medical Practitioner.**

- b) **You** must make every effort to keep **Your** medical or **Hospital** expenses to a minimum.
- c) If **We** determine that **You** should return to **Your Country of Residence** for treatment and **You** do not agree to do so then **We** will pay **You** the amount, which **We** determine would cover **Your** medical expenses and related costs had **You** agreed to **Our** recommendation. **You** will then be responsible for any ongoing or additional costs relating to or **Arising** out of the event **You** have claimed for.
- d) In the case of **Emergency** dental treatment due to an **Injury**, the treating dentist must certify in writing that treatment was for the relief of sudden and acute pain to sound and natural teeth. The maximum payable for such dental treatment is USD 500

The maximum amount **We** will pay for all claims combined under this Section is shown under the Table of Benefits.

There is a standard excess of USD 50 applicable on each claim under this section.

#### 2a.2

**We** will not pay for losses:

- a) When **You** have not notified **Us** as soon as possible of **Your** admittance to **Hospital**, or

**You** do not take **Our Reasonable** advice following the notification.

- b) Relating to treatment by a chiropractor or physiotherapist, unless approved by **Us**.
- c) If **You** do not take **Our Reasonable** advice or that of any assistance company **We** appoint.
- d) Incurred for donation of any body organ by **You** and costs of obtaining the organ including all costs incurred by the donor during organ transplant.
- e) Dental care, except as a result of **Injury** caused by **Accident** to **Sound Natural Teeth** while this policy is in effect
- f) For damage to dentures, dental prostheses, bridges or crowns.
- g) Relating to dental treatment involving the use of precious metals or for cosmetic dentistry.
- h) Incurred within **Your Country of Residence**.
- i) Any treatment that can reasonably be delayed until **You** return to **Your Country of Residence**.
- j) Any treatment that **You** knew would be required prior to purchasing the policy
- k) Regular treatment(s) / check-ups.

**You must check General Exclusions for other reasons why We will not pay.**

## 2b. Overseas Medical Expenses for Traditional Chinese Medicine

### 2b.1

**We** will reimburse **You** the expenses incurred in relation to treatment by a **Chinese Physician**, which are necessarily incurred whilst **Overseas** due to an **Injury** or an **Illness** incurred during **Your Journey**.

The maximum amount **We** will pay for all claims combined under this Section is shown under the Table of Benefits.

### 2b.2

**We** will not pay for expenses:

- a) **Arising** from non-**Emergency** check-ups.
- b) Incurred in **Your Country of Residence**.
- c) Relating to any treatment that can reasonably be delayed until **You** return to **Your Country of Residence**.

There is a standard excess of USD 50 applicable on each claim under this section.

**You must check General Exclusions for other reasons why We will not pay.**

## 2c. Return Treatment in Home Country

### 2c.1

**We** will reimburse the **Reasonable** medical or **Hospital** expenses **You** incur in **Your Country of Residence** up to a limit not exceeding USD5,000, after **You** return to **Your Country of Residence**, provided such expenses have resulted from an **Accident** or **Sickness Overseas** which occurred during the **Trip**.

When treatment had already been sought **Overseas**, **You** have up to a maximum of 30 days from the date that **You** returned to **Your Country of Residence** to continue treatment in **Your Country of Residence**.

When treatment has not been sought **Overseas**, an **Insured Person** must seek medical treatment in **Your Country of Residence** within 7 days of the date of return to **Your Country of Residence**. From the date of the first treatment in **Your Country of Residence**, **You** have up to a maximum of 30 days to continue treatment in **Your Country of Residence**.

The treatment must be carried out at any **Hospitals** or clinics that are legally registered in **Your Country of Residence**.

### 2c.2

**We** will not pay for expenses:

- a) where the expenses have resulted from an **Accident** or **Sickness Overseas** which has not occurred during the **Trip**; or
- b) where the expenses have resulted from an **Accident** or **Sickness Overseas** which has occurred during the **Trip** but has not been approved by **Us**; or
- c) any expenses related to Dental treatment.

There is a standard excess of USD 50 applicable on each claim under this section.

**You must check General Exclusions for other reasons why We will not pay.**

## 2d. Local Medical Expenses for Traditional Chinese Medicine (Return Treatment)

### 2d.1

**We** will reimburse **You**, for treatment or follow-up treatment in **Your Country of Residence** by a **Chinese Physician**, for an **Injury** or an **Illness** incurred whilst **Overseas** during **Your Journey**.

When treatment has not been sought **Overseas**, **We** will reimburse **You** for treatment in **Your Country of Residence** within 7 days of the date of return to **Your Country of Residence**. From the date of the first treatment in **Your Country of Residence**, **You** have up to a maximum of 30 days to continue treatment in **Your Country of Residence**

When treatment had already been sought **Overseas**, **You** have up to a maximum of 30 days from the date that **You** returned to **Your Country of Residence** to continue treatment in **Your Country of Residence**.

The maximum amount **We** will pay for all claims combined under Section 2d.1 is shown under the Table of Benefits i.e. up to USD750.

## 2d.2

**We** will not pay for expenses:

- a) That are not related to an **Injury** or **Illness** incurred whilst **Overseas** during **Your Journey**, or are not related to an incident that can be claimed under Section 2 of this policy wording.
- b) **Arising** from non-**Emergency** check-ups.

The maximum amount **We** will pay for all claims combined under this Section is shown under the Table of Benefits.

There is a standard excess of USD 50 applicable on each claim under this section. (a)

**You must check General Exclusions for other reasons why We will not pay.**

## 2e. Out-of-country COVID-19 Diagnosis Quarantine Allowance

### 2e.1

**We** will pay up to USD100 per day per person for up to 14 consecutive days, if while **Overseas**, **You** test positive for COVID-19, and as a result are unexpectedly placed into mandatory **Quarantine** outside **Your Country of Residence**.

**We** will pay the amount specified above to cover reasonable and necessary accommodation costs, meals or other expenses directly related to **Quarantine**. This benefit will not apply where

**Quarantine** measures are mandatory for all arriving passengers or **Quarantine** mandates exist for all passengers from a particular country/region of origin.

**We** will not cover any loss if **You** are travelling against a **Medical Practitioner's** or doctor's advice, or any claim arising from **You** acting in a way that goes against the advice of a Medical Practitioner or doctor (including, but not limited to, travelling with COVID-19 symptoms).

Any claim for Out-of-country COVID-19 Diagnosis Quarantine Allowance shall be offset against any amount **We** have paid or are liable to pay under Travel Cancellation, Travel Postponement, Travel Curtailment and/or Travel Interruption in respect of the same event.

**You must check General Exclusions for other reasons why We will not pay.**

## 3. Emergency Assistance Services

**We** have appointed an emergency assistance provider, Zurich Emergency Assist, to provide and arrange emergency assistance services 24 hours a day throughout the year whilst **You** are travelling on **Your Journey**.

**We** shall not be liable to **You** (whether in contract, tort (including negligence) breach of statutory duty or otherwise) arising out of or in connection with the acts or omissions of Zurich Emergency Assist arising out of or in connection with the subject matter of this policy.

