CERTIFICATES OF INSURANCE

THE PLATINUM CARD®

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15-DAY OUT OF PROVINCE/COUNTRY EMERGENCY MEDICAL INSURANCE

Effective Date of this Certificate:
January 1, 2021

INTRODUCTION

Out of Province/Country Emergency Medical insurance for AMEX Cardmembers and insured persons.

Amex Bank of Canada has been issued group insurance policy PSI047257741 by Royal & Sun Alliance Insurance Company of Canada (the “Insurer”) to cover emergency medical expenses incurred by you while outside your Canadian province or territory of residence. This Certificate of Insurance summarizes the provisions of the group insurance policy applicable to your AMEX Card for Out of Province/Country Emergency Medical Insurance coverage.

IMPORTANT NOTICE - PLEASE READ CAREFULLY

• Travel insurance is designed to cover losses arising from sudden and unforeseeable circumstances. It is important that you read and understand your insurance before you travel as your coverage may be subject to certain limitations or exclusions.
• A pre-existing exclusion applies to medical conditions and/or symptoms that existed prior to your trip. Check to see how this applies in your policy and how it relates to your departure date, date of purchase, or effective date.
• The basic Cardmember is responsible for this insurance coverage, including coverage bound by any purchases made by a supplementary Cardmember below the age of majority.
• In the event of an accident, injury or sickness, your prior medical history may be reviewed when a claim is reported.
• Your insurance provides travel assistance. You are required to notify Global Excel Management Inc. prior to emergency treatment. Your insurance limits benefits should you not contact Global Excel Management Inc. immediately.
• Coverage is only available if you are a resident of Canada.
• This Certificate contains clauses which may limit the amounts payable.
• The policy contains a provision removing or restricting the right of the group person insured to designate persons to whom or for whose benefit insurance money is to be payable.

All italicized terms have the specific meaning explained in the “Definitions” section of this Certificate of Insurance.

WHAT TO DO IN A MEDICAL EMERGENCY?

If you have a medical emergency, you must call Global Excel Management Inc. (Global Excel) before you receive emergency services. Of course, if your medical condition prevents you from calling, we understand – however, you must call as soon as medically possible or, as an alternative, someone else may call on your behalf (relative, friend, nurse or doctor).

Global Excel can be contacted 24 hours a day, 7 days a week by calling:
1-800-243-0198 toll-free from the US & Canada, or +905-475-4822 collect from anywhere in the world
If you do not call Global Excel before you seek emergency services, or if you choose to seek care from a non-approved medical service provider, you will be responsible for 20% of your medical expenses covered under this insurance and not recovered from your government health insurance plan, to a maximum of $25,000. If, after reimbursement by your government health insurance plan, your claim exceeds $25,000, this insurance will pay 100% of any eligible expenses over and above $25,000.

DEFINITIONS

Throughout this Certificate of Insurance, all italicized terms have the specific meaning explained below.

**Accidental bodily injury** - bodily injury caused by an accident of external origin occurring during the period of insurance and being the direct and independent cause of the loss.

**Accommodation** - means an establishment providing commercial accommodations or in the business of operating a vacation rental marketplace and hospitality service for the general public.

**Basic Cardmember** - means the person in whose name Amex Bank of Canada has opened a Card account and does not include a supplementary Cardmember, provided always that the basic Cardmember’s Card account privileges have not expired, been revoked, terminated or suspended.

**Card** - means The Platinum Card®.

**Cardmember** - means a holder of a valid Basic or Supplementary Card from American Express issued in Canada by Amex Bank of Canada.

**Change in medication** - the addition of any new prescription drug, the withdrawal of any prescription drug, an increase in the dose of any prescription drug or a decrease in the dose of a prescription drug.

**Exceptions:**

- an adjustment in the dosage of insulin or Coumadin (Warfarin), if you are currently taking these drugs;
- a change from a brand name drug to an equivalent generic drug of the same dosage.

**Contamination** - the poisoning of people by nuclear, chemical and/or biological substances which causes illness and/or death.

**Departure point** - the place from which you depart your Canadian province or territory of permanent residence on the first day, and return to on the last day of your intended trip.

**Dependent child(ren)** - means an unmarried natural, adopted, step or foster child of the Cardmember or his or her spouse who is, on the effective date, at least 15 days old, dependent on the Cardmember or his or her spouse for support and:

- is under 21 years of age;
- is a full-time student who is under 25 years of age; or
- has a permanent physical impairment or a permanent mental disability.

**Effective date** - your date of departure from your Canadian province or territory of residence.

**Emergency** - any sudden and unforeseen event that begins during the period of insurance and makes it necessary to receive immediate treatment from a licensed physician or to be hospitalized. An emergency ends when the Insurer determines that you are medically able to return to your departure point.

**Emergency services** - any treatment, surgery or medication that:

- is required for the immediate relief of an acute symptom; or
• upon the advice of a physician cannot be delayed until you return to your departure point, and has to be received during your trip because your medical condition prevents you from returning to your departure point.

The emergency services must be ordered by or received from a physician, or received in a hospital during your trip, or received from a licensed physiotherapist, chiropractor, chiropodist, podiatrist or osteopath, as a result of an emergency that occurs during your trip.

Government health insurance plan - the health insurance coverage that Canadian provincial and territorial governments provide for their residents.

Hospital - an establishment that is licensed as an accredited hospital, is operated for the care and treatment of in-patients, has a Registered Nurse always on duty, and has a laboratory and an operating room on the premises or in facilities controlled by the establishment. Hospital does not mean any establishment used mainly as a clinic, extended or palliative care facility, rehabilitation facility, addiction treatment centre, convalescent, rest or nursing home, home for the aged or health spa.

Insured person - means any of the following persons who are under 65 years of age on the effective date and who have a valid government health insurance plan: the Cardmember, the Cardmember’s spouse, or the Cardmember’s dependent child.


Medical condition - accidental bodily injury or sickness (or a condition related to that accidental bodily injury or sickness), including disease, acute psychoses and complications of pregnancy occurring within the first 31 weeks of pregnancy.

Mountain climbing - the ascent or descent of a mountain requiring the use of specialized equipment, including crampons, pick-axes, anchors, bolts, carabiners and lead-rope or top-rope anchoring equipment.

Period of insurance - the period of time between your effective date and your return date. The period of insurance cannot exceed the first 15 consecutive days of your trip.

Physician - someone who is not you or a member of your immediate family who is licensed to prescribe drugs and administer medical treatment (within the scope of such license) at the location where the treatment is provided. A physician does not include a naturopath, herbalist, chiropractor or homeopath.

Prescription drugs - drugs and medicines that can only be issued upon the prescription of a physician or dentist and are dispensed by a licensed pharmacist. Prescription drugs does not mean such drugs or medicine, when you need (or renew) them to continue to stabilize a condition which you had before your trip, or a chronic condition.

Professional - engaged in a specified activity as your main paid occupation.

Return date - the date on which you are scheduled to return to your departure point.

Ridesharing services - mean transportation network companies in the business of providing peer-to-peer ridesharing transportation services through digital networks or other electronic means for the general public.

Supplementary Cardmember - means an authorized user of the Card account.

Spouse - the person who is legally married to the Cardmember, or has been living in a conjugal relationship with the Cardmember for a continuous period of at least one year and who resides in the same household.

Stable - any medical condition or related condition (including any heart condition or any lung condition) for which there have been:
• no new treatment, new medical management, or new prescribed medication; and
• no change in treatment, change in medical management, or change in medication; and
• no new symptom or finding, more frequent symptom or finding, or more severe symptom or finding experienced; and
• no new test results or test results showing a deterioration; and
• no investigations or future investigations initiated or recommended for your symptoms; and
• no hospitalization or referral to a specialist (made or recommended).

**Top-up** - the coverage you purchase through the Enrollment Centre to extend travel insurance coverage that is in effect for your period of insurance during your trip under this Certificate of Insurance. The terms, conditions and exclusions of the top-up Certificate of Insurance apply to you during the top-up period.

**Travelling companion** - the person other than your spouse or dependent child who is sharing travel arrangements with you to a maximum of three persons.

**Trip** - the period of time between leaving your departure point, up to and including your return date outside your Canadian province or territory of residence.

**Vehicle** - a private passenger automobile, minivan, mobile home, camper truck or trailer home, which you use during your trip exclusively for the transportation of passengers other than for hire. It can be either owned by you or leased by you from a commercial rental agency.

*We, us and our* - refer to Royal & Sun Alliance Insurance Company of Canada (the Insurer) or Global Excel Management Inc., its authorized claims and assistance provider, as applicable.

*You, yourself and your* - refer to the insured person.

**WHEN DOES COVERAGE BEGIN AND END?**

This insurance coverage begins whenever you leave your Canadian province or territory of residence.

You will be covered for the first:

• 15 consecutive days of a trip, including the date you leave on your trip and the date you return from your trip.

Coverage ends on the earliest of:

1. the date you return to your Canadian province or territory of residence;
2. the date your Card account is cancelled;
3. the date your Card privileges are terminated;
4. the date the Cardmember’s Card account is no longer in good standing as per the Cardmember’s Cardmember Agreement issued by Amex Bank of Canada;
5. the date you have been absent for more than 15 consecutive days from your Canadian province or territory of residence;
6. the date the group insurance policy terminates.

**WHAT IF YOU WANT TO TOP-UP YOUR COVERAGE?**

You can top-up your coverage by calling the Enrollment Centre at 1-866-587-1029. Premium payment will be charged to your Card account.

**CAN COVERAGE BE EXTENDED?**

Coverage automatically extends beyond the 15 day limit as follows:

1. When you or your travelling companion are hospitalized due to a medical emergency on your scheduled return date, your coverage will remain
in force during the period of hospitalization and up to 5 days following discharge from hospital.

2. Coverage is automatically extended for up to 5 days when you must delay your scheduled return date due to your or your travelling companion’s medical emergency.

3. Coverage is automatically extended for up to 72 hours when the delay of a common carrier in which you are a passenger causes your trip to extend beyond your scheduled return date.

4. Regardless of the automatic extensions above, coverage will not continue beyond 365 days from your latest date of departure from your departure point.

WHAT RISKS ARE INSURED?

This insurance offers coverage to a maximum of $5,000,000 CAD per insured person, per trip for reasonable and customary expenses incurred by you, in excess of any medical expenses payable by your government health insurance plan or any other insurance plan, for emergency services medically required during your trip as a result of a medical emergency.

WHAT ARE THE BENEFITS?

1. Hospital & Medical Expenses

Covers the cost of a medical emergency including hospital, surgical and medical treatment. Eligible expenses include the following when ordered by a physician during your trip:

- hospital room and board, up to semi-private or the equivalent,
- treatment by a physician or surgeon,
- out-patient hospital charges,
- x-rays and other diagnostic tests,
- use of an operating room, intensive care unit, anesthesia and surgical dressings,
- prescription drugs except when you need them to continue to stabilize a chronic medical condition or a condition which you had before your trip,
- local ground ambulance service (or local taxi fare or ridesharing services in lieu) to a hospital, physician or medical service provider in a medical emergency,
- the lesser of the rental or purchase of a hospital-type bed, a wheelchair, brace, crutches and other medical appliances, and
- the cost for the professional services of a registered private nurse while you are hospitalized, to a maximum of $10,000, when these services are recommended by a physician and approved in advance through Global Excel.

2. Emergency Dental Expenses

Covers the cost of the following dental expenses when ordered by, or received from, a licensed dentist if you need dental treatment to repair or replace your natural or permanently attached artificial teeth because of an accidental blow to your face during your trip:

- emergency dental expenses you incur during your trip, and
- up to a maximum of $1,000 to continue necessary treatment after your return to Canada so long as this treatment is received within 90 days of your injury.

This insurance also covers treatment, during your trip, for the emergency relief of dental pain, to a maximum of $250. Proof of the accident will be required in the event of a claim.
3. Physiotherapy and Other Professional Services
Covers the cost for the professional services of a physiotherapist, chiropractor, osteopath, chiropodist or podiatrist to a maximum of $250 per profession, when ordered by a physician during your trip.

4. Return to your Departure Point
If the physician treating you recommends to us in writing that you return to your departure point because of your medical condition in order to receive emergency medical attention, or if the Insurer determines that you are able to and recommends that you return to your departure point, this insurance covers you for one or more of the following, when pre-authorized and arranged by Global Excel, when medically essential:

- the extra cost of a one-way economy air fare on a commercial flight via the most cost-effective route to your departure point to receive immediate emergency medical attention; or
- the cost of a stretcher fare on a commercial flight via the most cost-effective route to your departure point, if a stretcher is medically necessary; and
- the cost of a return economy air fare on a commercial flight via the most cost-effective route and the usual fees and expenses for a qualified medical attendant to accompany you, when the attendant is medically necessary or required by the airline; or
- the cost of air ambulance transportation if it is medically essential.

5. Return of Deceased
Covers:

- the return of your remains in the common carrier’s standard transportation container to your departure point, and up to $3,000 for the preparation of your remains and the cost of the common carrier’s standard transportation container; or
- the return of your remains to your departure point, and up to $2,000 for the cremation of your remains where your death occurred; or
- up to $3,000 for the preparation of your remains and the cost of a standard burial container and up to $2,000 for the burial of your remains where your death occurred.

If someone is legally required to identify your remains, this insurance covers the cost of round-trip economy class transportation by the most cost-effective route and up to $300 for meal and accommodation expenses for that person. That person is covered under the terms of your insurance during the period in which he or she is required to identify your remains, but for no longer than 3 business days.

6. Additional Meal & Accommodation Expenses
Covers the cost of up to $150 per day, to a maximum of $1,500 per trip, for meal and accommodation expenses you have incurred after the date you are scheduled to return to the departure point, when your return is delayed due to your or your travelling companion’s medical emergency or when you or your travelling companion are relocated to receive medical attention.

7. Bringing Bedside Companion to Bedside

- This benefit is subject to the pre-authorization of Global Excel.
- Covers the cost of round-trip economy class transportation by the most cost-effective route, to have someone visit you when you are travelling alone and are hospitalized during your trip for more than 3 days. However, if you are under age 21, or age 21 and over and physically handicapped and dependent on your bedside companion for support, this insurance provides this benefit to you as soon as you are admitted to a hospital. That person is entitled to a maximum of $300 for meal and accommodation
expenses and is covered under the terms of your insurance during the period in which he or she is required at your bedside.