### (a) ROUND-THE-CLOCK HOTLINE SERVICE

**You** may contact **Our** dedicated 24-hour hotline number at (+65) 6260 0168 to obtain immediate access to available services and/or advice in relation to the below services:

#### Travel Assistance

- Inoculation information
- Consulate and embassy information
- Visa information
- Weather information
- Loss of passport information
- Currency exchange information
- Flight information
- Emergency travel service arrangements

## Medical Assistance

- Medical referral service
- Dispatch of essential medication/medical equipment not locally available

### (b) EMERGENCY MEDICAL EVACUATION AND REPATRIATION

If during the period of insurance **You** sustain **Serious Injury** or suffer from **Serious Sickness** in the course of **Your Journey** which directly causes or results in the necessity of emergency medical evacuation, Zurich Emergency Assist shall arrange and pay for a medically supervised emergency evacuation of **You** to the nearest available Hospital that is appropriately equipped for the particular **Serious Injury** or **Serious Sickness**. In the event that **Your** condition stabilizes, Zurich Emergency Assist shall arrange and pay for a medically supervised repatriation to **Your Country of Residence** for continuous care and proper treatment. Zurich Emergency Assist retains the absolute right to decide the place to which **You** shall be evacuated and the means or method by which such evacuation shall be carried out having regard to all the assessed facts and circumstances to which Zurich Emergency Assist is aware at the relevant time.

### (c) REPATRIATION OF MORTAL REMAINS

If during the period of insurance **You** sustain **Injury** or suffers from **Sickness** which results in death in the course of **Your Journey**, Zurich Emergency Assist will arrange and pay for the repatriation of **Your** remains or ashes to **Your Country of Residence**.

### (d) HOSPITAL ADMISSION GUARANTEE

If during the period of insurance **You** sustain **Injury** or suffers from **Sickness** which results in the necessity of hospitalization in the course of **Your Journey**, Zurich Emergency Assist shall arrange a hospital admission deposit subject to a maximum of USD5,000.

### (e) COMPASSIONATE VISIT

#### (i) Hospitalization of Insured Person

If during the period of insurance **You** sustain **Injury** or suffers from **Sickness** which results in the necessity of hospitalization for at least seven (7) consecutive days in the course of **Your Journey**, Zurich Emergency Assist will arrange and pay for the cost of a round trip economy class air ticket and/or other reasonable transportation means for one of **Your** relatives or friends to visit **You**. **We** shall also reimburse **Your** visitor's associated hotel accommodation expenses, excluding the costs of drinks, meals and other hotel expenses,

subject to a maximum of USD130 per night up to seven (7) consecutive nights.

#### (ii) Death of Insured Person

If during the period of insurance **You** sustain **Injury** or suffers from **Sickness** which results in death in the course of **Your Journey**, Zurich Emergency Assist will arrange and pay for a round trip economy class air ticket and/or other reasonable transportation means for one **Immediate Family Member** for handling the necessary funeral arrangement procedures. **We** shall also reimburse the **Immediate Family Member** for his/her associated hotel accommodation expenses, excluding the costs of drinks, meals and other hotel expenses, subject to a maximum of USD130 per night up to five (5) consecutive nights.

#### (iii) Death of Immediate Family Member

If during the period of insurance an **Immediate Family Member** passes away while **You** are in the course of **Your Journey**, Zurich Emergency Assist will arrange and pay for a round trip economy class air ticket and/or any reasonable transportation means for **You** to return to **Your Country of Residence** for taking care of the necessary arrangements.

### (f) RETURN OF CHILD(REN)

If during the period of insurance **You** sustain **Injury** or suffers from **Sickness** in the course of **Your Journey** which results in the necessity of hospitalization overseas, leaving **Your Child(ren)** unattended, Zurich Emergency Assist will arrange and pay for a single trip economy class air ticket(s) and/or other reasonable transportation means for sending the Child(ren) back to **Your Country or Residence** with an appropriate escort, if necessary.

**We** will not pay for expenses:

- incurred for any service rendered without the authorization and/or intervention of Zurich Emergency Assist.
- incurred for any service rendered by another party apart from Zurich Emergency Assist.
- incurred for services provided by another party for which **You** are not liable to pay, or any expenses already included in the cost of a scheduled **Trip**.
- For a service not approved and arranged by Zurich Emergency Assist, or an authorized representative of Zurich Emergency Assist, provided always that **We** reserve the right to waive this exclusion in the event that **You** or **Your Travel Companion** cannot for reasons beyond **Your** control to notify Zurich Emergency Assist during an **Emergency** medical situation. In any event, **We** reserve the right to reimburse **You** only for those expenses incurred for service which Zurich Emergency Assist would have provided under the same circumstances.
- incurred if **You** do not take the advice Zurich Emergency Assist.
- incurred in **Your Country of Residence**.
- relating to funeral services or cremation or bringing **Your** remains back to **Your Country of Residence** unless it has been first approved by **Us**.

- (h) relating to the transportation of **Your** remains from **Your Country of Residence** to any other country.

**You must check General Exclusions for other reasons why We will not pay.**

### CONDITIONS OF PROVIDING ASSISTANCE UNDER SECTION 3 :

By using Zurich Emergency Assist, **You** accept that solely Zurich Emergency Assist makes decisions and organisation of the appropriate and necessary assistance measures.

- a) Zurich Emergency Assist e's decisions are taken solely in **Your** medical interest.
- b) Zurich Emergency Assist doctors contact the local medical facilities and, if needed, **Your** usual doctor to collect information allowing Zurich Emergency Assist to take the decisions best suited to **Your** health condition.
- c) Any refusal on **Your** part to comply in part or in full with the decisions taken by Zurich Emergency Assist means **You** exempt **Us** from any liability concerning the consequences of such an initiative and **You** will then lose all rights under this policy from the point **You** refused to comply with the decisions taken by Zurich Emergency Assist.
- d) Zurich Emergency Assist is entitled to the right to decide the means of evacuation and/or repatriation of remains and the final destination according to **Your** health condition and the treatment needed by **You**.
- e) The means of evacuation and repatriation assistance are based on Zurich Emergency Assist's opinion of **Your** medical condition and will include the arrangement of necessary transportation vehicles, necessary medical escorts and any other medically necessary items, at the discretion of Zurich Emergency Assist. Necessary transportation vehicles can be air ambulance, road ambulance, commercial airline, railway or any other appropriate means.
- f) Expenses incurred in the repatriation of mortal remains include service and material fees for embalming, preservation, cremation, delivery and cinerary casket.
- g) Zurich Emergency Assist interventions are carried out under the national and international laws and regulations. Zurich Emergency Assist services are subject to the required authorizations by the relevant authorities.
- h) Zurich Emergency Assist e and the Insurer cannot be held liable for delays in, or prevention of, the agreed services resulting from a case of force majeure or from events such as strikes, riots, civil commotion, restrictions to free circulation, sabotage, terrorist attacks, civil or foreign war, and any consequences of a source of radioactivity or of any other Act of God.
- i) **You** must transfer ownership of any transport tickets to Zurich Emergency Assist and **You** must undertake to send the unused transport tickets back to Zurich Emergency Assist or reimburse Zurich Emergency Assist with the amount recovered from the organization having issued the transport tickets.
- j) Zurich Emergency Assist reserves the right to amend or upgrade the transport tickets in order to deliver the assistance detailed under this section. Any benefits will be transferred to **Us**. Zurich Emergency Assist at its option will deduct the value of the unused transportation ticket from any claim amount payable to **You**.

## 4. Trip Cancellation

### 4.1

**We** will pay **Your** cancellation fees and lost deposits for travel, entertainment, and accommodation arrangements that **You** have paid in advance and cannot recover from any other source if **Your Journey** is cancelled due to circumstances neither expected nor intended by **You** or outside **Your** control occurring from the time **You** purchased **Your** travel package (except for item c)):

- a) Death, **Serious Injury**, **Serious Sickness**, or quarantine suffered to **You**, **Your Immediate Family Member**, **Your Children**, or **Your Travel Companion** regardless of whether they are insured or not.
- b) Unexpected outbreak of strike, riot or civil commotion **Arising at Your** planned destination.
- c) Serious damage to **Your Home** from fire, flood, typhoon, earthquake or tsunami within seven (7) days before the departure date which required **Your** presence on the premises on the departure date.
- d) Witness summons or jury service requiring **Your** presence.

This policy will only pay for any claim under any one of the Section 4 or 6 for the same event, but not for more than one of the sections.

The maximum amount **We** will pay for all claims combined under this Section is shown under the Table of Benefits.

### 4.2

**We** will not pay for losses:

- a) Due to the financial collapse, **Insolvency**, or the inability to carry on normal business due to financial reasons of any transport, entertainment, tour, or accommodation provider, or travel agent.
- b) Incurred due to prohibition or regulation by any government.
- c) Caused by a tour operator or wholesaler being unable to complete arrangements for any tour because there were not enough people to go on the tour.
- d) Relating to the death, **Injury** or **Sickness** of any person who resides outside of **Your Country of Residence**.
- e) Due to circumstances that is existent and/or announced before the issue date of **Your** policy, or the date **Your** travel tickets or confirmation of travel booking was issued, whichever is later.
- f) For any redeemed tickets or accommodation.
- g) Arising from the use of any air miles or credit card points or similar reward points accorded to **You** to pay for the Trip in part or in full.

**You must check General Exclusions for other reasons why We will not pay.**

#### 4.3 COVID-19 Extension

**We** will pay up to the limit in the Selected Plan under the Table of Benefits if the cancellation of **Your Trip**, for which **You** have paid under a contract and which is not refundable, is necessary and unavoidable as a result of **You** being diagnosed with COVID-19 prior to the scheduled **Trip** departure date

**We** will not pay for losses:

- a) any **Trip** cancellation solely due to epidemic- or pandemic-related travel advisories issued by governments, health authorities or the World Health Organization, by or for destination country or origin country.
- b) any **Trip** cancellation resulting solely from border closures, **Quarantine** or other government orders, advisories, regulations or directives.
- c) **Trip** cancellations if **You** cancel **Your Trip** because of disinclination to travel, change of mind or fear of travelling.
- d) **Trip** cancellation if an airline, hotel, travel agent or any other provider of travel and/or accommodation has offered a voucher or credit or re-booking of the **Trip** for cancellation refund or compensation.
- e) any loss if **You** are travelling against a **Medical Practitioner's** or doctor's advice, or any claim arising from **You** acting in a way that goes against the advice of a Medical Practitioner or doctor (including, but not limited to, travelling with COVID-19 symptoms).

The policy will only pay for a claim in respect of either Travel Cancellation or Travel Postponement for the same event, but not both.

**You must check General Exclusions for other reasons why We will not pay.**

## 5. Trip Curtailment / Interruption

### 5.1

**We** will pay the un-utilised and non-refundable portion of travel and accommodation expenses paid in advance by **You**, and / or the additional, **Reasonable** travel and accommodation expenses incurred after the commencement of **Your Overseas Journey**, due to any of the following events that requires **You** immediate return to **Your Country of Residence**:

- a) **Serious Injury** or **Serious Sickness** suffered by **You** resulting in advice from a **Medical Practitioner** to abandon **Your** planned **Journey** and return to **Your Country of Residence** immediately.
- b) The hijacking of the **Carrier** in which **You** are travelling as a passenger.
- c) A typhoon, earthquake or tsunami which prevents **You** from continuing **Your** scheduled

**Journey.**

- d) The unexpected outbreak of strike, riot or civil commotion **Arising**.

The maximum amount **We** will pay for all claims combined under this Section is shown under the Table of Benefits.

### 5.2

**We** will not pay for losses:

- a) Due to the financial collapse, **Insolvency**, or the inability to carry on normal business due to financial reasons of any transport, entertainment, tour, or accommodation provider, or travel agent.
- b) Incurred due to prohibition or regulation by any government.
- c) Caused by a tour operator or wholesaler being unable to complete arrangements for any tour because there were not enough people to go on the tour.
- d) Relating to the death, **Injury** or **Sickness** of any person who resides outside of **Your Country of Residence**.
- e) Due to circumstances that is existent and/or announced before the issue date of **Your** policy, or the date **Your** travel tickets or confirmation of travel booking was issued, whichever is later.
- f) For any redeemed tickets or accommodation.
- g) Arising from the use of any air miles or credit card points or similar reward points accorded to **You** to pay for the Trip in part or in full.

**You must check General Exclusions for other reasons why We will not pay.**

#### 5.3 COVID-19 Extension For Trip Curtailment Only

**We** will pay up to the limit in the Selected Plan under the Table of Benefits if the disruption of **Your Trip** is necessary and unavoidable because **You** are diagnosed with COVID-19 while travelling and need to return to **Your Country of Residence** earlier than planned. In that event, **We** will cover:

1. reasonable and necessary travel and accommodation expenses for which **You** have paid, and which are not refundable.
2. reasonable and necessary additional travel costs to return back to Singapore

**We** will not pay for losses:

- (a) resulting solely from border closures, **Quarantine** or other government orders, advisories, regulations or directives.

- (b) any loss if **You** are travelling against a **Medical Practitioner's** or doctor's advice, or any claim arising from **You** acting in a way that goes against the advice of a **Medical Practitioner** or doctor (including, but not limited to, travelling with COVID-19 symptoms).

**You must check General Exclusions for other reasons why We will not pay.**

## 6. Trip Postponement (Wise Traveller Premium only)

### 6.1

**We** will pay the administrative charges imposed on **You** as a result of **You** postponing **Your Journey** due to any of the following events occurring within 30 days of **Your** scheduled departure days (except c):

- Death, **Serious Injury**, **Serious Sickness**, or a mandatory quarantine suffered to **You**, **Your Immediate Family Member**, **Your Children**, or **Your** dependent, regardless of whether they are insured or not.
- Unexpected outbreak of strike, riot or civil commotion **Arising** out of circumstances beyond **Your** control at **Your** planned destination.
- Serious damage to **Your Home** from fire, flood, typhoon, earthquake or tsunami within seven days before the departure date which required **Your** presence on the premises on the departure date.
- Witness summons.

This policy will only pay for any claim under any one of the Section 4 or 6 for the same event, but not for more than one of the sections.

The maximum amount **We** will pay for all claims combined under this Section is shown under the Table of Benefits.

### 6.2

**We** will not pay for expenses:

- Due to the financial collapse, **Insolvency**, or the inability to carry on normal business due to financial reasons of any transport, tour or accommodation provider, or travel agent.
- Incurred due to prohibition or regulation by any government.
- Caused by a tour operator or wholesaler being unable to complete arrangements for any tour because there were not enough people to go on the tour.
- Relating to the death, **Injury** or **Sickness** of any person who resides outside **Your Country of Residence**.
- Due to circumstances that is existent and/or announced before the issue date of **Your** policy, or the date **Your** travel tickets or confirmation of travel booking was issued, whichever is later.

- For any redeemed tickets or accommodation.
- Arising from the use of any air miles or credit card points or similar reward points accorded to **You** to pay for the Trip in part or in full.

**You must check General Exclusions for other reasons why We will not pay.**

### 6.3 COVID-19 Extension

**We** will pay up to the limit in the Selected Plan under the Table of Benefits below if the postponement of **Your Trip**, for which **You** have paid under a contract and which is not refundable, is necessary and unavoidable as a result of **You** being diagnosed with COVID-19 prior to the scheduled **Trip** departure date.

**We** will not pay for losses:

- any **Trip** postponement solely due to epidemic- or pandemic-related travel advisories issued by governments, health authorities or the World Health Organization, by or for destination country or origin country.
- any **Trip** postponement resulting solely from border closures, **Quarantine** or other government orders, advisories, regulations or directives.
- We** will not cover **Trip** postponement if **You** cancel **Your Trip** because of disinclination to travel, change of mind or fear of travelling.
- Trip** postponement if an airline, hotel, travel agent or any other provider of travel and/or accommodation has offered a voucher or credit or re-booking of the **Trip** for cancellation refund or compensation.
- any loss if **You** are travelling against a **Medical Practitioner's** or doctor's advice, or any claim arising from **You** acting in a way that goes against the advice of a **Medical Practitioner** or doctor (including, but not limited to, travelling with COVID-19 symptoms).