8. Return of Vehicle

• This benefit is subject to the pre-authorization of Global Excel.
• Covers the reasonable costs for a commercial agency, when arranged and approved through Global Excel, to return a vehicle to your residence or to a commercial rental agency, when you are unable to return the vehicle due to a medical emergency. The vehicle can be a private passenger automobile, self-propelled mobile home, camper truck or trailer home that you own or rent and which you use during your trip.

9. Return of Dependent Children

• This benefit is subject to the pre-authorization of Global Excel.
• If dependent children travel with or join you during your trip, and you are hospitalized for more than 24 hours, or you must return to Canada because of your medical emergency covered under this insurance, this insurance covers, when arranged and approved through Global Excel, the extra cost of one-way economy transportation by the most cost-effective route to their departure point and the cost of return economy transportation for an escort, when an escort is deemed necessary by the carrier.

10. Return of your Excess Baggage

• This benefit is subject to the pre-authorization of Global Excel.
• If you return to your departure point by air ambulance (pre-authorized by Global Excel) because of your medical emergency, this insurance covers the cost to return your excess baggage up to a maximum of $500.

WHAT ASSISTANCE SERVICES ARE AVAILABLE?

Under this Certificate of Insurance, the following assistance services are available to you:

1. Medical Assistance & Consultation

When you have a medical emergency and you call Global Excel, whenever possible you will be directed to one or more recommended medical service providers near you. In addition, whenever possible, Global Excel will:

• provide confirmation of coverage and pay your eligible medical expenses directly to the recommended medical service provider,
• consult with your attending physician to monitor your care, and
• monitor the appropriateness, necessity and reasonableness of that care to ensure that your resulting eligible expenses will be covered by this insurance.

2. Payment Assistance

Whenever possible, the payment of the medical services you receive will be co-ordinated through Global Excel, communicated with your medical provider and billing arrangements will be discussed. There are certain countries where, due to local conditions or travel reports from the Canadian government, assistance services are not available and you may be required to make payment up-front. If you are required to make payment up-front, you must obtain detailed and itemized original bills for claims submission and call the Claims Centre on your return home.

3. Emergency Message Centre

In case of a medical emergency, Global Excel will help exchange important messages with your immediate family, business or physician.
4. Replacement Co-ordination

Whenever possible, Global Excel will help co-ordinate the replacement of your prescription eyeglasses or essential prescription medication in the event these items need to be replaced during your trip. This insurance does not cover the actual cost to replace your prescription eyeglasses or essential prescription medication.

WHAT IS NOT COVERED?

Pre-Existing Condition Exclusion

In addition to the exclusions outlined below under “General Exclusions,” the following exclusion applies to you.

EXCLUSION I

This insurance will not pay for any expenses relating to or in any way associated with

1. Your medical condition or related condition (whether or not the diagnosis has been determined), if at any time in the 90 days before you depart on your trip, your medical condition or related condition has not been stable.

2. Your heart condition (whether or not the diagnosis has been determined), if at any time in the 90 days before you depart on your trip:
   a) any heart condition has not been stable; or
   b) you have taken nitroglycerin more than once per week specifically for the relief of angina pain.

3. Your lung condition (whether or not the diagnosis has been determined), if at any time in the 90 days before you depart on your trip:
   a) any lung condition has not been stable; or
   b) you have been treated with home oxygen or taken oral steroids (prednisone or prednisolone) for any lung condition.

GENERAL EXCLUSIONS

This insurance will not pay for any expenses relating to or in any way associated with:

1. A medical condition for which future investigation or treatment (except routine monitoring) is planned before your trip.

2. The continued treatment, recurrence or complication of a medical condition or related condition, following emergency treatment of that condition during your trip, if the Insurer determines that you were medically able to return to your departure point and you chose not to return.

3. The treatment of any heart or lung condition following emergency services for a related or unrelated heart or lung condition during your trip if the Insurer determines that you were medically able to return to your departure point and you chose not to return.

4. Any services that are not emergency services.

5. Routine care of a chronic condition.

6. Routine pre-natal care.

7. If you are pregnant, your pregnancy or the birth and delivery of your child, or any complications of either, occurring in the nine weeks before or after your expected delivery date as determined by your primary care physician in your province. Note that a child born during a trip, even if born outside of the nine weeks before or after the expected delivery date, shall not be regarded as an insured person and shall not have coverage under this certificate for the entire duration of the trip in which the child is born.
8. Invasive testing or surgery (including cardiac catheterization and MRI) unless approved by Global Excel prior to being performed.

9. Participation:
   a) as a professional athlete in a sporting event including training or practice;
   b) in any motorized race or motorized speed contest;
   c) in scuba diving (unless you hold a basic SCUBA designation from a certified school or other licensing body), hang-gliding, rock climbing, paragliding, skydiving, parachuting, bungee jumping, mountain climbing, rodeo, heli-skiing, any downhill skiing or snowboarding outside marked trails or any cycling racing event or ski racing event.

10. Your commission of a criminal act or your direct or indirect attempt to commit a criminal act.

11. Your intentional self-inflicted injury, suicide or attempt to commit suicide.

12. Any medical condition arising from, or in any way related to, your chronic use of alcohol or drugs whether prior to or during your trip.

13. Your abuse of medication, drugs or alcohol, or deliberate non-compliance with prescribed medical therapy or treatment, whether prior to or during your trip.

14. Your anxiety or panic attack or state of mental or emotional stress unless such state was sufficiently severe as to require a medical consultation.

15. War (declared or not), act of foreign enemies or rebellion.

16. Any portion of the benefits that require prior authorization and arrangement by Global Excel if such benefits were not pre-authorized and arranged by Global Excel.

17. Any medical condition if you undertake your trip with the prior knowledge that you will require or seek treatment, surgery, investigations, palliative care or alternative therapy of any kind, regardless of whether the treatment, surgery, investigations, palliative care or alternative therapy is related in any way to the medical condition.

18. A medical condition for which it was reasonable to expect treatment or hospitalization during your trip.

19. Symptoms which would have caused an ordinarily prudent person to seek treatment or medication in the 90 days before your trip.

20. Treatment or surgery for a specific condition, or a related condition, which had caused your physician to advise you not to travel.

21. Any medical condition you suffer or contract, or any loss you incur in a specific country, region or area while a travel advisory of “Avoid non-essential travel” or “Avoid all travel” is in effect for that specific country, region or area and the travel advisory was issued by the Government of Canada before your effective date, even if the trip is undertaken for essential reasons. This exclusion only applies to medical conditions or losses which are related, directly or indirectly, to the reason for which the travel advisory was issued.

   If the travel advisory is issued after your effective date, your coverage under this insurance in that specific country, region or area will be restricted to a period of 10 days from the date the travel advisory was issued, or to a period that is necessary for you to safely evacuate the country, region or area, after which coverage will be limited to medical conditions or losses which are unrelated to the reason for which the
travel advisory was issued, while the travel advisory remains in effect.

22. Any medical condition if the medical advisors of Global Excel recommend that you return to your departure point following emergency services you have received, and you chose not to return.

23. Ionising radiation or radioactive contamination from any nuclear fuel or waste which results from the burning of nuclear fuels; or, the radioactive, toxic, explosive or other dangerous properties of nuclear machinery or any part of it.

HOW DO YOU SUBMIT A CLAIM?

1. When you call Global Excel at the time of an emergency, you are given all the information required to file a claim. Otherwise, please refer to the instructions below.

2. This insurance does not cover fees charged for completing a medical certificate.

3. You must file your claim with us within 90 days of your return to your departure point.

4. If you need a Claim & Authorization form, please contact our Claims Department at:
   73 Queen Street, Sherbrooke, Quebec, J1M 0C9
   +905-475-4822 or 1-800-243-0198

Emergency Medical Insurance

We require the fully completed Claim & Authorization form, and where applicable:

- Proof of your departure and return date.
- Original of all bills, invoices and receipts.
- Proof of payment by your government health insurance plan and payment from any other insurer or benefit plan.
- The completed and signed government specific forms if you reside in Quebec, British Columbia or Newfoundland.
- A complete diagnosis from the physician(s) and/or hospital(s) that provided the treatment, including, where applicable, written verification from the physician who treated you during your trip that the expenses were medically necessary.

In addition, for accidental dental expenses, we require proof of the accident.

FAILURE TO COMPLETE THE REQUIRED CLAIM & AUTHORIZATION FORM IN FULL WILL DELAY THE ASSESSMENT OF YOUR CLAIM.

OTHER CLAIM INFORMATION

During the processing of a claim, the Insurer may require you to undergo a medical examination by one or more physicians selected by the Insurer and at the Insurer’s expense.

You agree that the Insurer and its agents have:

a) your consent to verify your health card number and other information required to process your claim, with the relevant government and other authorities;

b) your authorization to physicians, hospitals and other medical providers to provide to us, Global Excel and the Claims Centre, any and all information they have regarding you, while under observation or treatment, including your medical history, diagnoses and test results; and

c) your agreement to disclose any of the information available under a) and b) above to other sources, as may be required for the processing of your claim for benefits obtainable from other sources.
After we pay your health care provider or reimburse you for covered expenses, we will seek reimbursement from your government health insurance plan and any other medical insurance plan under which you may have coverage. You may not claim or receive in total more than 100% of your total covered expenses or the actual expenses which you incurred, and you must repay to us any amount paid or authorized by us on your behalf if and when we determine that the amount was not payable under the terms of your insurance.

In the case of out-of-country/province health care coverage:

a) if you are retired and your former employer provides to you under an extended health insurance plan, a lifetime maximum coverage of:
   • $50,000 or less, we will not coordinate payment with such coverage;
   • more than $50,000, we will coordinate payment with such coverage only in excess of $50,000;

in accordance with the coordinating coverage guidelines issued by the Canadian Life and Health Insurance Association.

b) if you are actively employed and your current employer provides to you under a group health insurance plan, a lifetime maximum coverage of:
   • $50,000 or less, we will not coordinate payment with such coverage;
   • more than $50,000, we will coordinate payment with such coverage only in excess of $50,000.

GENERAL CONDITIONS

1. Any of our policies are excess insurance and are the last payors. All other sources of recovery, indemnity payments or insurance coverage must be exhausted before any payments will be made under any of our policies.

2. When you contact Global Excel, they will, on the Insurer’s behalf, refer you or may transfer you, when medically appropriate, to one of their recommended medical service providers. They will also request that the approved medical service provider bill the medical expenses covered under this insurance directly to the Insurer instead of to you.

3. If you are eligible, from any other insurer, for benefits similar to the benefits provided under this insurance, the total benefits paid to you by all insurers cannot exceed the actual expense that you have incurred. We will coordinate the payment of benefits with all insurers from whom you are eligible for benefits similar to those provided under this insurance, to a maximum of the largest amount specified by each insurer.

4. Any information that has been misrepresented, misstated or is incomplete may result in this Certificate of Insurance and your coverage being null and void, in which case no benefits will be paid. You must submit any subsequent changes to the information in writing before you depart on your trip.

5. If you incur expenses covered under this insurance due to the fault of a third party, we may take action against the party at fault. You agree to cooperate fully with us and to allow us, at our own expense, to bring a law suit in your name against the third party. If you recover against a third party, you agree to hold in trust sufficient funds to reimburse us for the amounts paid under the insurance.

6. Payment, reimbursement and amounts shown throughout this contract are in Canadian dollars, unless otherwise stated. If currency conversion is necessary, we will use the exchange rate on the date the last service was rendered to you. This insurance will not pay for any interest.

7. This contract is void in the case of fraud or attempted fraud by you, or if
you conceal or misrepresent any material fact or circumstance concerning this insurance.

8. Throughout this Certificate of Insurance, any reference to age refers to your age on the effective date.

9. When making a claim under this insurance, you must provide the applicable documents we require. Failure to provide the applicable documentation will invalidate your claim.

10. The Insurer, Global Excel, Amex Bank of Canada and their agents are not responsible for the availability, quality or results of medical treatment or transportation, or your failure to obtain medical treatment.

11. This Certificate of Insurance is the entire contract between you and us. Despite any other provision of this contract, this contract is subject to any applicable federal and provincial statutes concerning contracts of insurance.

12. On reasonable notice you or a claimant under the contract will be provided with a copy of the group contract (applicable only in those provinces where mandated by legislation and subject to certain access limitations permitted by applicable legislation).

13. Every action or proceeding against an insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the Insurance Act (for actions or proceedings governed by the laws of British Columbia, Alberta and Manitoba), the Limitations Act, 2002 (for actions or proceedings governed by the laws of Ontario), Article 2925 of the Civil Code of Quebec (for actions or proceedings governed by the laws of Quebec), or other applicable legislation.

14. The Insurer is required to comply with economic, financial and trade sanctions (“Sanctions”) imposed by Canada and may be required to comply with Sanctions imposed by the United States in certain circumstances. The Insurer is a member of the RSA Group whose principal insurance company in the United Kingdom is required to comply with Sanctions imposed by the European Union and the United Kingdom and the parties acknowledge that the Insurer intends to adhere to the same standard. Accordingly, the Insurer shall not provide any coverage or be liable to provide any indemnity or payment or other benefit under this Certificate of Insurance which would breach applicable Sanctions imposed under the laws of Canada, the European Union, the United Kingdom, or the United States.

IMPORTANT NOTICE ABOUT YOUR PERSONAL INFORMATION

Royal & Sun Alliance Insurance Company of Canada is committed to protecting your privacy and the confidentiality of your personal information. We will collect, use and disclose personal information for the purposes identified in our Privacy Policy. To obtain more information, you can review our Privacy Policy online at www.rsagroup.ca or request a copy by calling 1-888-877-1710.

This insurance product is underwritten by Royal & Sun Alliance Insurance Company of Canada.

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STANDBYMD℠ PROGRAM
TRAVEL MEDICAL CONCIERGE

Effective Date: July 1, 2015.

WHAT IS STANDBYMD?
Prompt telephone access to a Physician who will assess Your medical condition and provide necessary treatment options. Services range from house-call visits and prescription drug refills to referral to local hospitals, urgent care centers and walk-in clinics. To activate Your StandbyMD services, please contact Your assistance provider at 1-866-426-7505 toll-free from the US & Canada, or (905) 816-1884 collect from anywhere in the world.

WHAT SERVICES ARE AVAILABLE?