The policy will only pay for a claim in respect of either Travel Cancellation or Travel Postponement for the same event, but not both.

**You must check General Exclusions for other reasons why We will not pay.**

## 7 Travel Misconnection

### 7.1

**We** will pay in the event that **You** miss **Your** confirmed onward travel connection at the transfer point due to the late arrival of **Your** scheduled incoming connecting transport conveyance and no other transportation is available to **You** within 8 consecutive hours of **Your** arrival at the transport point.



The maximum amount **We** will pay for all claims combined under this Section is shown under the Table of Benefits.

## 7.2

**We** will not pay:

- a) Due to the financial collapse, **Insolvency**, or the inability to carry on normal business due to financial reasons of any transport, tour or accommodation provider, or travel agent.
- b) **Arising** from any circumstances which began or was announced before the issue date of **Your** policy or on the date **Your** travel tickets or confirmation of booking was issued, whichever is later.
- c) **Arising** from **Your** failure to check in as according to the itinerary supplied to **You**, or if **You** fail to obtain written confirmation from the **Carriers** or their handling agents of the number of hours delayed & the reason for such delay.
- d) Due to hijacking.

**You must check General Exclusions for other reasons why We will not pay.**

## 8 Travel Delay

### 8.1

**We** will pay **You** for each full consecutive 6 hour delay if a disruption to **Your Journey**, for a period of at least 6 consecutive hours from the scheduled time of **Your Carrier's** departure as specified in **Your** itinerary, **Arises** from strike or industrial action, adverse weather conditions, mechanical breakdown, derangement, or structural defect of the **Carrier You** were scheduled to travel aboard.

The maximum amount **We** will pay for all claims combined under this Section is shown under the Table of Benefits.

### 8.2

**We** will not pay:

- a) Due to the financial collapse, **Insolvency**, or the inability to carry on normal business due to financial reasons of any transport, tour or accommodation provider, or travel agent.
- b) **Arising** from any circumstances which began or was announced before the issue date of **Your** policy or on the date **Your** travel tickets or confirmation of booking was issued, whichever is later.
- c) If **You** have not departed **Your Home** to commence **Your Journey**, or the period of delay allows sufficient time for **You** to return to **Your Home**.
- d) **Arising** from **Your** failure to check in as according to the itinerary supplied to **You**, or if **You**

- fail to obtain written confirmation from the **Carriers** or their handling agents of the number of hours delayed & the reason for such delay.
- e) Due to hijacking.

**You must check General Exclusions for other reasons why We will not pay.**

## 9 Luggage Delay

### 9.1

**We** will pay **You** for each full consecutive 6 hour delay if **Your Luggage** is delayed, misdirected or misplaced by the **Carrier**. Delays will be calculated from the time the responsible **Carrier** arrives at **Your** travel destination.

Any payments made under this Section will be deducted from claims made under Section 10 for the same event.

The maximum amount **We** will pay for all claims combined under this Section is shown under the Table of Benefits.

### 9.2

**We** will not pay:

- a) If **You** do not report the delay within 24 hours to an appropriate authority, and provide **Us** with a written statement from whomever **You** reported it to.
- b) If **You** are entitled to be adequately reimbursed by the **Carrier** who was responsible for **Your** delayed **Luggage**.
- c) If **Your Luggage** is delayed on the flight returning **You** to **Your Country of Residence**.

**You must check General Exclusions for other reasons why We will not pay.**

## 10 Loss or Damage to Luggage and Personal Effects

### 10.1

**We** will pay the repair cost, or replacement value, less **Depreciation**, of **Luggage** and **Personal Effects** which are stolen, **Accidentally** damaged or permanently lost.

- a) **You** must provide receipts for **Your** items, to justify the amount of **Your** claim. If **You** are unable to submit receipts **We** may be able to accept alternate proof of ownership and

- value for **Your** items, as agreed upon by **Us** on a case by case basis.
- b) **We** also have the option to repair or replace the **Luggage** and **Personal Effects** instead of paying **You**.
  - c) If **You** are partially reimbursed by **Your Carrier** or other third party, **We** will pay the difference between the amount of **Your** loss and what **You** were reimbursed, up to the limit of **Your** cover, less **Depreciation**.
  - d) When determining the classification of an item, **We** will use the item's intended primary function as determined by the manufacturer. E.g. camera phones such as iPhone and Nokia N95 will be assessed as mobile phones.
  - e) **Luggage** and **Personal Effects** left in a motor vehicle are only covered, during daylight hours and must have been in a **Locked Storage Compartment** and forced entry must have been made. The most **We** will pay if **Your Luggage** and **Personal Effects** are stolen from the **Locked Storage Compartment** of an unoccupied vehicle is USD200 for each item and USD750 in total for all stolen items.

The maximum amount **We** will pay for all claims combined under this Section is shown under the Table of Benefits.

## 10.2

**We** will not pay for losses:

- a) Above the original purchase price, replacement price or repair cost of any item, whichever amount is lower.
- b) If **You** do not report the loss, theft or misplacement within 24 hours to the police and if applicable to an office of the **Carrier** **You** were travelling on when the loss, theft or damage occurred, and if **You** cannot prove that **You** made such report by providing **Us** with a written statement from whoever **You** reported it to.
- c) If the loss or damage is not supported by proof of ownership, value and age.
- d) Relating to cash, or traveler's cheques.
- e) If **Your Valuables**, **Personal Computer** equipment or camera/ camera equipment or other electronic items/ equipment is transported in the cargo hold of a **Carrier**.
- f) If the loss, theft or damage is to items left behind in a taxi, hotel or motel room after **You** have checked out or items left behind after **You** have disembarked from the **Carrier**.
- g) If the loss, theft or damage is to watercraft of any type (other than surfboards) or bicycles.
- h) If the **Luggage** or **Personal Effects** was being sent unaccompanied or under a freight contract.
- i) If the loss of, or damage **Arises** from any process of cleaning, repair or alteration.
- j) If the loss of or damage **Arises** from ordinary wear and tear, deterioration, atmospheric or weather conditions, electrical or mechanical breakdown, insects, rodents or vermin.
- k) If the **Luggage** or **Personal Effects** was left **Unsupervised** in a **Public Place**.
- l) If the **Luggage** and **Personal Effects** were left unattended in a motor vehicle unless it

- was locked in the boot or **Locked Storage Compartment**, or were left overnight in a motor vehicle even if it was in the **Locked Storage Compartment**.
- m) If the **Luggage** or personal effect is fragile, brittle or an electronic or mechanical component is broken or scratched – unless either:
    - it is the lens of spectacles, binoculars or photographic or video equipment; or
    - the breakage or scratch was caused by a crash involving a vehicle in which **You** are travelling.
  - n) If the loss, theft or damage occurs in **Your Country of Residence**.
  - o) If the loss or damage is to sporting equipment whilst in use (including surfboards).

**You must check General Exclusions for other reasons why We will not pay.**

## 11 Loss of Travel Documents

### 11.1

**We** will reimburse **You** the replacement costs (including essential and **Reasonable** communication, travel and accommodation costs to obtain replacements) of travel documents, including passports, traveler's cheques and other necessary travel documents, which are essential for **You** to complete the **Trip**, when such loss **Arises** from robbery, burglary, or theft while **You** are **Overseas** on **Your Journey**.

The maximum amount **We** will pay for all claims combined under this Section is shown under the Table of Benefits.