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<tr>
<td>Telephone consultations</td>
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<tr>
<td>Domiciliary physician visits</td>
<td>✓</td>
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<tr>
<td>Walk-in clinic, urgent care center and hospital referral</td>
<td>✓</td>
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<tr>
<td>Physician express triage &amp; hospital referral</td>
<td>✓</td>
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<tr>
<td>Physician Prescribed medications</td>
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<tr>
<td>Lost or forgotten Prescription medication</td>
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<tr>
<td>Medical specialist referral</td>
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<tr>
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<td>Dental Care</td>
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<td>Eye care</td>
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<tr>
<td>Durable Medical Equipment (DME)</td>
<td>✓</td>
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</tbody>
</table>

WHERE ARE THESE SERVICES AVAILABLE?
Telephone consultations, domiciliary physician (“house call”) visits, and walk-in clinic, urgent care center and hospital referral are available when traveling almost anywhere in the world. All other services are only available in StandbyMD Markets of Operation2. See http://www.StandbyMD.com for the most current list of active markets.

WHAT DOES IT COST?
StandbyMD facilitates, through its concierge services, access to all services at no additional cost. While StandbyMD can facilitate access to other services, You must pay the provider for any services that are rendered. Telephone consultations are provided at no cost to You. House call visits are usually much less than the fees charged by hospital emergency rooms. Fees may vary depending on the

1StandbyMD Worldwide services are available while travelling almost anywhere in the world. An accurate list of service areas is available online at: http://www.standbymd.com/locations.html.

2Prescription provided only when in compliance with local, state, and federal law. Physician or specialist visit may be required for prescription. Time of delivery will vary by geographic location and availability.
market and nature of Your condition. StandbyMD shall disclose to You the fees that are payable for any services that it facilitates.

I HAVE A TRAVEL HEALTH INSURANCE POLICY. ISN’T THAT THE SAME THING?

A travel health insurance policy is an insurance policy to cover the cost of emergency medical needs when You travel. While most travel health insurance policies provide assistance services for medical referrals, in most cases Your primary avenue as a traveler in seeking medical care is to go to the emergency room at the nearest hospital. This can involve hours of waiting and inconvenience. StandbyMD can arrange for a doctor to come to You for a private appointment. If You do need to go to the hospital, the Physicians we refer to You can triage You to ensure that You receive treatment as quickly as possible.

StandbyMD can assist You with the necessary documentation to file a claim with Your insurance carrier, and in some cases, may even directly bill the insurance company.

HOW DO I GET SERVICES WHEN I NEED THEM?

StandbyMD’s Medical Concierge Representatives are available 24/7/365 to assist You. Based on the nature of Your call, a Physician will call You back for a no cost telephone consultation. If You are travelling in one of our Markets of Operation and if necessary, a “house call” visit will be coordinated directly with the Physician.

For other services, StandbyMD’s Medical Concierge Representative will assist You in getting appointments, prescription medication replacement and providing other services.

TERMS & CONDITIONS OF STANDBYMD PROGRAM

This Agreement governs each Eligible Person’s use of the StandbyMD Program (the “Program”). The Program is not insurance. Eligible Persons receive only the specific services detailed in this Agreement. StandbyMD’s only obligation under this Agreement is to provide the services specifically outlined in this Agreement and only to the extent described herein. By participating in the Program, the Eligible Person agrees to abide by and be bound by the following terms and conditions and acknowledges that he/she has read the Description of Services section referenced below and understands that the services available through the Program are limited to these identified services. StandbyMD Program benefits and services are provided by Healthcare Concierge Services, Inc. Amex Bank of Canada and its affiliates are not liable for any StandbyMD Program benefits or services.

SERVICES

StandbyMD shall arrange for those services specifically identified in this Agreement to be provided to Eligible Persons whose medical conditions require such services while travelling in the United States and select international destinations. The Eligible Person may contact StandbyMD’s Concierge Services, 24 hours per day to request services during the Service Period.

The services provided by StandbyMD are available only to Eligible Persons that are present within the United States and select international destinations and services may vary by State and Country. The services are provided as allowed by applicable law. Physicians and Ancillary Providers are subject to change without notice. The Program may be discontinued or modified at anytime for Eligible Persons.
SECTION I  DEFINED TERMS

Throughout this document, all bolded terms have the specific meaning explained below.

“Ancillary Provider” means dentists, chiropractors, pharmacies, eye care professionals, durable medical equipment suppliers, and all other StandbyMD network providers contracted to perform services for Eligible Persons and does not include Physicians, as specifically defined herein.

“Card” means The Platinum Card®.

“Cardmember” means a holder of a valid Basic or Supplementary Card issued by Amex Bank of Canada.

“Departure Point” means the province or territory You depart from on the first day of Your intended Trip.

“Dependent Child” means any natural child (legitimate or illegitimate), any legally adopted child, any step-child of or any child dependent upon the Cardmember in a “parent-child” relationship for maintenance and support who is:
   a. Under the age of 21 years and unmarried;
   b. Under the age of 25 years and unmarried and in full time attendance at a college or university; or
   c. By reason of mental or physical infirmity, incapable of self-sustaining employment and totally dependent upon the Cardmember for support within the terms of the Income Tax Act (Canada).

“Effective Date” means Your date of departure from Your Departure Point.

“Eligible Person” means any of the following persons: the Cardmember, the Cardmember’s Spouse or the Cardmember’s Dependent Child.


“Physician” means a person licensed as a physician who is a StandbyMD participating physician. A physician does not include a naturopath, herbalist or homeopath.

“Return Date” means the date on which You return to Your Departure Point.

“Service Period” means the period beginning on the Effective Date and terminating on the Return Date.

“Spouse” means the person who is legally married to the Cardmember or, if there is no such person, then the person who has been living in a conjugal relationship with the Cardmember for a continuous period of at least one year and who resides in the same household.

“StandbyMD” means Healthcare Concierge Services, Inc., a Delaware corporation with its principle place of business at 777 Brickell Avenue, Suite 1370, Miami, Fl. 33131 USA. StandbyMD provides access when travelling in the U.S. and select Markets of Operation to 24/7 Physician telephone consultations, arrangement of “house call” visits, referral to hospitals, urgent care centers and walk-in clinics, as well as access to Physician prescribed medications and assistance in obtaining lost or forgotten prescription medication. Extended services in the U.S. include dental and chiropractic care, medical specialist referral, eye care, and durable medical equipment rentals.

“StandbyMD Worldwide” means the program that provides access to a network of providers when traveling almost anywhere in the world and is not to be considered “Markets of Operation”. StandbyMD Worldwide services, as outlined in the table on page 1, are available when traveling almost anywhere in the world, and include house call service in more than 80
countries and global phone services, as described in further detail online at http://www.standbymd.com/locations.html.

“Trip” means the period of time between leaving Your Departure Point, up to and including Your Return Date outside Your Canadian province or territory of residence.

“You, Yourself and Your” refer to the Eligible Person.

SECTION II DESCRIPTION OF SERVICES

TELEPHONE CONSULTATIONS

Access to Participating Physician conducted telephone consultations. Telephone consultations are available when traveling almost anywhere in the world, 24 hours per day, 365 days per year.

LOST OR FORGOTTEN PRESCRIPTION MEDICATIONS

Replacement of lost or forgotten medications. Medication prescribed to replace lost, stolen or forgotten prescriptions will be called into a local pharmacy and delivered to Eligible Person’s place of lodging. Replacement prescriptions will be provided only when in compliance with applicable law. Physician or specialist visit may be required for replacement prescriptions. Time of delivery will vary by geographic location and availability. This service is available throughout the United States and select Markets of Operation 24 hours per day, 365 days per year. Eligible Persons are responsible for paying for Physician and specialist services, charges for the medication, and all related services.

DOMICILIARY PHYSICIAN VISITS

Worldwide Arrangement of Participating Physician “house calls.” Once seen by an participating Physician, he/she will provide/facilitate any necessary follow-up services. House call visits are available during local working hours when traveling almost anywhere in the world with an accurate list available online http://www.standbymd.com/locations.html. Eligible Persons are responsible for paying for the cost of these services.

PHYSICIAN PRESCRIBED MEDICATIONS

Prescriptions by Participating Physicians. Participating Physicians carry the most commonly prescribed acute care medications. Any medication that is prescribed, but not readily available, will be called into a local pharmacy and delivered to place of lodging. Prescriptions are provided only when in compliance with applicable law. Physician or specialist visit may be required for issuance of a prescription and/or administration of certain medications. Time of delivery will vary by geographic location and availability. This service is available throughout the United States and in select Markets of Operation, 24 hours per day, 365 days per year. Eligible Persons are responsible for paying for Physician and specialist services, charges for the medication, and all related services.

PHYSICIAN EXPRESS HOSPITAL REFERRAL

Physician Referral to Area Hospital. A participating Physician will provide referral to local area hospitals to expedite emergency evaluation and treatment. This service is available throughout the United States and in select Markets of Operation, 24 hours per day, and 365 days per year. Eligible Persons are responsible for paying for all services rendered.

WALK-IN CLINIC, URGENT CARE CENTER AND HOSPITAL REFERRAL

Referral to Urgent Care Centers and Hospitals. A Concierge Service Representative will provide referral to local area Walk-In Clinic, Urgent Care Center or Hospital. This service is available when traveling almost anywhere

3StandbyMD can assist You with the necessary documentation to file a claim with Your insurance carrier, and in some cases, may even directly bill the insurance company.
in the world, 24 hours per day, 365 days per year. **Eligible Persons** shall be responsible for paying for all services rendered.

### MEDICAL SPECIALIST REFERRAL

Referrals and Appointments with Medical Specialists. A Concierge Service Representative will assist **Eligible Person** in identifying, locating and scheduling an appointment with a local area medical specialist physician. This service is available throughout the United States, 24 hours per day, and 365 days per year. **Eligible Persons** are responsible for paying the medical specialist and other providers for the charges for medical services rendered.

### CHIROPRACTIC CARE

Scheduling of Chiropractic Services. A Concierge Service Representative will schedule an appointment with a local area chiropractor. Representatives will provide travel directions and obtain an estimate of charges. When and where available, a chiropractor may be able to visit **Eligible Persons** at place of lodging upon request. This service is available throughout the United States, 24 hours per day, and 365 days per year. **Eligible Persons** are responsible for paying the charges for chiropractic services rendered.

### DENTAL CARE

Scheduling of dental appointments. A Concierge Service Representative will schedule an appointment with a local area dentist upon request. Representatives will provide travel directions and obtain an estimate of charges. This service is available throughout the United States, 24 hours per day, and 365 days per year. **Eligible Persons** are responsible for paying the dentist and for dental services rendered.

### EYE CARE

Eyeglasses and contact lenses replacement. A Concierge Service Representative will assist **Eligible Person** if **Eligible Person** loses, forgets or breaks eyeglasses or contact lenses. Replacement glasses or lenses will be made locally and made available as quickly as possible under the circumstances. Time of delivery will vary by geographic location, availability and pursuant to other individual circumstances on a case by case basis. This service is available throughout the United States, 24 hours per day, and 365 days per year. **Eligible Persons** are responsible for paying all charges for replacement glasses and lenses.

### DURABLE MEDICAL EQUIPMENT (DME)

Medical Equipment Rental and Delivery. A Concierge Service Representative will coordinate Durable Medical Equipment (DME) rentals (wheel chair, scooter, oxygen concentrator, portable oxygen setup, nebulizer, and travel dialysis appointment scheduling). Equipment rental is coordinated through StandbyMD, and the rental equipment is delivered when **Eligible Person** arrives and picked up upon **Eligible Person’s** departure. This service is available throughout the United States, 24 hours per day, and 365 days per year. DME scheduling must be completed at least 72 hours in advance of requirement for rental equipment. A prescription may be required for some DME rentals. **Eligible Persons** are responsible for paying for all charges related to equipment rental, delivery and pick-up.

### SECTION III SERVICE PERIOD

Services are available beginning on the **Effective Date** and ending on the **Return Date**. StandbyMD is not available to any **Eligible Person** other than during such **Eligible Person’s Service Period**.

### SECTION IV PAYMENT OF SERVICES

**Eligible Persons** must pay for all services rendered under this Agreement. Payment to **Physicians** and **Ancillary Providers** for services rendered is expected at the time services are performed, except as described below.


- **StandbyMD** will collect payment for “house call” visits directly from the **Eligible Person**. For “house call” treatment that is covered under a travel health insurance plan in effect at the time of services, **StandbyMD** may at its sole discretion directly bill the insurance company for payment. In this situation, **StandbyMD** reserves the right to collect credit card information in advance from the **Eligible Person** to ensure payment. The **Eligible Person** will bear financial responsibility for any co-payments or deductibles that are due under the **Eligible Person’s** contract with his/her insurance carrier. Other coverage stipulations from the insurance carrier may apply, and the **Eligible Person** is responsible for payment of any amounts not covered by the insurance policy.

Payments for services provided other than “house call” visits will be made by the **Eligible Person** directly to the provider of the services unless other arrangements are agreed to in advance. **StandbyMD** concierge services (appointment arrangement, medical referral, prescription delivery) will be provided at no additional cost to the **Eligible Person**; however the **Eligible Person** will bear the cost of the actual goods or services provided (e.g. prescription drugs, eyeglasses, medical treatment services).

**SECTION V LIMITATIONS**

An **Eligible Person** may not assign or transfer this Agreement or **Eligible Person’s** rights hereunder, to any other person or entity.

**Waiver, Release, Limitation of Liability.** You hereby release and forever waive any and all claims You may have against **StandbyMD**, its officers, directors, administrators, employees, agents, or consultants, for losses or damages You sustain in connection with the use of the Program or services. In no event shall **StandbyMD**, its officers, directors, administrators, employees, agents, consultants or any third parties be liable for any damages (including, without limitation, incidental and consequential damages, personal injury/wrongful death) resulting from the use of or inability to use the Program or services, whether based on warranty, contract, tort, or any other legal theory, and whether or not **StandbyMD** is advised of the possibility of such damages. Notwithstanding the foregoing, **STANDBYMD** SHALL BE LIABLE ONLY TO THE EXTENT OF ACTUAL DAMAGES INCURRED BY YOU, NOT TO EXCEED THE FEES PAID BY YOU FOR THE SERVICES, INFORMATION OR REFERRALS PROVIDED. Remedies under this Agreement are exclusive and are limited to those expressly provided for in this Agreement.

**SECTION VI DISCLAIMER**

Participating **Physicians** are independent contractors and shall not be deemed employees or agents of **StandbyMD**. **StandbyMD** screens such **Physicians** only to assure that all possess the minimum required credentials to legally provide the goods and services rendered to **Eligible Persons** pursuant to applicable laws and regulations. **StandbyMD** does not guarantee and is not responsible for the quality of services or products provided to **Eligible Persons** by participating **Physicians**, nor any other service providers, distributors and/or manufacturers.