### 11.2

**We** will not pay for losses:

- a) If **You** do not report the robbery or theft within 24 hours to the police and if applicable to an office of the **Carrier** **You** were travelling on when the loss, theft or misplacement occurred, or in the case of traveler's cheques to the issuing bank or **Relative** company, and if **You** cannot prove that **You** made such report by providing **Us** with a written statement from whoever **You** reported it to.
- b) If the expenses are incurred due to the fraudulent use of traveler's cheques or credit cards.
- c) For **Reasonable** transport and accommodation expenses that have not been first approved by **Us**.
- d) Loss of credit cards or replacement of credit cards, or replacement of Identity Cards, Employment passes, Fin cards, Social Visit passes or any kind of passes and driving licenses.
- e) Loss of cash cards or any other cards having a stored value.

**You must check General Exclusions for other reasons why We will not pay.**

## 12 Theft of Cash

### 12.1

**You** are covered up to the amount specified on **Your** policy schedule for theft of **Your** own cash. Cash is only covered whilst being carried on **Your** person or secured in a locked safety deposit box.

In the event of a claim for loss of cash **You** must provide evidence of the initial withdrawal of the cash.

The maximum amount **We** will pay for all claims combined under this Section is shown under the Table of Benefits.

### 12.2

**We** will not pay for losses:

- a) If **You** do not report the robbery or theft within 24 hours to the police and if applicable to an office of the **Carrier You** were travelling on when the theft occurred, and if **You** cannot prove that **You** made such report by providing **Us** with a written statement from whoever **You** reported it to.
- b) If **You** do not exercise **Reasonable** care in protecting **Your** cash.
- c) Regarding shortages due to error, omission, exchange or **Depreciation** in value.
- d) Regarding loss of money not in the personal custody of the **Insured Person**.

**You must check General Exclusions for other reasons why We will not pay.**

## 13 Adventurous Activities (Wise Traveller Premium only)

### 13.1

Notwithstanding General Exclusion 15, this policy is extended to cover the **Insured Person** in respect of death or **Injury** which may be sustained resulting from engaging in or practicing for:

- a) Bungee jumping;
- b) Sky diving;
- c) Paragliding;
- d) Helicopter rides for sightseeing;
- e) Hot air ballooning;
- f) Jet skiing;
- g) Mountaineering at mountains below the height of three thousand (3,000) metres above

sea level;

- h) Skiing or snowboarding all within official approved areas of a ski resort;
- i) Canoeing or white water rafting with a qualified guide and below Grade 4 (of International Scale of River Difficulty);
- j) Underwater activities involving artificial breathing apparatus for diving up to a maximum depth of thirty (30) metres with a qualified diving instructor or a qualified divemaster and with recognised diving certification.

Provided always that the above activities are done for leisure purposes with a licensed operator and generally available to the general public without prohibitions other than the standard safety requirement and general medical warning. **You** will also need to adhere to all safety requirements, equipped and wear appropriate safety equipment and always act under the instruction of a qualified or licensed operator or safety officer. All other terms, conditions and Exclusions of this policy continue to apply.

## 14 Terrorism Cover (related to delays or Trip curtailment only) - (Wise Traveller Premium only)

### 14.1

**We** will pay **You** for losses which may be sustained through any Act of **Terrorism**. Where an **Insured Person** is insured under more than one policies with **Us** covering Act of **Terrorism**, **Our** maximum liability for any and all claims **Arising** directly or indirectly from any Act of **Terrorism** shall be limited to one policy only and for any losses covered under Sections 5, 7 and 8 of this policy **Arising** directly from an Act of **Terrorism** during the **Trip** (up to the limit of the relevant Section applicable for the relevant plan), Provided always that **Our** maximum aggregate liability in respect of such Act of **Terrorism** shall be limited to the maximum limit under the **Terrorism** Cover of the relevant plan as set out in the Table of Benefits regardless of any one loss occurrence, regardless of the total amount of claims incurred by **Us Arising** from such Act of **Terrorism**.

All other terms, conditions and Exclusions of this policy continue to apply.

The maximum amount **We** will pay for all claims combined under this Section is shown under the Table of Benefits.

### 14.2

**We** will not pay for expenses:

- a) If the Act of **Terrorism** involves the use of biological agents, chemical agents or nuclear devices.
- b) any action taken in controlling, preventing, suppressing or in any Act of **Terrorism** including but not limited to:
  - i. the use or threat of force, violence and/or
  - ii. harm or damage to life or to property (or the threat of such harm or damage) including, but

not limited to, nuclear radiation and/or contamination by chemical and/or biological agents, by any person(s) or group(s) of persons, committed for political, religious, ideological or similar purposes, expressed or otherwise, and/or to put the public or any section of the public in fear.

**You must check General Exclusions for other reasons why We will not pay.**

## 15 Hostage / Kidnap (Wise Traveller Premium only)

### 15.1

**We** will pay a daily benefit in the event that the **Insured Person** is kidnapped or wrongly confined, abducted or restrained by criminal force during the **Journey** while outside **Your Country of Residence**. For the purpose of this Section, the kidnap cannot be committed by any **Insured Person** or his/her family member, **Travel Companion** or close business associate whether acting alone or in collusion with others.

The kidnap must be reported to the police having jurisdiction at the place of the kidnap within twenty-four (24) hours after such incident. Any claim must be accompanied by written documentation from the police.

The maximum amount **We** will pay for all claims combined under this Section is shown under the Table of Benefits.

**You must check General Exclusions for other reasons why We will not pay.**

## 16 Loss of Credit Card (Wise Traveller Premium only)

### 16.1

If the adult **Insured Person** suffers financial loss as a direct result of the fraudulent use of his/her personal credit card(s) following its loss **Arising** out of robbery, burglary or theft while the adult **Insured Person** is outside **Your Country of Residence** during the **Journey**. **We** will pay for

- a) such unauthorised charges were made **Overseas** with **Your** stolen payment card; or
- b) **Your** payment card was not stolen, but such unauthorised charges were made through any **Overseas** ATM withdrawal, in-store or online purchases were **Your** payment card information; then
  - i. In respect of a) above, **We** will reimburse the unauthorized charges incurred 12 hours prior to **Your** first reporting the event to **Your** payment card issuer(s); and
  - ii. In respect of b) above, **We** will reimburse charges incurred prior to **Your** first reporting the event to **Your** payment card issuer(s), or **Us**, or, **Your** payment card issuer(s) notifying **You** about the event (whichever occurs first).

Any reimbursement by **Us** under this Section is subject to the following conditions:

- a) **We** will only pay for such unauthorized charges which **You** are made liable for, under the terms and conditions of **Your** payment card;
- b) **You** must report the theft of **Your** payment card to issuer (s) and to **Us** within 24-hours of discovering that **Your** payment card was stolen or any unauthorized changes were made from it;
- c) **You** must complete and return any documents including but not limited to claims forms, police reports, demands, notices and any other relevant documents **You** may be asked to provide;
- d) **You** must comply with all the terms and conditions by which **Your** payment card was issued; and
- e) **Your** payment card must be valid and in good standing for coverage to apply

The maximum amount **We** will pay for all claims combined under this Section is shown under the Table of Benefits.

### 16.2

**We** will not pay for expenses:

- a) If **You** do not report the robbery or theft within 24 hours to the police, and to the issuing bank or company, and if **You** cannot prove that **You** made such report by providing **Us** with a written statement from whoever **You** reported it to.
- b) If **You** cannot prove that **You** made a report to the above relevant persons by providing **Us** with a written statement from them.
- c) When the amount is covered by any guarantee given by the bank or issuing company to **You** as the holder of the credit cards covering such losses.
- d) Relating to expenses incurred due to the fraudulent use of credit cards.

**You must check General Exclusions for other reasons why We will not pay.**

## 17 Golf Insurance (Hole-In-One) - (Wise Traveller Premium only)

### 17.1

If during the **Journey** outside **Your Country of Residence**, an adult **Insured Person** achieves a hole-in-one in an organised event at any 18-hole golf course, **We** will reimburse him/her for the cost of one round of celebratory drinks.

The adult **Insured Person** must provide written evidence from the golf club official that hole-in-one was achieved, and provide original receipt for the cost of celebratory drinks.

The maximum amount **We** will pay for all claims combined under this Section is shown under the Table of Benefits.

**You must check General Exclusions for other reasons why We will not pay.**

## 18 Personal Liability

### 18.1

**We** will cover **Your** legal liability for payment of compensation in respect of:

- Death or bodily **Injury** to someone else, and/or
- Physical loss or damage to someone else's property as a result of an incident that happens during **Your Journey**.

**We** will also reimburse **Your Reasonable** legal costs and legal expenses for settling or defending the claim made against **You**. **We** will decide whether the costs were **Reasonable**. **You** must not accept liability or promise to pay the claim without prior written approval from **Us**.

The maximum amount **We** will pay for all claims combined under this Section is shown under the Table of Benefits.

### 18.2

**We** will not pay for losses or expenses:

- a) Relating to bodily **Injury** to **You**, **Your Travel Companion**, or to an **Immediate Family Member** or employee of either of **You**.
- b) Relating to damage to property belonging to **You**, or in **Your** care or control, or belonging to, or in the care or control of, an **Immediate Family Member** of yours, or **Your Travel Companion**, or to an employee of either of **You**.
- c) **Arising** out of the ownership, custody or use of any animal, aerial device, watercraft or mechanically propelled vehicle.
- d) **Arising** out of the conduct of a business, profession or trade.
- e) Relating to any loss, damage or expenses which are covered or should have been covered under a statutory or compulsory insurance policy, statutory or compulsory insurance or compensation scheme or fund, or under workers' compensation legislation, an industrial

award or agreement, or **Accident** compensation legislation.

- f) Relating to any fine, penalty or aggravated, punitive or exemplary or liquidated damages.
- g) Caused by disease that is transmitted by **You**.
- h) Concerning any relief or recovery other than monetary amounts.
- i) Relating to liability **Arising** from a contract that imposes on **You** a liability which **You** would not otherwise have.
- j) Due to assault and/or battery committed by **You** or at **Your** direction.
- k) Relating to conduct intended to cause personal **Injury**, property damage or liability with reckless disregard for the consequences of **You** or any person acting with **Your** knowledge, consent or connivance.

**You must check General Exclusions for other reasons why We will not pay.**

## 19 Rental Vehicle Excess

### 19.1

**We** will pay **You** the excess or deductible that is imposed on **You** following loss or damage resulting from an automobile **Accident** to the **Rental Vehicle** **You** have hired.

Cover will only apply when **You** have hired the rental car from a licensed rental agency, and have included sufficient motor insurance policy for the duration of **Your** rental period. **You** must be named as either a driver or co-driver on the **Rental Vehicle** agreement.

### 19.2

**We** will not pay for expenses:

- a) If **You** are operating the **Rental Vehicle** outside of compliance with any regulations advised by the rental agency, **Your** motor insurance policy, and/or any applicable regulations of the country **You** are driving in.
- b) If the loss of or damage **Arises** from ordinary wear and tear, deterioration, atmospheric or weather conditions, insects, rodents or vermin.
- c) If **You** do not report the vehicle **Accident** immediately to the police and if **You** cannot prove that **You** made such report by providing **Us** with a written statement from whomever **You** reported it to.
- d) **Your** claim **Arises** from motor sports of any kind
- e) **Your** claim **Arises** from any currency exchange rate changes
- f) Any Miscellaneous charges imposed on **You**, including but not limited to administrative charges & credit card transactional charges which may be imposed by the rental agency
- g) Where **Your** claim is not a valid Vehicle hire insurance claim, regardless of the **amount**
- h) Relating to losses resulting from damage to:
  - a. Windscreens or tyres;

- b. Undercarriage unless admitted and payable as a valid claim under the **Rental Vehicle's** Motor Insurance Policy and provided an excess or deductible has been imposed on **You**.

**You must check General Exclusions for other reasons why We will not pay.**

## 20 Cruise Vacation (Extension)

### 20.1

This policy extends to cover "Cruise To Nowhere" journey taken by an Insured Person. The journey shall be deemed to commence when he/she gets onboard the scheduled cruise at a designated port for the purpose of starting the journey; and cease when he/she returns to the designated port upon completion of such journey, or upon policy expiry, whichever is earlier.

The below benefits are offered in addition to any "Cruise to Nowhere" journey:

### 20.2 Cruise Cancellation

**We** shall reimburse **You** up to the applicable Sum Insured shown in the Table of Benefits for forfeiture of payments made in relation to the cruise tour and/or additional and reasonable travel fare incurred by the **Insured Person** to go to the next scheduled destination of the cruise tour, if any, for the purpose of re-joining the cruise tour in the event that the Common Carrier in which the **Insured Person** has arranged to travel to board the cruise is delayed for at least eight (8) hours from the scheduled arrival time specified in the itinerary due to inclement weather, natural disasters, equipment failure, hijack or strike by the employees of the **Carrier** during the course of a Journey which is the sole and direct cause of the **Insured Person** being unable to board the cruise for the cruise tour at the designated boarding port in consequence.

The reimbursement of the **Insured Person** for any forfeiture of payments payable under this Section (ii) - Cruise Cancellation shall be calculated in proportion to the number of days of absence on the cruise.

### Exclusions Applicable to Section 20.2 - Cruise Cancellation

**We** shall not pay any benefits under this section for loss, Injury, damage or liability suffered and/or sustained by or arising directly or indirectly as a result of or in connection with:

- a) Any loss which could be recoverable from any other source including but not limited to any loss that is covered by any other existing insurance scheme, government program, or which will be paid or refunded by a cruise, hotel, airline, travel agent or any other provider of travel and/or accommodation;

- b) Where the **Insured Person** fails to obtain written confirmation from the **Carrier** on the number of hours of and the reason for such delay;
- c) Any loss arising from any event or occurrence leading up to the relevant delay that were in existence and/or announced before:

- (i) the time of application for a single-trip policy; or
- (ii) in respect of an annual travel policy: (i) the application date; or (ii) the date stated on the receipt issued by the travel agent or **Carrier** operator for the confirmation of payment of travel ticket or tour, whichever is later;

- d) Any loss arising from late arrival of **Insured Person** at the airport or port (i.e. arrival at a time later than the time required for check-in or booking-in with the exception of late arrival due to strike by the employees of the **Carrier**).
- e) Failure of **Insured Person** to get on-board the first available alternative transportation offered by the administration of the relevant **Carrier**; or
- f) Any loss claimed under Section 4 - Trip Cancellation arising from the same cause.

### 20.3 Excursion Tour Cancellation

**We** shall reimburse **You** up to the applicable Sum Insured limit shown in the Table of Benefits for forfeiture of payments made in relation to the excursion tour organized by the cruise management if the excursion tour is cancelled due to **Injury** or **Sickness** of the **Insured Person** or adverse weather at the planned destination.

### Exclusion Applicable to 20.3 - Excursion Tour Cancellation

**We** shall not pay any benefits under this section for loss, Injury, damage or liability suffered and/or sustained by or arising directly or indirectly as a result of or in connection with:

- a) Any loss which could be recoverable from any other source including but not limited to any loss that is covered by any other existing insurance scheme, government program, or which will be paid or refunded by a cruise, hotel, airline, travel agent or any other provider of travel and/or accommodation.