**Ancillary Providers** are independent contractors and shall not be deemed employees or agents of **StandbyMD**. When applicable, **StandbyMD** screens **Ancillary Providers** to assure that they possess valid licenses to provide goods and services to **Eligible Persons** pursuant to the applicable laws and regulations of localities in which they operate. **StandbyMD** does not guarantee and is not responsible for the quality of services or products provided by any **Ancillary Provider**, distributor or manufacturer.

**StandbyMD** has no obligation, under this Agreement, pursuant to any Addendum hereto, or otherwise, to pay for any goods or services provided to any **Eligible Person** by any **Physician** or **Ancillary Provider**.
In no instance will StandbyMD assume any liability or financial responsibility for any services that are obtained from or provided by any participating Physician or Ancillary Provider. The participating Physicians reserve the sole and exclusive right to determine medical necessity in accordance with the local Medical Community Standards of Care. StandbyMD receives no financial compensation for referrals to Ancillary Providers. In no event shall StandbyMD be liable to an Eligible Person for any acts or omissions of distributors or sub-distributors of the Program. Further, StandbyMD shall not be liable to the Eligible Person for any failure or delay in the provision of services hereunder, and any such delay or failure shall for all purposes be excused, whether or not such delay or failure is caused by governmental regulations (whether or not valid), fire, strike, weather, acts of God, differences with employees or independent contractors, war, flood, accident, traffic, shortage of products or transportation, or is caused by negligent acts or omissions of StandbyMD, its affiliates. Pursuant to the waivers, releases and limitations of liability found in Section V above, Eligible Person and all Eligible Persons accessing the Program through him or her understand and accept that as an express condition of eligibility and participation, all liability on behalf of StandbyMD is disclaimed and all causes of action are forever and fully waived.

Legal. This Agreement and its interpretation and enforcement shall be governed and controlled by the laws of the State of Delaware, USA. You expressly agree that exclusive jurisdiction for any dispute with StandbyMD, or in any way relating to this Agreement or use of the Program, resides in the courts of the State of Delaware.

SECTION VII PERSONAL INFORMATION

Personal Information – StandbyMD is committed to protecting the privacy and the confidentiality of the personal information of Eligible Persons. Any personal information collected from Eligible Persons shall be used solely for the purposes of providing StandbyMD’s services and such information shall not be shared except as specifically necessary in order to arrange for those services as requested by the Eligible Person or if applicable, to assist the Eligible Person in compiling, and in some instances filing, on his or her behalf, the necessary documentation to make a claim from any insurance the Eligible Person may have. For more information on the personal information practices of StandbyMD view our current Privacy Policy at http://www.standbymd.com/privacy-policy.html. In requesting the services, an Eligible Person agrees to the collection, use and disclosure of his or her personal information, including personal health information for the purposes described above and such Eligible Person also agrees to the personal information practices described in our Privacy Policy.

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SM StandbyMD is a Service Mark of Healthcare Concierge Services, Inc.
INTRODUCTION

Trip Cancellation & Trip Interruption insurance for AMEX Cardmembers and insured persons.

Amex Bank of Canada has been issued group insurance policy PSI047258485 by Royal & Sun Alliance Insurance Company of Canada (the “Insurer”) to protect your travel investment prior to departure or cover other expenses incurred by you after departure, while outside your Canadian province or territory of residence. This Certificate of Insurance summarizes the provisions of the group insurance policy applicable to your AMEX Card for Trip Cancellation and Trip Interruption insurance.

IMPORTANT NOTICE - PLEASE READ CAREFULLY

• Travel insurance is designed to cover losses arising from sudden and unforeseeable circumstances. It is important that you read and understand your insurance before you travel as your coverage may be subject to certain limitations or exclusions.

• A pre-existing exclusion applies to medical conditions and/or symptoms that existed prior to your trip. Check to see how this applies in your policy and how it relates to your departure date, date of purchase, or effective date.

• The basic Cardmember is responsible for this insurance coverage, including coverage bound by any purchases made by a supplementary Cardmember below the age of majority.

• In the event of an accident, injury or sickness, your prior medical history may be reviewed when a claim is reported.

• Coverage is only available if you are a resident of Canada while you are travelling outside your province or territory of permanent residence.

• For trip cancellation coverage, only the trip costs charged on the Cardmember’s Card will be considered for reimbursement, up to the benefit maximum. Any expenses incurred using other payment sources will not be considered.

• For trip interruption/trip delay coverage, benefits are payable to you as long as any portion of the trip costs are charged to the Cardmember’s Card, up to the benefit maximum.

• This Certificate contains clauses which may limit the amounts payable.

• The Policy contains a provision removing or restricting the right of the group person insured to designate persons to whom or for whose benefit insurance money is to be payable.

All italicized terms have the specific meaning explained in the “Definitions” section of this Certificate of Insurance.

WHAT TO DO IN AN EMERGENCY?

If you have an emergency, you can call Global Excel Management Inc. (Global Excel). Global Excel can be contacted 24 hours a day, 7 days a week by calling:

1-800-243-0198 toll-free from the US & Canada, or
+905-475-4822 collect from anywhere in the world
DEFINITIONS

Throughout this Certificate of Insurance, all italicized terms have the specific meaning explained below.

**Accidental bodily injury** - bodily injury caused by an accident of external origin occurring during the *period of insurance* and being the direct and independent cause of the loss.

**Accommodation** - means an establishment providing commercial accommodations or in the business of operating a vacation rental marketplace and hospitality service for the general public.

**Basic Cardmember** - means the person in whose name Amex Bank of Canada has opened a Card account and does not include a supplementary Cardmember, provided always that the basic Cardmember’s Card account privileges have not expired, been revoked, terminated or suspended.

**Business meeting** - a meeting, trade show, training course, or convention scheduled before your *effective date* between companies with unrelated ownership, pertaining to your full-time occupation or profession and that is the sole purpose of your trip. Legal proceedings are not considered to be a *business meeting*.

**Card** - means The Platinum Card®.

**Cardmember** - means a holder of a valid Basic or Supplementary Card from American Express issued in Canada by Amex Bank of Canada.

**Caregiver** - the permanent, full-time person entrusted with the well-being of your dependent(s) and whose absence cannot reasonably be replaced.

**Catastrophic event** - total eligible Cancellation & Interruption Insurance claims arising directly or indirectly from an *act of terrorism*, or series of *acts of terrorism*, occurring within a 72-hour period that exceed $1,000,000.

**Change in medication** - the addition of any new *prescription drug*, the withdrawal of any *prescription drug*, an increase in the dose of any *prescription drug* or a decrease in the dose of a *prescription drug*.

Exceptions:
- an adjustment in the dosage of insulin or Coumadin (Warfarin), if you are currently taking these drugs;
- a change from a brand name drug to an equivalent generic drug of the same dosage.

**Common carrier** - means any land, water, or air conveyance operated under a license for the transportation of passengers for hire and for which a ticket has been obtained. Common carrier does not include any conveyance that is hired or used for a sport, gamesmanship, contest, cruise and/or recreational activity, regardless of whether such conveyance is licensed. Rental vehicles are not considered common carriers.

**Contamination** - the poisoning of people by nuclear, chemical and/or biological substances which causes illness and/or death.

**Departure point** - the place from which you depart your Canadian province or territory of permanent residence on the first day, and return to on the last day of your intended trip.

**Dependent child(ren)** - means an unmarried natural, adopted, step or foster child of the Cardmember or his or her spouse who is, on the *effective date*, at least 15 days old, dependent on the Cardmember or his or her spouse for support and:
- is under 21 years of age;
- is a full-time student who is under 25 years of age; or
- has a permanent physical impairment or a permanent mental disability.
Effective date - means the date and time any portion of the trip costs (before any cancellation penalties have been incurred) are first charged to the Card by the Cardmember, or paid by redeeming Membership Rewards® points earned under the Membership Rewards Program provided any applicable taxes are charged to the Card. Note: Trips will not be covered for Trip Cancellation or Trip Interruption, if purchased with points from a reward program other than the Membership Rewards Program.

Emergency - any sudden and unforeseen event that begins during the period of insurance and makes it necessary to receive immediate treatment from a licensed physician or to be hospitalized. An emergency ends when the Insurer determines that you are medically able to return to your departure point.

Hospital - an establishment that is licensed as an accredited hospital, is operated for the care and treatment of in-patients, has a Registered Nurse always on duty, and has a laboratory and an operating room on the premises or in facilities controlled by the establishment. Hospital does not mean any establishment used mainly as a clinic, extended or palliative care facility, rehabilitation facility, addiction treatment centre, convalescent, rest or nursing home, home for the aged or health spa.

Insured person - means any of the following persons: the Cardmember, the Cardmember’s spouse, or the Cardmember’s dependent child.


Key employee - an employee whose continued presence is critical to the ongoing affairs of the business during your absence.

Medical condition - accidental bodily injury or sickness (or a condition related to that accidental bodily injury or sickness), including disease, acute psychoses and complications of pregnancy occurring within the first 31 weeks of pregnancy.

Mountain climbing - the ascent or descent of a mountain requiring the use of specialized equipment, including crampons, pick-axes, anchors, bolts, carabiners and lead-rope or top-rope anchoring equipment.

Passenger plane - a certified multi-engined transportation aircraft provided by a regularly scheduled airline on any regularly scheduled trip operated between licensed airports and holding a valid Canadian Air Transport Board or Charter Air Carrier licence, or its foreign equivalent, and operated by a certified pilot.

Period of insurance - the period of time between your effective date and your return date.

Physician - someone who is not you or a member of your immediate family who is licensed to prescribe drugs and administer medical treatment (within the scope of such license) at the location where the treatment is provided. A physician does not include a naturopath, herbalist, chiropractor or homeopath.

Prescription drugs - drugs and medicines that can only be issued upon the prescription of a physician or dentist and are dispensed by a licensed pharmacist. Prescription drugs does not mean such drugs or medicine, when you need (or renew) them to continue to stabilize a condition which you had before your trip, or a chronic condition.

Professional - engaged in a specified activity as your main paid occupation.

Return date - the date on which you are scheduled to return to your departure point.

Ridesharing services - mean transportation network companies in the business of providing peer-to-peer ridesharing transportation services through digital networks or other electronic means for the general public.

Supplementary Cardmember - means an authorized user of the Card account.
Spouse - the person who is legally married to the Cardmember, or has been living in a conjugal relationship with the Cardmember for a continuous period of at least one year and who resides in the same household.

Stable - any medical condition or related condition (including any heart condition or any lung condition) for which there have been:

- no new treatment, new medical management, or new prescribed medication; and
- no change in treatment, change in medical management, or change in medication; and
- no new symptom or finding, more frequent symptom or finding, or more severe symptom or finding experienced; and
- no new test results or test results showing a deterioration; and
- no investigations or future investigations initiated or recommended for your symptoms; and
- no hospitalization or referral to a specialist (made or recommended).

Terrorism or act of terrorism - an act, including but not limited to the use of force or violence and/or the threat thereof, including hijacking or kidnapping, of an individual or group in order to intimidate or terrorize any government, group, association or the general public, for religious, political or ideological reasons or ends, and does not include any act of war (whether declared or not), act of foreign enemies or rebellion.

Top-up - the coverage you purchase through the Enrollment Centre to extend travel insurance coverage that is in effect for your trip under this Certificate of Insurance. The terms, conditions and exclusions of the top-up Certificate of Insurance apply to you.

Travelling companion - the person other than your spouse or dependent child who is sharing travel arrangements with you to a maximum of three persons.

Trip - a period of travel outside your Canadian province or territory of residence for which:

a) There is a departure point and a destination; and
b) There are predetermined and recorded beginning and ending dates; and
c) Any portion of the prepaid travel arrangements was charged to the Cardmember’s Card prior to your departure.

Note: For trip cancellation coverage, only the prepaid travel arrangements charged to the Cardmember’s Card will be considered for reimbursement, up to the benefit maximum. Any expenses incurred using other payment sources will not be considered. For trip interruption/trip delay coverage, benefits are payable to you as long as any portion of the prepaid travel arrangements are charged to the Cardmember’s Card, up to the benefit maximum. This definition is extended to include a common carrier ticket or accommodations obtained through the redemption of points earned under the Membership Rewards Program.

We, us and our - refer to Royal & Sun Alliance Insurance Company of Canada (the Insurer) or Global Excel Management Inc., its authorized claims and assistance provider, as applicable.

You, yourself and your - refer to the insured person.

WHEN DOES COVERAGE BEGIN AND END?

This insurance provides coverage whenever any portion of the trip costs (before any cancellation penalties have been incurred) is paid with your Card or paid using points earned under the Membership Rewards Program provided any applicable taxes are charged to the Card. Note: Trips will not be covered for
Trip Cancellation or Trip Interruption, if purchased with points from a reward program other than the Membership Rewards Program.

Coverage begins on your effective date.

Coverage ends on the earliest of:

1. midnight of your return date;
2. the date your Card account is cancelled;
3. the date your Card privileges are terminated;
4. the date the Cardmember’s Card account is no longer in good standing as per the Cardmember’s Cardmember Agreement issued by Amex Bank of Canada;
5. the date the group insurance policy terminates.

WHAT IF YOU WANT TO TOP-UP YOUR COVERAGE?

You can top-up your coverage by calling the Enrollment Centre at 1-866-587-1029. Premium payment will be charged to your Card account.

CAN COVERAGE BE EXTENDED?

Coverage automatically extends as follows:

1. When you or your travelling companion are hospitalized due to a medical emergency on your scheduled return date, your coverage will remain in force during the period of hospitalization and up to 5 days following discharge from hospital.

2. Coverage is automatically extended for up to 5 days when you must delay your scheduled return date due to your or your travelling companion’s medical emergency.

3. Coverage is automatically extended for up to 72 hours when the delay of a common carrier in which you are a passenger causes your trip to extend beyond your scheduled return date.

4. Regardless of the automatic extensions above, coverage will not continue beyond 365 days from your latest date of departure from your departure point.