### 20.4 Satellite Phone Fee

**We** shall reimburse **You** up to the applicable Sum Insured shown in the Table of Benefits for satellite phone call expenses incurred by the **Insured Person** whilst on board a cruise during the course of a **Trip**, in the event that the **Insured Person** must return directly to Singapore following **Injury** or **Sickness** of the **Insured Person** or traveling companion which was suffered during the course of a **Trip** and which prevents the **Insured Person** from continuing the **Trip**.

### Exclusions applicable to Section 20.4 - Satellite Phone Fee:

**We** shall not pay any benefits under this section for loss, **Injury**, damage or liability suffered and/or sustained by or arising directly or indirectly as a result of or in connection with:

- a) Where the **Insured Person** fails to furnish an official receipt issued by the satellite phone service provider as proof of satellite phone call expenses incurred by the **Insured Person**;
- b) Where the **Insured Person** fails to obtain and provide a written report from the **Medical Practitioner** or doctor certifying the **Injury** or **Sickness** suffered by the **Insured Person** or traveling companion whilst on board the cruise; or
- c) Any loss which could be recoverable from any other source including but not limited to any loss covered by any other existing insurance scheme, government program, or which will be paid or refunded by a cruise, hotel, Common **Carrier**, travel agent or any other provider of travel and/or accommodation.

**You must check General Exclusions for other reasons why We will not pay.**

## GENERAL EXCLUSIONS

### We Will Not Pay Under Any Circumstances If:

- 1) **You** do not act in a **Reasonable** or **Reasonable** way to protect yourself and **Your** property and to minimize **Your** loss.
- 2) **You** have not been granted pre-approved by **Us** for the purchase of an additional or alternative transport or accommodation expenses that **You** wish to claim.
- 3) **Your** claim **Arises** from, is related to, or associated with any **Pre-Existing Medical Condition** that may give rise to **You** making a claim under this policy.
- 4) At the time of purchasing this policy or confirming travel tickets/booking during the period of insurance, **You** were aware of or could foresee a potential condition that may give rise to **You** making a claim under this policy.
- 5) **You** can recover **Your** losses or additional expenses from any other party.
- 6) **Your** claim is for a loss, which is recoverable by compensation under any workers compensation act or transport accident laws or by any government sponsored fund, plan or medical benefit scheme, or any other similar type legislation required to be effected by or under a law.
- 7) **Your** claim **Arises** because of any government prohibition or regulation including visa requirements.
- 8) **Your** claim **Arises** from illegal acts that results in action taken by customs, a government authority, or other official by confiscating, detaining or any destruction.
- 9) **Your** claim **Arises** because **You** did not follow advice in the mass media of any government or other official body's warning:
  - Against travel to a particular country or parts of a country; or;
  - Of a strike, riot, bad weather, civil commotion or contagious disease including **Epidemic or Pandemic**).

And **You** did not take appropriate action to avoid or minimise any potential claim under **Your** policy (including delay of travel to the country or part of the country referred to in the warning).

- 10) **Your** claim **Arises** from any act of war – whether war is declared or not – or from any rebellion, revolution, insurrection or taking of power by the military.
- 11) **Your** claim **Arises** from a nuclear reaction or contamination from nuclear weapons or radioactivity or biological and or chemical material(s), substance(s), compound(s) or the like used directly or indirectly for the purpose to harm or to destroy human life and or create public fear.
- 12) **Your** claim **Arises** from an **Epidemic** or **Pandemic** or a threat associated with an

#### Epidemic or Pandemic.

- 13) **Your** claim **Arises** from a mandatory quarantine, unless otherwise stated in the

benefit.

- 14) **You** claim **Arises** or is in anyway related to **You** being in control of any motorized vehicle, that **You** do not hold a relevant valid license for in **Your Country of Residence**.
- 15) **Your** claim **Arises** because of **Your** participation in:
  - Expedition, hunting trip, racing other than on foot but does not include ultramarathons, biathlons and triathlons
  - Private white water rafting grade 4 & above, open water sailing (more than 10 nautical miles offshore)
  - Mountaineering, rock climbing using ropes or climbing equipment
  - Trekking above three thousand (3,000) metres, unless they are:
    - i. Available to the general public without restriction, other than general health and fitness warnings;
    - ii. Provided by a recognize commercial local tour operator or activity provider;
    - iii. Provided under the guidance and supervision of qualified guides and/or instructors of the tour operator or activity provider and always subject to **You** following their advice and/or instruction; and
    - iv. Undertaken below six thousand (6,000) metres.
  - Scuba Diving, unless:
    - i. **You** are diving for recreational purposes (for the purpose of clarity, recreational diving does not include technical diving or diving as a professional diver);
    - ii. **You** are diving with a qualified dive instructor or dive master, or **You** hold a PADI certification or similar recognized certification (including maximum dive depths and bottom line) and to the standards and procedures set up by **Your** certifying agency; and
    - iii. Subject to (ii) above, Your planned dive depth does not exceed forty (40) metres and You are not diving alone.
  - **Extreme Sports and Sporting Activities**
  - Any professional competition or sports in which **You** receive any financial rewards or sponsorship
- 16) **Your** claim **Arises** because **You** are engaging in mining, oil rigging, aerial photography or handling explosive or **You** are engaging in any naval, military, air force, law enforcement, or civil defence service or operation.
- 17) **You** travel in, to or through Afghanistan, Cuba, the Democratic Republic of Congo, Iran, Iraq, Liberia, Sudan or Syria.
- 18) **Your** claim is in respect of travel booked or undertaken against the advice of any

#### Medical Practitioner.

- 19) **Your** claim **Arises** directly or indirectly from any metastatic or terminal **Illness** that was diagnosed prior to the policy being issued.
- 20) **Your** claim **Arises** directly or indirectly from any **Journey** for the purposes of obtaining any form of treatment **Overseas** or any elective treatment that **You** choose to undertake.
- 21) **Your** claim **Arises** from complication of pregnancy, **Childbirth**, related complications or any medically assisted conception unless otherwise stated in the benefit.



- 22) **Your claim Arises** from treatment for addiction to drugs or alcohol, or **You** are using a medical facility as a nursing, convalescent, or rehabilitation place.
- 23) **Your claim Arises** from any willful or intentional acts caused by mental and nervous disorder, anxiety, depressed, suicide or attempted suicide.
- 24) **Your claim Arises** from or is any way related to a sexually transmitted disease or **Your claim Arises** directly or indirectly from Human Immunodeficiency Virus (HIV) infection, Acquired Immune Deficiency Syndrome (AIDS).
- 25) **You** were under the influence of, or affected by alcohol or drugs – unless the drugs were prescribed by a medical advisor and taken in accordance with their instructions.
- 26) **Your claim** arises directly or indirectly from an act or threat of **Terrorism**, unless otherwise stated in the benefit.
- 27) Your claim involves the cost of preventive medication or preventive treatment including, but not limited to, vaccination or contraception.

## CLAIMS

### HOW TO MAKE A CLAIM

As soon as practicable, and in any case within 30 days after the date of occurrence of an event which may give rise to a claim, **You** must give written notification to **Us**. If **You** do not, **We** can reduce **Your** claim by the amount of prejudice **We** have suffered because of the delay.

**You** must give **Us** any information **We** reasonably ask for to support **Your** claim at **Your** expense, such as but not limited to police reports, valuations, medical reports, original receipts, proof of ownership, or proof of an item's age. If required, **We** may ask **You** to provide translations of **Your** documents into English at **Your** expense to enable **Us** assess **Your** claim.

If **You** cannot provide the requested proof of ownership, then **We** can reject **Your** claim.

**You** must co-operate with **Us** at all times in relation to the provision of supporting evidence and such other information as **We** may reasonably require.

- a) For medical, **Hospital** or dental claims, contact **Us** as soon as possible. **We** will require **You** to submit a medical report clearly outlining the diagnosis of the medical condition, any relevant past medical history and the required treatment plan.
- b) For damage or permanent loss of **Your** unchecked **Luggage** and **Personal Effects**, report it immediately to the police or the transport operator or provider **You** were travelling with when the loss or theft occurred within 24 hours and obtain a written statement of **Your** report.
- c) For damage or permanent loss of **Your Checked in Luggage**, caused by a **Carrier**, report the damage or misplacement within 24 hours to an appropriate official and obtain a written report, including any offer of settlement that they may make.

Please note that **We** will never pay more than **Your** actual loss.

### YOU MUST NOTIFY US OF HOSPITALIZATION

If **You** are hospitalized whilst on **Your Journey**, **You** or a member of **Your** traveling party must notify Zurich Emergency Assist immediately or as soon as reasonably possible.

### PHONE CHARGES

For local calls made to **Our** General Enquiries hotline or **Our** Claims hotline, **We** do not have a toll-free number. In any case **We** will not be responsible for any charges incurred by **You**, when **You** are contacting **Us** for any non-**Emergency** matters.

For urgent, **Overseas** phone calls placed to **Our** 24 Hour **Emergency** Assistance hotline, from outside **Your Country of Residence**, **We** will reimburse **You** up to a maximum of USD50 for any phone charges incurred for **You** to call **Us** from **Overseas** for **Emergency** matters.

### CLAIMS PROCESSING

**We** endeavour to process **Your** claim within 10 working days of **Us** receiving a completed claim form and all necessary documentation. If **We** need additional information, a written request will be sent to **You** within 10 working days. **We** will pay all claims in **US** Dollars / Singapore Dollars. The sole discretion of the currency for payment of claim will be with **Us**. The rate of currency exchange that will apply is the rate at the date of loss occurrence. No indemnity from **Us** will carry any interest.

### TO WHOM INDEMNITIES ARE PAYABLE

Indemnity for **Your** loss of life is payable to **Your** estate. All other indemnities of this policy are payable to **You**. All the relevant claim forms should be completed and submitted by **You**, if not, an authorization letter signed by **You** is required to proof that others have the right to make a claim instead of **You**.

Under Sections 2 to 3, in the event funds for **Emergency** medical treatment are guaranteed to the provider of healthcare by Zurich Emergency Assist or their authorized representative, indemnities will be payable directly to the provider of healthcare.

Indemnity for expenses under Sections 2 which **You** incur directly will be payable to **You**. Under Section 3 the benefits will be paid directly to the provider of service as indicated in each section.

### YOU MUST NOT ADMIT FAULT OR LIABILITY

In relation to any claim under this policy **You** must not admit that **You** are at fault, and **You** must not offer or promise to pay any money, or become involved in litigation, without **Our** approval.

### YOU MUST HELP US TO RECOVER ANY MONEY WE HAVE PAID

If **We** have a claim against someone in relation to the money **We** have to pay under this policy, **You** must do everything **You** can to help **Us** do that in legal proceedings. If **You** are aware of any third party that **You** or **We** may recover money from, **You** must inform **Us** of such third party.

If **You** intend to commence legal proceedings to recover **Your** costs or seek compensation against a third party, **You** must inform **Us** as soon as possible.

**We** will apply any money **We** recover from someone else under a right of subrogation in the following order:

1. To **Us**, **Our** administration and legal costs **Arising** from the recovery.
2. To **Us**, an amount equal to the amount that **We** paid to **You** under the policy.
3. To **You**, **Your** uninsured loss (less **Your** excess).
4. To **You**, **Your** excess.

Once **We** pay **Your** total loss **We** will keep all money left over.

If **We** have paid **Your** total loss and **You** receive a payment from someone else for that loss or damage, **You** must pay **Us** the amount of that payment up to the amount of the claim **We** paid **You**.

If **We** pay **You** for permanently lost, stolen or damaged property and **You** later recover the property or it is replaced by a third party, **You** must pay **Us** the amount of the claim **We** paid **You**.

If **We** pay **Your** claim and **You** receive a payment from someone else for the same costs, fees or expenses, **You** must pay **Us** the amount of that payment up to the amount of the claim **We** paid **You**.

**We** may seek reimbursement from **You** if **You** receive a payment from any other source for any amount of the claim **We** paid **You**.

### IF YOU CAN CLAIM FROM ANYONE ELSE, WE WILL ONLY MAKE UP THE DIFFERENCE

If **You** can make a claim against someone in relation to a loss or expense covered under this policy and **You** do not get paid the full amount of **Your** claim, **We** will make up the difference. **You** must claim from them first.

### SUBROGATION

At **Our** discretion, **We** may start, control and settle legal proceedings for **Our** own benefit in **Your** name to recover compensation or secure indemnity from any party in respect of anything covered by this policy. **We** may do so in **Your** name and on **Your** behalf. **You** also consent to **Us** seeking to recover any money **We** have paid to **You** from a third party.

**You** must help **Us** to do this, even if **We** have not yet paid **Your** claim, and even if the amount **We** pay is less than full compensation for **Your** loss.

### DUPLICATION OF COVER

If **You** are covered under more than one travel insurance policy underwritten by **Us** for the same **Trip**, cover will be effective only under one policy. **You** must let **Us** know which policy **You** want to claim under and henceforth, all the benefits under the policy **You** elected will apply. The other policy/policies for the same **Trip** is/are deemed to be void

In the event that **You** are covered under more than one insurance policy for the same peril underwritten by other insurance companies, including **Us**, **You** must seek compensation from other companies before submitting **Your** claim to **Us**. **We** will reimburse the balance if **You** do not get full compensation from other companies.

### ARBITRATION

If **We** admit liability for a claim but there is a dispute as to the amount to be paid, the dispute will be referred to an arbitrator. The arbitrator will be appointed jointly by **You** and **Us** in accordance with the law at the time. You may not take legal action against **Us** over the dispute before the arbitrator has reached a decision.

## GENERAL CONDITIONS

### AGE

In the event of any claim, the age of the **Insured Person** will be determined as at the date of **Injury** or **Illness** with reference to their date of birth.

### INTERPRETATION

This policy, certificate and the schedule shall be read together and any word or expression to which a specific meaning has been attached in any part of this policy, certificate or schedule shall bear such meaning wherever it may appear.

### CLERICAL ERROR

A clerical error by **Us** shall not invalidate an insurance which is otherwise validly in force, nor would it continue insurance otherwise not validly in force.

### SANCTIONS

Notwithstanding any other terms under this policy, we shall not be deemed to provide coverage or will make any payments or provide any service or benefit to any **Insured Person** or other party to the extent that such cover, payment, service, benefit and/or any business or activity of the insured would violate any applicable trade or economic sanctions law or regulation.

### RIGHT OF THIRD PARTIES

Any person or entity who is not a party to this policy shall have no rights under the Contracts (Rights of Third Parties) Act to enforce any terms of this policy.

### PERSONAL DATA PROTECTION

Please see the enclosed attachment to the policy regarding compliance with the Singapore Personal Data Protection Act (PDPA).



## CONTACT DETAILS

**For any General Enquiries call +65 6329 0972**

Monday to Friday, 9:00am to 12:30pm and 1:30pm to 5:00pm (Singapore Time)

**E-mail: [wisetraveller@abacare.com](mailto:wisetraveller@abacare.com)**

**For Claims Enquiries call +65 6260 0168**

Monday to Friday, 9:00am to 12:30pm and 1:30pm to 5:00pm (Singapore Time)

**E-mail: [claims.wisetraveller@zurich.com.sg](mailto:claims.wisetraveller@zurich.com.sg)**

**For 24 hour Emergency Assistance call +65 6260 0168**

This insurance is underwritten by Zurich Insurance Company Ltd (Singapore Branch).