TERRORISM COVERAGE

Where an act of terrorism directly or indirectly causes a loss that would otherwise be payable under one of the covered risks in accordance with the terms and conditions of the insurance, this Certificate of Insurance, will provide coverage as follows:

a) We will, for Cancellation & Interruption claims, except in the case of catastrophic event, reimburse you up to a maximum of 100% of your eligible loss.

b) We will, for Cancellation & Interruption claims resulting in a catastrophic event, and subject to the limits described in paragraph d), reimburse you up to a maximum of 50% of your eligible loss.

c) The benefits payable in accordance with paragraphs a), and b) are in excess to all other potential sources of recovery, including but not limited to, alternative or replacement travel options offered by airlines, tour operators, cruiselines and other travel suppliers and other insurance coverage (even where such other coverage is described as excess) and will only respond after you have exhausted all such other sources.

d) The benefits payable in accordance with paragraph b) shall be paid out of a fund and, where total claims exceed fund limits, eligible claims shall be reduced on a pro rata basis so that the maximum payment out of the fund under all insurance plans underwritten by us shall be CDN$5,000,000 per act of terrorism or series of acts of terrorism occurring within a 72-hour
period. The total maximum payment out of the fund under all insurance plans underwritten by us shall be CDN$10,000,000 per calendar year regardless of the number of acts of terrorism. If, in our judgment, the total of all payable claims under one or more acts of terrorism may exceed the applicable fund maximum limits, your prorated claim will be paid after the end of the calendar year.

TRIP CANCELLATION/TRIP INTERRUPTION INSURANCE:

This coverage provides benefits for:
- cancelling your trip before leaving your departure point,
- transportation to your next destination,
- an early return to your departure point, or
- the delay of your trip beyond the scheduled return date.

When does the risk occur?
- Trip Cancellation - the risk occurs before your trip.
- Trip Interruption - the risk occurs during your trip.
- Trip Delay - the risk occurs during your trip and results in your being delayed, beyond your scheduled return date, from returning to your departure point.

<table>
<thead>
<tr>
<th>TRIP CANCELLATION / TRIP INTERRUPTION COVERAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Risk</td>
</tr>
<tr>
<td>Trip Cancellation/Prior to Departure</td>
</tr>
<tr>
<td>Trip Interruption/After Departure</td>
</tr>
<tr>
<td>Out-of-Pocket Expenses (Trip Interruption/After Departure)</td>
</tr>
</tbody>
</table>

What are the risks insured?

<table>
<thead>
<tr>
<th>WHAT ARE YOU COVERED FOR?</th>
<th>WHAT ARE YOU ELIGIBLE FOR?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Trip Cancellation</td>
</tr>
<tr>
<td>MEDICAL CONDITION</td>
<td>BENEFIT(S)</td>
</tr>
<tr>
<td>1 Your emergency medical condition.</td>
<td>A</td>
</tr>
<tr>
<td>2 The admission to a hospital following an emergency of a member of your immediate family (who is not at your destination), your business partner, key employee or caregiver.</td>
<td>A</td>
</tr>
<tr>
<td>3 The emergency medical condition of a member of your immediate family (who is not at your destination), your business partner, key employee or caregiver.</td>
<td>A</td>
</tr>
<tr>
<td>4 The admission to a hospital of your host at destination, following an emergency medical condition.</td>
<td>A</td>
</tr>
</tbody>
</table>

N/A: Not Applicable
<table>
<thead>
<tr>
<th>WHAT ARE YOU COVERED FOR?</th>
<th>WHAT ARE YOU ELIGIBLE FOR?</th>
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<tr>
<td><strong>MEDICAL CONDITION</strong></td>
<td><strong>BENEFIT(S)</strong></td>
</tr>
<tr>
<td>Trip Cancellation</td>
<td>Trip Interruption</td>
</tr>
<tr>
<td>5 The emergency medical condition of your travelling companion.</td>
<td>A</td>
</tr>
<tr>
<td>6 The emergency medical condition of your immediate family member who is at your destination.</td>
<td>A</td>
</tr>
<tr>
<td><strong>DEATH</strong></td>
<td></td>
</tr>
<tr>
<td>7 Your death.</td>
<td>A</td>
</tr>
<tr>
<td>8 The death of your immediate family member or friend (who is not at your destination), your business partner, key employee or caregiver.</td>
<td>A</td>
</tr>
<tr>
<td>9 The death of your travelling companion.</td>
<td>A</td>
</tr>
<tr>
<td>10 The death of your travelling companion’s immediate family member, business partner, key employee or caregiver.</td>
<td>A</td>
</tr>
<tr>
<td>11 The death of your host at destination, following an emergency medical condition.</td>
<td>A</td>
</tr>
<tr>
<td>12 The death of your immediate family member or friend, who is at your destination.</td>
<td>A</td>
</tr>
<tr>
<td><strong>GOVERNMENT ADVISORIES</strong></td>
<td></td>
</tr>
<tr>
<td>13 A travel advisory issued by the Government of Canada, after the purchase of your trip, of “Avoid non-essential travel” or “Avoid all travel” to a specific country, region or area originally ticketed for a period that includes your trip.</td>
<td>A</td>
</tr>
<tr>
<td><strong>EMPLOYMENT AND OCCUPATION</strong></td>
<td></td>
</tr>
<tr>
<td>14 A transfer by the employer with whom you or your spouse is employed on your effective date, which requires the relocation of your principal residence.</td>
<td>A</td>
</tr>
<tr>
<td>15 The involuntary loss of your or your spouse’s permanent employment (not contract employment) due to lay-off or dismissal without just cause.</td>
<td>A</td>
</tr>
<tr>
<td>16 Cancellation of your business meeting beyond your or your employer’s control.</td>
<td>A</td>
</tr>
<tr>
<td>17 Your being summoned to service in the case of reservists, active military, police, essential medical personnel and fire personnel.</td>
<td>A</td>
</tr>
</tbody>
</table>

N/A: Not Applicable
<table>
<thead>
<tr>
<th>DELAYS</th>
<th>BENEFIT(S)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Delay of a private automobile resulting from the mechanical failure of that automobile, weather conditions, earthquakes, volcanic eruptions, a traffic accident, or an emergency police-directed road closure, causing you to miss a connection or resulting in the interruption of your travel arrangements, provided the automobile was scheduled to arrive at the point of departure at least 2 hours before the scheduled time of departure.</td>
<td>N/A</td>
</tr>
<tr>
<td>Delay of your common carrier, resulting from the mechanical failure of that carrier, a traffic accident, an emergency police-directed road closure, weather conditions, earthquakes or volcanic eruptions, causing you to miss a connection or resulting in the interruption of your travel arrangements.</td>
<td>N/A</td>
</tr>
<tr>
<td>Delay of your departure, resulting from the mechanical failure of your common carrier, a traffic accident, an emergency police-directed road closure, weather conditions, or grounding of your air transportation, causing you to miss your scheduled cruise or tour, and no alternative travel arrangements can be made for you to join the cruise or tour.</td>
<td>N/A</td>
</tr>
</tbody>
</table>

**OTHER RISKS**

<table>
<thead>
<tr>
<th>OTHER RISKS</th>
<th>WHAT ARE YOU ELIGIBLE FOR?</th>
</tr>
</thead>
<tbody>
<tr>
<td>An event completely independent of any intentional or negligent act that renders your principal residence uninhabitable or place of business inoperative.</td>
<td>A</td>
</tr>
<tr>
<td>The quarantine or hijacking of you, your spouse or your dependent child.</td>
<td>A</td>
</tr>
<tr>
<td>You, your spouse or your dependent child being a) called for jury duty; b) subpoenaed as a witness; or c) required to appear as a party in a judicial proceeding, during your trip.</td>
<td>A</td>
</tr>
</tbody>
</table>

N/A: Not Applicable

**WHAT ARE THE BENEFITS?**

**Prepaid Travel Arrangements** - Reimbursement to you of the expenses you actually incur as a result of one of the insured risks up to the sum insured for:

A. The portion of your travel arrangements purchased before your departure date, that are non-refundable and non-transferable to another date (not applicable if trip purchased with points from a reward program other than the Membership Rewards Program).
B. The unused portion of your travel arrangements purchased before your departure date, that are non-refundable and non-transferable to another travel date (not applicable if trip purchased with points from a reward program other than the Membership Rewards Program). This does not include reimbursement for prepaid unused transportation back to your departure point.

C. The unused portion of your travel arrangements purchased before your departure date, that are non-refundable and non-transferable to another travel date.

Any credits provided by the airline or travel supplier for travel on another date, are considered transferable amounts and shall not be payable under this insurance.

Transportation - Reimbursement to you of the expenses you actually incur as a result of one of the insured risks up to the sum insured for the extra cost of:

D. Your economy class transportation via the most cost-effective route to rejoin a tour or group.

E. Your economy class transportation via the most cost-effective route to your departure point.

F. Your economy class one-way air fare via the most cost-effective route to your next destination (inbound and outbound).

Out-of-Pocket Expenses -

G. Reimbursement of up to $250 per day per insured person for accommodation, meals, telephone, taxi and ridesharing services if your trip is interrupted or, if return home is delayed beyond the scheduled return date. This benefit is subject to a maximum of $1,000 for all insured person(s).

Limitations of coverage

Any transportation and out-of-pocket expenses benefits under this insurance must be undertaken on the earliest of:

- the date when your travel is medically possible; and
- within 10 days following your originally scheduled return date if your delay is not the result of hospitalization; or
- within 30 days following your originally scheduled return date if your delay is the result of hospitalization, when the benefit is payable because of a medical condition covered under one of the insured risks.

When a cause of cancellation occurs (the event or series of events that triggers one of the insured risks listed above) before your departure date, you must:

a. cancel your trip with the travel agent, airline, tour company, carrier or travel authority etc. immediately, but no later than the business day following the cause of cancellation, and

b. advise the Insurer at the same time.

The Insurer's maximum liability is the amounts or portions indicated in your trip contract that are non-refundable at the time of the cause of cancellation or on the next business day.

What assistance services are available?

Under this Certificate of Insurance, the following assistance services are available to you.

Emergency Message Centre

In case of a medical emergency, Global Excel will help exchange important messages with your immediate family, business or physician.
PRE-EXISTING CONDITION EXCLUSION

In addition to the exclusions outlined below under “General Exclusions,” the following exclusion applies to you.

This insurance will not pay any expenses relating to or in any way associated with:

a) Your or your spouse’s medical condition or related condition (whether or not the diagnosis has been determined), if at any time in the 90 days before your effective date, your or your spouse’s medical condition or related condition has not been stable.

b) Your or your spouse’s heart condition (whether or not the diagnosis has been determined), if at any time in the 90 days before your effective date:
   • any heart condition has not been stable; or
   • you or your spouse have taken nitroglycerin more than once per week specifically for the relief of angina pain.

c) Your or your spouse’s lung condition (whether or not the diagnosis has been determined), if at any time in the 90 days before your effective date:
   • any lung condition has not been stable; or
   • you or your spouse have been treated with home oxygen or taken oral steroids (prednisone or prednisolone) for any lung condition.

GENERAL EXCLUSIONS

This insurance will not pay any expenses relating to or in any way associated with:

1. Cancellation or interruption when you are aware, on the effective date, of any reason that might reasonably prevent you from travelling as booked;

2. Any trips purchased with points from a reward program other than the Membership Rewards Program.

3. A trip undertaken to visit or attend an ailing person, when the medical condition or death of that person is the cause of the claim.

4. The schedule change of a medical test or surgery that was originally scheduled before your period of insurance.

5. Routine pre-natal care.

6. If you are pregnant, your pregnancy or the birth and delivery of your child, or any complications of either, occurring in the nine weeks before or after your expected delivery date as determined by your primary care physician in your province. Note that a child born during a trip, even if born outside of the nine weeks before or after the expected delivery date, shall not be regarded as an insured person and shall not have coverage under this certificate for the entire duration of the trip in which the child is born.

7. Participation:
   a) as a professional athlete in a sporting event including training or practice;
   b) in any motorized race or motorized speed contest;
   c) in scuba diving (unless you hold a basic SCUBA designation from a certified school or other licensing body), hang-gliding, rock climbing, paragliding, skydiving, parachuting, bungee jumping, mountain climbing, rodeo, heli-skiing, any downhill skiing or snowboarding outside marked trails or any cycling racing event or ski racing event.
8. Your commission of a criminal act or your direct or indirect attempt to commit a criminal act.
9. Your intentional self-inflicted injury, your suicide or your attempt to commit suicide.
10. Any medical condition arising from, or in any way related to, your chronic use of alcohol or drugs whether prior to or during your trip.
11. Your abuse of medication, drugs or alcohol, or deliberate non-compliance with prescribed medical therapy or treatment, whether prior to or during your trip.
12. Your anxiety or panic attack or state of mental or emotional stress unless such state was sufficiently severe as to require a medical consultation.
13. Any medical condition if you undertake your trip with the prior knowledge that you will require or seek treatment, surgery, investigations, palliative care or alternative therapy of any kind, regardless of whether the treatment, surgery, investigations, palliative care or alternative therapy is related in any way to the medical condition.
14. War (declared or not), act of foreign enemies or rebellion.
15. Any medical condition you suffer or contract, or any loss you incur in a specific country, region or area while a travel advisory of “Avoid non-essential travel” or “Avoid all travel” is in effect for that specific country, region or area and the travel advisory was issued by the Government of Canada before your departure date, even if the trip is undertaken for essential reasons. This exclusion only applies to medical conditions or losses which are related, directly or indirectly, to the reason for which the travel advisory was issued.
16. Ionising radiation or radioactive contamination from any nuclear fuel or waste which results from the burning of nuclear fuels; or, the radioactive, toxic, explosive or other dangerous properties of nuclear machinery or any part of it.
17. A trip cancellation, trip interruption or trip delay which is related, directly or indirectly, to Coronavirus disease 2019 (COVID-19).

**HOW DO YOU SUBMIT A CLAIM?**

1. When you call Global Excel at the time of an emergency, you are given all the information required to file a claim. Otherwise, please refer to the instructions below.
2. This insurance does not cover fees charged for completing a medical certificate.
3. You must file your claim with us within 90 days of your return to your departure point.
4. If you need a Claim & Authorization form, please contact our Claims Department at:
   73 Queen Street, Sherbrooke, Quebec, J1M 0C9
   +905-475-4822 or 1-800-243-0198
   We require the fully completed Claim & Authorization form, and where applicable:
   - A medical document, fully completed by the legally qualified physician in active personal attendance and in the locality where the medical
condition occurred stating the reason why travel was impossible, the diagnosis and all dates of treatment.

- Written evidence of the risk insured which was the cause of cancellation, interruption or delay.
- Tour operator terms and conditions.
- Copy of AMEX statement or invoice showing payment of your trip.
- Complete original unused transportation tickets and vouchers.
- All receipts for the prepaid land arrangements and/or subsistence allowance expenses.
- Original passenger receipts for new tickets.
- Reports from the police or local authorities documenting the cause of the missed connection.
- Detailed invoices and/or receipts from the service provider(s).

FAILURE TO COMPLETE THE REQUIRED CLAIM & AUTHORIZATION FORM IN FULL WILL DELAY THE ASSESSMENT OF YOUR CLAIM.

OTHER CLAIM INFORMATION

During the processing of a claim, the Insurer may require you to undergo a medical examination by one or more physicians selected by the Insurer and at the Insurer's expense.

You agree that the Insurer and its agents have:

a) your consent to verify your health card number and other information required to process your claim, with the relevant government and other authorities;

b) your authorization to physicians, hospitals and other medical providers to provide to us, Global Excel and the Claims Centre, any and all information they have regarding you, while under observation or treatment, including your medical history, diagnoses and test results; and

c) your agreement to disclose any of the information available under a) and b) above to other sources, as may be required for the processing of your claim for benefits obtainable from other sources.

You may not claim or receive in total more than 100% of your total covered expenses or the actual expenses which you incurred, and you must repay to us any amount paid or authorized by us on your behalf if and when we determine that the amount was not payable under the terms of your insurance.

GENERAL CONDITIONS

1. Any of our policies are excess insurance and are the last payors. All other sources of recovery, indemnity payments or insurance coverage must be exhausted before any payments will be made under any of our policies.

2. If you are eligible, from any other insurer, for benefits similar to the benefits provided under this insurance, the total benefits paid to you by all insurers cannot exceed the actual expense that you have incurred. We will coordinate the payment of benefits with all insurers from whom you are eligible for benefits similar to those provided under this insurance, to a maximum of the largest amount specified by each insurer.

3. If you incur expenses covered under this insurance due to the fault of a third party, we may take action against the party at fault. You agree to cooperate fully with us and to allow us, at our own expense, to bring a law suit in your name against the third party. If you recover against a third party, you agree to hold in trust sufficient funds to reimburse us for the amounts paid under the insurance.

4. Any information that has been misrepresented, mis-stated or is incomplete may result in this Certificate of Insurance and your coverage being null
and void, in which case no benefits will be paid. You must submit any subsequent changes to the information in writing before you depart on your trip.

5. Payment, reimbursement and amounts shown throughout this contract are in Canadian dollars, unless otherwise stated. If currency conversion is necessary, we will use the exchange rate on the date the last service was rendered to you. This insurance will not pay for any interest.

6. This contract is void in the case of fraud or attempted fraud by you, or if you conceal or misrepresent any material fact or circumstance concerning this insurance.

7. Throughout this Certificate of Insurance, any reference to age refers to your age on the effective date.

8. When making a claim under this insurance, you must provide the applicable documents we require. Failure to provide the applicable documentation will invalidate your claim.

9. The Insurer, Global Excel, Amex Bank of Canada and their agents are not responsible for the availability, quality or results of medical treatment or transportation, or your failure to obtain medical treatment.

10. This Certificate of Insurance is the entire contract between you and the Insurer. Despite any other provision of this contract, this contract is subject to any applicable federal and provincial statutes concerning contracts of insurance.

11. On reasonable notice you or a claimant under the contract will be provided with a copy of the group contract (applicable only in those provinces where mandated by legislation and subject to certain access limitations permitted by applicable legislation).

12. Every action or proceeding against an insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the Insurance Act (for actions or proceedings governed by the laws of British Columbia, Alberta and Manitoba), the Limitations Act, 2002 (for actions or proceedings governed by the laws of Ontario), Article 2925 of the Civil Code of Quebec (for actions or proceedings governed by the laws of Quebec), or other applicable legislation.

13. The Insurer is required to comply with economic, financial and trade sanctions (“Sanctions”) imposed by Canada and may be required to comply with Sanctions imposed by the United States in certain circumstances. The Insurer is a member of the RSA Group whose principal insurance company in the United Kingdom is required to comply with Sanctions imposed by the European Union and the United Kingdom and the parties acknowledge that the Insurer intends to adhere to the same standard. Accordingly, the Insurer shall not provide any coverage or be liable to provide any indemnity or payment or other benefit under this Certificate of Insurance which would breach applicable Sanctions imposed under the laws of Canada, the European Union, the United Kingdom, or the United States.

IMPORTANT NOTICE ABOUT YOUR PERSONAL INFORMATION
Royal & Sun Alliance Insurance Company of Canada is committed to protecting your privacy and the confidentiality of your personal information. We will collect,
use and disclose personal information for the purposes identified in our Privacy Policy. To obtain more information, you can review our Privacy Policy online at www.rsagroup.ca or request a copy by calling 1-888-877-1710.

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INTRODUCTION

Flight and Baggage Delay and Hotel Burglary Insurance for AMEX Cardmembers and insured persons.

Amex Bank of Canada has been issued group insurance policy PSI047258505 for Flight and Baggage Delay and Hotel Burglary Insurance coverage by Royal & Sun Alliance Insurance Company of Canada (the “Insurer”). This Certificate of Insurance summarizes the provisions of the group insurance policy applicable to your AMEX Card for Flight and Baggage Delay and Hotel Burglary Insurance. All italicized terms have the specific meaning explained in the “Definitions” section of this Certificate of Insurance.

IMPORTANT NOTICE - PLEASE READ CAREFULLY

• Coverage is only available if you are a resident of Canada.
• The basic Cardmember is responsible for this insurance coverage, including coverage bound by any purchases made by a supplementary Cardmember below the age of majority.
• This Certificate contains clauses which may limit the amounts payable.

WHAT TO DO IN AN EMERGENCY?

If you have an emergency, you can call Global Excel Management Inc. (Global Excel). Global Excel can be contacted 24 hours a day, 7 days a week by calling:

1-800-243-0198 toll-free from the US & Canada, or
+905-475-4822 collect from anywhere in the world

DEFINITIONS

Throughout this Certificate of Insurance, all italicized terms have the specific meaning explained below.

Accommodation - means an establishment providing commercial accommodations or in the business of operating a vacation rental marketplace and hospitality service for the general public.

Aggregate limit - the maximum amount which will be paid as the result of any covered occurrence regardless of the number of fares charged to the Card. If the total amount claimed by the insured persons as a result of any one covered occurrence is more than the aggregate limit, the amount to be paid will be prorated for all insured persons.

Basic Cardmember - means the person in whose name Amex Bank of Canada has opened a Card account and does not include a supplementary Cardmember, provided always that the basic Cardmember’s Card account privileges have not expired, been revoked, terminated or suspended.

Burglary - the taking of or damage to personal property as a result of illegal entry into your accommodation premises for which there are visible signs of force made by tools, explosives, electricity or chemicals.

Card - means The Platinum Card®.

Cardmember - means a holder of a valid Basic or Supplementary Card issued in Canada by Amex Bank of Canada.
**Daily basis** - means the remainder of time left in any day of the week, ending at 12:00 A.M. (midnight) of the same day.

**Dependent child(ren)** - means an unmarried natural, adopted, step or foster child of the Cardmember or his or her spouse who is, on the date the full fare is charged to the Card, at least 15 days old, dependent on the Cardmember or his or her spouse for support and:

- is under 21 years of age;
- is a full-time student who is under 25 years of age; or
- has a permanent physical impairment or a permanent mental disability.

**Deplaning** - means exiting from the aircraft once it has arrived at the scheduled destination point.

**Essential clothing** - means the minimum basic clothing that is absolutely necessary and indispensable due to the delay of baggage as determined by us.

**Full fare** - means 100% of the airline ticket price or the cost of the accommodations, including taxes, was charged to the Card. Full fare is extended to include airline tickets obtained through the redemption of points from the Membership Rewards Program when applicable taxes have been charged to the Card. Full fare is also extended to include accommodations obtained through the redemption of points from the Membership Rewards Program. Note: There is no coverage for Flight and Baggage Delay and/or Hotel Burglary if the airline tickets and/or accommodations are purchased with points from a reward program other than the Membership Rewards Program.

**Insured person** - means a Cardmember, a Cardmember’s spouse, and a Cardmember’s dependent children, whether travelling together or not.

**Occurrence** - a loss or losses arising from a single event or incident which is neither expected nor intended by an insured person.

**Outbound** - any flight that is away from an insured person’s place of residence or any flight that is not a return flight that will be landing at the insured person’s place of residence.

**Reasonable living expenses** - means an insured person’s reasonable expenses for meals, accommodations and local taxi fare or ridesharing services, as determined by us.

**Ridesharing services** - mean transportation network companies in the business of providing peer-to-peer ridesharing transportation services through digital networks or other electronic means for the general public.

**Spouse** - the person who is legally married to the Cardmember, or has been living in a conjugal relationship with the Cardmember for a continuous period of at least one year and who resides in the same household.

**Sundry items** - means items such as toiletries, a magazine, a paperback book and other reasonable small item purchases as determined by us.

**Supplementary Cardmember** - means an authorized user of the Card account.

**We, us and our** - refer to Royal & Sun Alliance Insurance Company of Canada (the Insurer) or Global Excel Management Inc., its authorized claims and assistance provider, as applicable.

**You, yourself and your** - refer to the insured person.

**WHEN DOES COVERAGE BEGIN AND END?**

Coverage begins for an insured person;

**For Coverage A, B, and C** - when the full fare of the insured person’s airline ticket is charged in advance to the Cardmember’s Card.

**For Coverage D** - when the full fare of the insured person’s accommodations is
reserved, booked and charged to the Cardmember’s Card.

Coverage ends on the earliest of:

1. when you return to your place of residence;
2. the date the Cardmember’s Card account is cancelled;
3. the date the Cardmember’s Card privileges are terminated;
4. the date the Cardmember’s Card account is no longer in good standing as per the Cardmember’s Cardmember Agreement issued by Amex Bank of Canada;
5. the date the group insurance policy terminates.

WHAT IS COVERED AND WHAT ARE THE BENEFITS?

Coverage A - Missed Connection

If due to the delay of the insured person’s incoming flight, the insured person misses a confirmed onward connecting flight and no alternative onward transportation is made available within four (4) hours of deplaning, we will pay the insured person’s necessary and reasonable living expenses incurred within forty-eight (48) hours of deplaning and other sundry items.

Coverage B - Delayed Flight Departure or Denied Boarding

If the insured person’s confirmed scheduled departure from any airport is delayed for four (4) hours or more, or the insured person is denied boarding of the aircraft due to overbooking and no alternative transportation is made available to the insured person within four (4) hours of the scheduled departure time of the original flight, we will pay the insured person’s necessary and reasonable living expenses incurred within forty-eight (48) hours of the delay or denied boarding and other sundry items.

Coverage C - Emergency Baggage Delay

If the insured person’s accompanying checked-in baggage is not delivered to them within six (6) hours of the insured person’s arrival at the outbound scheduled flight destination point, we will pay for the insured person’s immediate reasonable and necessary expenses incurred on a daily basis with respect to emergency purchases of essential clothing and other sundry items, provided such expenses are incurred within four (4) days of the insured person’s arrival at the outbound scheduled destination point and prior to the return of such baggage.

The maximum aggregate limit payable under Coverage A, B, or C in respect of any one occurrence is $1,000.00.

Coverage D - Hotel Burglary

If the insured person suffers a loss due to burglary of their accommodation (as a result of illegal forced entry) while registered as a guest, we will reimburse the insured person for the loss of personal items (excluding cash) upon receipt of due proof of loss.

The maximum payable under Coverage D is $1,000.00 per burglary occurrence.

GENERAL EXCLUSIONS

This insurance will not pay any expenses relating to or in any way associated with:

1. Alternate travel arrangements made by the insured person such as a taxi, limo, bus or the purchase of an airline ticket;
2. Emergency Baggage Delay as a result of a flight that is returning to an insured person’s place of residence;
3. Burglary of an insured person’s own rental property;
4. Failure of any device to correctly read or interpret date/time data;
5. Any illegal activity, fraud, criminal activity, committed by or attempted by an insured person;

6. Any act of war, whether declared or undeclared, hostile or warlike action, insurrection, rebellion, revolution, civil war, usurped power, or action taken by government or public authority in hindering, combating or defending against such action;

7. Terrorism, meaning any ideologically motivated unlawful act or acts, including but not limited to the use of violence or force or threat of violence or force, committed by or on behalf of any group(s), organization(s) or government(s) for the purpose of influencing any government and/or instilling fear in the public or a section of the public;

8. Nuclear reaction, nuclear radiation, or radioactive contamination, any weapon of war employing atomic fission or a radioactive force.

**HOW DO YOU SUBMIT A CLAIM?**

1. You must file your claim with us within 30 days after the occurrence.
2. If you need a Claim & Authorization form, please contact our Claims Department at:
   
   73 Queen Street, Sherbrooke, Quebec, J1M 0C9
   
   +905-475-4822 or 1-800-243-0198

3. When submitting a claim, the following documentation is required:

   **For Coverages A & B:**
   
   • Itemized original receipts for actual expenses incurred.
   
   • A copy of the travel agent’s invoice/itinerary, and a copy of the account statement in which the full fare expense appears, showing the Card as the method of payment or showing it as a free ticket obtained through the redemption of points from the Membership Rewards Program.
   
   • Alternate boarding pass or flight delay report from airline.

   **For Coverage C:**
   
   • Itemized original receipts for actual expenses incurred.
   
   • A copy of the travel agent’s invoice/itinerary, and a copy of the account statement in which the full fare expense appears, showing the Card as the method of payment or showing it as a free ticket obtained through the redemption of points from the Membership Rewards Program.
   
   • Verification from the airline of the delay including reason, duration of delay, and any compensation issued.
   
   • Proof of delivery confirming date/time baggage was delivered.

   **For Coverage D:**
   
   • Invoice issued by the accommodation.
   
   • A copy of the account statement in which the full fare of the accommodation appears, showing the Card as the method of payment.
   
   • Police report confirming forced entry and a burglary report from the accommodation.
   
   • Receipts for repaired or replaced items.

**FAILURE TO COMPLETE THE REQUIRED CLAIM & AUTHORIZATION FORM IN FULL WILL DELAY THE ASSESSMENT OF YOUR CLAIM.**

**WHAT OTHER TERMS SHOULD YOU KNOW ABOUT?**

This Certificate of Insurance evidences the agreement between you and us. Despite any other provision of this agreement, this agreement is subject to any applicable federal and provincial statutes concerning contracts of insurance.
This coverage may be cancelled, changed or modified at our option or at the option of Amex Bank of Canada at any time without notice. This Certificate of Insurance replaces any and all certificates previously issued to the Cardmember with respect to group insurance policy PSI047258505.

1. In case of an occurrence or loss covered by this Certificate of Insurance the insured person must comply with the following requirements. Failure by the insured person to comply with these conditions shall invalidate any claims under this Certificate of Insurance.
   a. Notify us as provided above;
   b. In the case of Coverage D take all reasonable steps to protect, save or recover the property;
   c. In the case of Coverage D, promptly notify either the police or other proper authority. Police report and official letter from the accommodation must be received in writing (copy of such is necessary to validate the claims);
   d. Provide, within ninety (90) days from the date of loss or damage, the documents specified under “How do you submit a claim?”

2. This coverage is excess insurance and we are the last payors. All other sources of recovery, indemnity payments or insurance coverage must be exhausted before any payments will be made under this coverage.

3. If you are eligible, from any other insurer, for benefits similar to the benefits provided under this insurance, the total benefits paid to you by all insurers cannot exceed the actual expense that you have incurred. We will coordinate the payment of benefits with all insurers from whom you are eligible for benefits similar to those provided under this insurance, to a maximum of the largest amount specified by each insurer.

4. If you incur expenses covered under this insurance due to the fault of a third party, we may take action against the party at fault. You agree to cooperate fully with us and to allow us, at our own expense, to bring a law suit in your name against the third party. If you recover against a third party, you agree to hold in trust sufficient funds to reimburse us for the amounts paid under the insurance.

5. Any information that has been misrepresented, or misstated to us by you or is incomplete may result in this Certificate of Insurance and your coverage being null and void, in which case no benefits will be paid.

6. Any claim for a loss covered under this Certificate of Insurance will be adjusted and paid when satisfactory proof of the loss is provided. Any claim for lost property covered under this Certificate of Insurance will be adjusted and paid if the property is not found within fourteen (14) days. The insured person must give proof of loss and values of the items lost to us. All benefits will be paid to the insured person.

7. We will not pay more than the lesser of the following amounts:
   a. The actual replacement value of the property, at the time of loss or damage;
   b. The amount for which the property could be replaced with property of like kind and quality if an identical replacement cannot reasonably be obtained;
   c. The amount for which the property could be repaired to its condition prior to the damage;
   d. The maximum benefit applicable for each coverage under this Certificate of Insurance.

8. All payments shall be payable in the lawful currency of Canada. All
benefit limits indicated are in Canadian currency. This insurance will not pay for any interest or any fluctuations in the exchange rate.

9. On reasonable notice you or a claimant under the contract will be provided with a copy of the group contract (applicable only in those provinces where mandated by legislation and subject to certain access limitations permitted by applicable legislation).

10. Every action or proceeding against an insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the Insurance Act (for actions or proceedings governed by the laws of British Columbia, Alberta and Manitoba), the Limitations Act, 2002 (for actions or proceedings governed by the laws of Ontario), Article 2925 of the Civil Code of Quebec (for actions or proceedings governed by the laws of Quebec), or other applicable legislation.

11. The Insurer is required to comply with economic, financial and trade sanctions ("Sanctions") imposed by Canada and may be required to comply with Sanctions imposed by the United States in certain circumstances. The Insurer is a member of the RSA Group whose principal insurance company in the United Kingdom is required to comply with Sanctions imposed by the European Union and the United Kingdom and the parties acknowledge that the Insurer intends to adhere to the same standard. Accordingly, the Insurer shall not provide any coverage or be liable to provide any indemnity or payment or other benefit under this Certificate of Insurance which would breach applicable Sanctions imposed under the laws of Canada, the European Union, the United Kingdom, or the United States.

IMPORTANT NOTICE ABOUT YOUR PERSONAL INFORMATION

Royal & Sun Alliance Insurance Company of Canada is committed to protecting your privacy and the confidentiality of your personal information. We will collect, use and disclose personal information for the purposes identified in our Privacy Policy. To obtain more information, you can review our Privacy Policy online at www.rsagroup.ca or request a copy by calling 1-888-877-1710.

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INTRODUCTION

Lost or Stolen Baggage Insurance for AMEX Cardmembers and insured persons.

Amex Bank of Canada has been issued group insurance policy PSI047258521 for Lost or Stolen Baggage Insurance coverage by Royal & Sun Alliance Insurance Company of Canada (the “Insurer”). This Certificate of Insurance summarizes the provisions of the group insurance policy applicable to your AMEX Card for Lost or Stolen Baggage Insurance.

All italicized terms have the specific meaning explained in the “Definitions” section of this Certificate of Insurance.

IMPORTANT NOTICE - PLEASE READ CAREFULLY

- Coverage is only available if you are a resident of Canada.
- The basic Cardmember is responsible for this insurance coverage, including coverage bound by any purchases made by a supplementary Cardmember below the age of majority.
- This Certificate contains clauses which may limit the amounts payable.

WHAT TO DO IN AN EMERGENCY?

If you have an emergency, you can call Global Excel Management Inc. (Global Excel). Global Excel can be contacted 24 hours a day, 7 days a week by calling:

1-800-243-0198 toll-free from the US & Canada, or
+905-475-4822 collect from anywhere in the world

DEFINITIONS

Throughout this Certificate of Insurance, all italicized terms have the specific meaning explained below.

Basic Cardmember - means the person in whose name Amex Bank of Canada has opened a Card account and does not include a supplementary Cardmember, provided always that the basic Cardmember’s Card account privileges have not expired, been revoked, terminated or suspended.

Card - means The Platinum Card®.

Cardmember - means a holder of a valid Basic or Supplementary Card issued in Canada by Amex Bank of Canada.

Dependent child(ren) - means an unmarried natural, adopted, step or foster child of the Cardmember or his or her spouse who is, on the date the full fare is charged to the Card, at least 15 days old, dependent on the Cardmember or his or her spouse for support and:

- is under 21 years of age;
- is a full-time student who is under 25 years of age; or
- has a permanent physical impairment or a permanent mental disability.

Full fare - means 100% of the airline ticket price, including taxes, was charged to the Card. Full fare is extended to include airline tickets obtained through the redemption of points from the Membership Rewards Program when applicable taxes have been charged to the Card. Note: Baggage and personal effects will not be covered if the airline ticket is purchased with points from a reward program other than the Membership Rewards Program.


**Insured person** - means a Cardmember, a Cardmember’s spouse, and a Cardmember’s dependent children, whether travelling together or not.

**Occurrence** - a loss or losses arising from a single event or incident which is neither expected nor intended by an insured person.

**Spouse** - the person who is legally married to the Cardmember, or has been living in a conjugal relationship with the Cardmember for a continuous period of at least one year and who resides in the same household.

**Supplementary Cardmember** - means an authorized user of the Card account.

**We, us and our** - refer to Royal & Sun Alliance Insurance Company of Canada (the Insurer) or Global Excel Management Inc., its authorized claims and assistance provider, as applicable.

**You, yourself and your** - refer to the insured person.

**WHEN DOES COVERAGE BEGIN AND END?**

Coverage begins when the baggage has been checked-in and is in the care, custody and control of a scheduled airline or charter airline, and for carry on baggage when the insured person boards the aircraft, provided that the full fare of the airline ticket is charged in advance to the Cardmember’s Card.

Coverage ends on the earliest of:

1. when such checked-in baggage has been unloaded and placed in the airport terminal’s baggage pick-up area for retrieval by the insured person and for carry on baggage when the insured person leaves the aircraft;
2. the date the Cardmember’s Card account is cancelled;
3. the date the Cardmember’s Card privileges are terminated;
4. the date the Cardmember’s Card account is no longer in good standing as per the Cardmember’s Cardmember Agreement issued by Amex Bank of Canada;
5. the date the group insurance policy terminates.

**WHAT IS COVERED AND WHAT ARE THE BENEFITS?**

We will pay the insured person for loss or damage to owned or borrowed baggage and personal effects used for the personal use of the insured person while in transit as checked-in baggage or carried on board a chartered flight supplied by a scheduled airline, or by a charter airline if such flight operates on a regular published schedule, when the full fare is paid with the Card.

The maximum payable for any one occurrence is up to $1,000 for all insured persons combined.

Of the $1,000 limit of coverage, jewellery is limited to no more than $300 per occurrence and no more than $250 per occurrence will apply to golf clubs, including golf bags.

**GENERAL EXCLUSIONS**

This insurance will not pay any expenses relating to or in any way associated with:

1. Loss or damage to contact lenses, eyeglasses, sunglasses, artificial teeth and limbs, any device used to record images and/or sound and its equipment and accessories, including but not limited to cameras and camera equipment and accessories, any electronics including but not limited to laptops, ipods, MP3 players and cell phones, sports equipment (except golf clubs and golf bags; skis, ski poles and ski boots; and racquets), statuary, paintings, china or glass objects, objects of art or antiques, household effects and items pertaining to business, perishable items, animals and furs;
2. Cash, securities, bullion, negotiable property, tickets and valuable papers and documents;

3. Any illegal activity, fraud, or criminal activity, committed by or attempted by an insured person;

4. Loss or damage as a result of any act of war, whether declared or undeclared, hostile or war-like action, insurrection, rebellion, revolution, civil war, usurped power, or action taken by government or public authority in hindering, combating or defending against such action;

5. Loss or damage as a result of terrorism, meaning any ideologically motivated unlawful act or acts, including but not limited to the use of violence or force or threat of violence or force, committed by or on behalf of any group(s), organization(s) or government(s) for the purpose of influencing any government and/or instilling fear in the public or a section of the public;

6. Loss or damage as a result of nuclear reaction, nuclear radiation, or radioactive contamination, any weapon of war employing atomic fission or a radioactive force.

HOW DO YOU SUBMIT A CLAIM?

1. You must file your claim with us within 30 days after the occurrence.

2. If you need a Claim & Authorization form, please contact our Claims Department at:
   73 Queen Street, Sherbrooke, Quebec, J1M 0C9
   +905-475-4822 or 1-800-243-0198

When submitting a claim, the following documentation is required (as applicable):

- A copy of the invoice/itinerary, and copy of the account statement in which the full fare expense appears, showing the Card as the method of payment or showing it as a free ticket obtained through the redemption of points from the Membership Rewards Program.
- A copy of the lost or damaged baggage report filed with the airline which includes the completed claim form itemizing the baggage’s contents.
- Proof of settlement from the insured person’s personal insurance company.
- Proof of settlement from the airline company.
- Estimate of repair (for damaged baggage/contents). If not repairable, a note from the repair facility stating same.
- Itemized original receipts for replacement items (if not repairable).

FAILURE TO COMPLETE THE REQUIRED CLAIM & AUTHORIZATION FORM IN FULL WILL DELAY THE ASSESSMENT OF YOUR CLAIM.

WHAT OTHER TERMS SHOULD YOU KNOW ABOUT?

This Certificate of Insurance evidences the agreement between you and us. Despite any other provision of this agreement, this agreement is subject to any applicable federal and provincial statutes concerning contracts of insurance. This coverage may be cancelled, changed or modified at our option or at the option of Amex Bank of Canada at any time without notice. This Certificate of Insurance replaces any and all certificates previously issued to the Cardmember with respect to group insurance policy PSI047258521.

1. This coverage is excess insurance and we are the last payors. All other sources of recovery, indemnity payments or insurance coverage must be exhausted before any payments will be made under this coverage.

2. If you are eligible, from any other insurer, for benefits similar to the benefits provided under this insurance, the total benefits paid to you by
all insurers cannot exceed the actual expense that you have incurred. We will coordinate the payment of benefits with all insurers from whom you are eligible for benefits similar to those provided under this insurance, to a maximum of the largest amount specified by each insurer.

3. If you incur expenses covered under this insurance due to the fault of a third party, we may take action against the party at fault. You agree to cooperate fully with us and to allow us, at our own expense, to bring a law suit in your name against the third party. If you recover against a third party, you agree to hold in trust sufficient funds to reimburse us for the amounts paid under the insurance.

4. Any information that has been misrepresented, or misstated to us by you or is incomplete may result in this Certificate of Insurance and your coverage being null and void, in which case no benefits will be paid.

5. Any claim for loss or damage covered under this Certificate of Insurance will be adjusted and paid when satisfactory proof of the loss or damage is provided to us. You must give proof of loss and values of the items lost or damaged to us. All benefits will be paid to the insured person.

6. We will not pay more than the lesser of the following amounts:
   a. The actual replacement value of the property, at the time of loss or damage;
   b. The amount for which the property could be replaced with property of like kind and quality if an identical replacement cannot reasonably be obtained;
   c. The actual cash value of the item at the time of loss should it not be replaced;
   d. The amount for which the property could be repaired to its condition prior to the damage;
   e. The maximum benefit applicable under this Certificate of Insurance.

7. All payments shall be payable in the lawful currency of Canada. All benefit limits indicated are in Canadian currency. This insurance will not pay for any interest or any fluctuations in the exchange rate.

8. On reasonable notice you or a claimant under the contract will be provided with a copy of the group contract (applicable only in those provinces where mandated by legislation and subject to certain access limitations permitted by applicable legislation).

9. Every action or proceeding against an insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the Insurance Act (for actions or proceedings governed by the laws of British Columbia, Alberta and Manitoba), the Limitations Act, 2002 (for actions or proceedings governed by the laws of Ontario), Article 2925 of the Civil Code of Quebec (for actions or proceedings governed by the laws of Quebec), or other applicable legislation.

10. The Insurer is required to comply with economic, financial and trade sanctions ("Sanctions") imposed by Canada and may be required to comply with Sanctions imposed by the United States in certain circumstances. The Insurer is a member of the RSA Group whose principal insurance company in the United Kingdom is required to comply with Sanctions imposed by the European Union and the United Kingdom and the parties acknowledge that the Insurer intends to adhere to the same standard. Accordingly, the Insurer shall not provide any coverage or be liable to provide any indemnity or payment or other benefit under this Certificate of Insurance which would breach applicable Sanctions imposed under the laws of Canada, the European
IMPORTANT NOTICE ABOUT YOUR PERSONAL INFORMATION

Royal & Sun Alliance Insurance Company of Canada is committed to protecting your privacy and the confidentiality of your personal information. We will collect, use and disclose personal information for the purposes identified in our Privacy Policy. To obtain more information, you can review our Privacy Policy online at www.rsagroup.ca or request a copy by calling 1-888-877-1710.

This insurance product is underwritten by Royal & Sun Alliance Insurance Company of Canada.

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An individual shall qualify as a Covered Person under the Master Group Policy TMH600135 (“the Policy”) with the benefits described in this certificate only if he or she is:

A. a Basic or Supplementary Cardmember who has The Platinum Card® issued by Amex Bank of Canada (“American Express”) in his or her name, or
B. the Spouse or dependent child under age 23 of such person; and
C. the American Express Card account is billed in Canada.

**IMPORTANT DEFINITIONS**

For purposes of the Policy, “American Express Card” unless otherwise specified means any of the Cards or Accounts listed in Category A above.

“Basic Cardmember” means any individual who has asked the Policyholder to issue one or more American Express Cards and who has an American Express Card account.

“Common Carrier Conveyance” means an air, land or water vehicle (other than a rental vehicle) operated by a common carrier licensed to carry passengers for hire and available to the public.

“Covered Trip” means:
1. a trip taken by the Covered Person between the point of departure and the final destination as shown on the Covered Person's ticket or verification issued by the Common Carrier Conveyance, and
2. the Covered Person's fare for such trip has been charged to an American Express Card prior to any Injury.

“Injury” means a bodily injury which:
1. is caused by an accident which occurs while the Covered Person's insurance is in force under the Policy; and
2. results in Loss insured by the Policy and due, directly and independently of all other causes, to such accident.

“Scheduled Airline” means an airline maintaining regular published schedules (or recognized by the Company as meeting similar criteria) which is licensed for the transportation of passengers by the duly constituted authority having jurisdiction over civil aviation in the country of its registry. In no event shall the term “Scheduled Airline” include any air carrier designated or licensed by the governmental authority having jurisdiction over civil aviation as being a Supplemental, Non-Certified, Irregular or Non-Scheduled air carrier.

“Spouse” means a person who is legally married to the Covered Person (“Married Spouse”) or a person who has been living in a conjugal relationship with the Covered Person for the last 12 months, has been publicly represented as the Covered Person’s partner and who resides in the same household as the
Covered Person (“Cohabiting Spouse”).

“Supplementary Cardmember” means a holder of a valid Supplementary Card from American Express issued in Canada by Amex Bank of Canada.

**BENEFIT AMOUNTS**

<table>
<thead>
<tr>
<th>LOSS OF LIFE</th>
<th>$500,000</th>
</tr>
</thead>
<tbody>
<tr>
<td>DISMEMBERMENT</td>
<td></td>
</tr>
<tr>
<td>Loss of both hands or both feet</td>
<td>$500,000</td>
</tr>
<tr>
<td>Loss of one hand and one foot</td>
<td>$500,000</td>
</tr>
<tr>
<td>Loss of the entire sight of both eyes</td>
<td>$500,000</td>
</tr>
<tr>
<td>Loss of the entire sight of one eye and one hand or one foot</td>
<td>$500,000</td>
</tr>
<tr>
<td>Loss of one hand or one foot</td>
<td>$250,000</td>
</tr>
<tr>
<td>Loss of the entire sight of one eye</td>
<td>$250,000</td>
</tr>
</tbody>
</table>

The Company will pay the applicable benefit amount above if a Covered Person suffers a Loss from an Injury while coverage is in force under the Policy, but only if such Loss occurs within 100 days after the date of the accident which caused the Injury. In no event will the Company pay for more than one Loss sustained by the Covered Person as a result of any one accident. The benefit amount paid will be for the greatest Loss.

“Loss” as used above with reference to a hand or foot means complete and permanent severance through or above the wrist or ankle joint, and as used with reference to an eye means the irrecoverable loss of the entire sight of such eye.

**$500,000 MAXIMUM INDEMNITY PER COVERED PERSON**

In no event will multiple American Express Cards obligate the Company under the Policy in excess of the highest amount payable under one American Express Card, as stated in “Benefit Amounts”, for any one Loss sustained by any one individual Covered Person as a result of any one accident.

**DESCRIPTION OF BENEFITS**

**Common Carrier Benefit:**

A benefit is payable under the Policy if the Covered Person sustains Injury as a result of an accident which occurs while riding solely as a passenger in or boarding or alighting from a Common Carrier Conveyance or being struck by such Common Carrier Conveyance on a Covered Trip.

**Alternate Transportation Benefit:**

A benefit is payable under the Policy if the Covered Person sustains Injury as a result of:

1. an accident which occurs on a Covered Trip while riding as a passenger in or boarding or alighting from any conveyance providing alternate transportation for a Scheduled Airline flight which was delayed or rerouted, requiring the carrier which would have operated the flight to arrange for such alternate transportation; or
2. being struck by a conveyance providing alternate transportation for a Scheduled Airline flight.

**EXPOSURE AND DISAPPEARANCE**

If the Covered Person is unavoidably exposed to the elements because of an accident on a Covered Trip which results in the disappearance, sinking or wrecking of a Common Carrier Conveyance, and if as a result of such exposure the Covered Person suffers a Loss for which benefits are otherwise payable under the Policy, such Loss will be covered under the Policy.

If the Covered Person disappears because of an accident on a Covered Trip
which results in the disappearance, sinking or wrecking of a Common Carrier Conveyance, and if the Covered Person’s body has not been found within 52 weeks after the date of such accident, it will be presumed, provided there is no evidence to the contrary, that the Covered Person suffered Loss of life as a result of Injury covered by the Policy.

EXCLUSIONS

The Policy does not cover any Loss caused or contributed to by (1) suicide or intentionally self-inflicted Injury by the Covered Person, or any attempt thereat, while sane or insane; (2) war or any act of war, whether declared or undeclared; however, any act committed by an agent of any government, party or faction engaged in war, hostilities or other warlike operations provided such agent is acting secretly and not in connection with any operation of armed forces (whether military, naval or air forces) in the country where the Injury occurs shall not be deemed an act of war; (3) the commission or aiding and abetting in the commission of an offense under the Criminal Code of Canada or the laws of another country, or any attempt thereat, by or on behalf of the Covered Person or his or her beneficiaries; (4) Injury sustained while serving as an operator or crew member of any conveyance; (5) Injury received while driving, riding as a passenger in, boarding or alighting from a rental vehicle; (6) the Covered Person taking any alcohol, drug, medication, gas or poison unless taken as prescribed by a physician; (7) directly or indirectly, the actual, alleged or threatened discharge, dispersal, seepage, migration, escape, release of or exposure to any hazardous biological, chemical, nuclear or radioactive material, gas, matter or contamination.

INDIVIDUAL TERMINATION

The insurance of any Covered Person will terminate: (1) on the date the Policy terminates; or (2) on the date the person ceases to be a Covered Person under the Policy.

CLAIMS

Written notice of claim must be given to Chubb Life Insurance Company of Canada, 199 Bay Street - Suite 2500 P.O. Box 139, Commerce Court Postal Station Toronto, Ontario M5L 1E2 within 30 days after the occurrence of any Loss covered by the Policy, or as soon thereafter as is reasonably possible. Notice given by or on behalf of the claimant with information sufficient to identify the Covered Person shall be deemed notice to the Company. The benefit payable for any Loss will be paid upon receipt of due written proof of such Loss.

PAYMENT OF CLAIMS

Benefits for all Losses sustained by a Covered Person will be paid to the Covered Person, if living, and otherwise to the surviving person, or equally to the surviving persons, in the first of the following classes of beneficiaries in which there is a living member:

a. the Covered Person’s Spouse. If there is more than one Spouse, “Spouse” shall mean the Cohabiting Spouse at the time of the Covered Person’s Loss;

b. the Covered Person’s children including legally adopted children provided that if the Covered Person has any surviving grandchildren by a Covered Person’s child that has not survived the Covered Person, such grandchildren will share equally the share that would have been paid to their parent had he/she survived the Covered Person;

c. the Covered Person’s estate.

This policy contains a provision removing or restricting the right of the group person insured to designate persons to whom or for whose benefit insurance money is to be payable.
In determining such person or persons, the Company may rely upon an affidavit by a member of any of the classes of beneficiaries described above. Payment based upon any such affidavit shall fully discharge the Company from all obligations under the Policy unless, before such payment is made, the Company has received at the address specified above written notice of a valid claim by some other person(s). Any amount payable to a minor may be paid to the minor’s legal guardian.

GENERAL PROVISIONS

You and any claimant under the Group Policy have the right to obtain a copy of your application, any written evidence of insurability (as applicable) and the Group Policy, on request.

Every action or proceeding against an insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the Insurance Act, Limitations Act, 2002, or in other applicable legislation. The benefits described herein are subject to all of the Terms and Conditions of the Group Policy which is held by Amex Bank of Canada and may be examined at the office of the Policyholder. This Certificate replaces any prior Certificate which may have been furnished in connection with the Policy. Further information about the Policy may be obtained by calling 1-877-777-1544.

Your privacy matters to us.

At Chubb Life, we are committed to protecting your privacy. We respect your privacy and want you to understand how we collect and use your personal information.

How We Collect Your Information

Chubb Life, our reinsurers and authorized administrators (collectively “We”) collect and keep information about you, which is needed to provide the products and services you request. We collect information from you, either directly or through our representatives. We may also need to consult existing insurance files about you and collect information from third parties, such as hospitals, doctors and other health care providers, the Medical Information Bureau, the government (including government health insurance plans) and other governmental agencies, other insurance companies, financial institutions, motor vehicle reports, and your current and former employers.

How We Use Your Information

We use your information to provide the products and services you request, which includes using it to evaluate insurance risk and manage claims. We may also share your information with third parties, when it is necessary for the services we provide to you. Third parties may include other insurance companies, the Medical Information Bureau, financial institutions, third party administrators, and any references you provide. We may use your information internally, to prepare statistical reports that help us understand the needs of our customers and that help us understand and manage our business. In some instances, employees, service providers, agents, reinsurers, and any of their providers, of Chubb Life may be located outside of Canada, and your personal information may thus be subject to the laws of those foreign jurisdictions.
You may request to review your personal information in your file or request to make a correction by writing to:
The Privacy Officer; Chubb Life Insurance Company of Canada, 199 Bay Street, Suite 2500, Toronto, Ontario, M5L 1E2. For more information on privacy at Chubb, visit chubb.com/ca.

Ellen J. Moore
President, Chubb Life Insurance Company of Canada

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INTRODUCTION

Royal & Sun Alliance Insurance Company of Canada (referred to in this Certificate as the “Insurer”) provides the insurance for this Certificate under Master Policy PSI018515861 (referred to in this Certificate as the “Policy”) issued to Amex Bank of Canada (referred to in this Certificate as the “Policyholder”). This Certificate is not a contract of insurance and contains only a summary of the principal provisions of the Policy. A Cardmember or a claimant under the Policy or Group Policy may, on request to the Insurer, obtain a copy of the Policy or Group Policy, subject to certain access limitations permitted by applicable law. All benefits are subject in every respect to the Policy which alone constitutes the Agreement under which payments are made. This coverage may be cancelled, changed or modified at the option of the Insurer or the Policyholder at any time without notice. This Certificate replaces any and all certificates previously issued to the Cardmember with respect to the Policy.

This Certificate of Insurance outlines what Car Rental Theft and Damage Insurance is and what is covered along with the conditions under which a payment will be made when a Cardmember rents and operates a rental auto but does not accept the Collision Damage Waiver (CDW), Loss Damage Waiver (LDW), or their equivalent offered by a rental agency. It also provides instructions on how to make a claim. This Certificate should be kept in a safe place and carried with the Cardmember when they travel.

The Cardmember should check with their personal automobile insurer and the rental agency to ensure that they and all other drivers have adequate third party liability, personal injury and damage to property coverage. This Certificate only covers theft, loss or damage to the rental auto as stipulated herein.

IMPORTANT NOTICE - PLEASE READ CAREFULLY

• Coverage is only available if you are a resident of Canada.
• The basic Cardmember is responsible for this insurance coverage, including coverage bound by any transactions carried out by a supplementary Cardmember below the age of majority.
• This Certificate contains clauses which may limit the amounts payable.

A rental agency has no obligation to explain the Car Rental Theft and Damage Insurance coverage to the Cardmember. It is important to note that a rental agency may not classify vehicles, especially mini-vans, in the same manner as the Insurer. The Cardmember should confirm with the Insurer that their rental auto has coverage under this Certificate. Confirmation of coverage under the Policy or any questions concerning the details included herein, should be directed to the Insurer at 1-800-243-0198 (in Canada or the United States) or call collect +905-475-4822 (elsewhere in the world).

When the value of the rental auto, in its model year, is over the Manufacturer’s Suggested Retail Price (MSRP) of eighty-five thousand dollars ($85,000) Canadian excluding all taxes, at the place the rental agreement is signed or where the rental auto is picked up, no coverage will be provided under this Certificate.

PART I DEFINITIONS

Throughout this Certificate of Insurance, all italicized terms have the specific meaning explained below.
Actual cash value - means what the vehicle is worth on the date of the theft, loss and damage and takes into account such things as depreciation and obsolescence. In determining depreciation, the Insurer will consider the condition of the rental auto immediately before the theft, loss and damage occurred, the standard market resale value and normal life expectancy.

Basic Cardmember means the person in whose name Amex Bank of Canada has opened a Card account and does not include a supplementary Cardmember, provided always that the basic Cardmember’s Card account privileges have not expired, been revoked, terminated or suspended.

Card means The Platinum Card®.

Cardmember means a holder of a valid Basic or Supplementary Card issued in Canada by Amex Bank of Canada.

Coverage period means the period of time not to exceed more than forty-eight (48) consecutive days, commencing at the time the Cardmember legally takes control of the rental auto and ends at the time the rental agency resumes control of the rental auto. If the Cardmember rents a vehicle for longer than forty-eight (48) consecutive days, there will be no coverage under this insurance, including the first forty-eight (48) days. Coverage cannot be extended for more than forty-eight (48) days by renewing or taking out a new rental agreement with the same or another rental agency for the same or another vehicle. A full calendar day between rentals must exist in order to break the 48 consecutive day cycle.

Eligible person means a Cardmember and secondary drivers, while covered under this Certificate.

Loss of use means the amount paid to a rental agency to compensate it when a rental auto is unavailable for rental while undergoing repairs for damage incurred during the coverage period.

Mini-van means a vehicle which is designed and made by an automobile manufacturer as a mini-van. It is exclusively made to transport a maximum of eight people including the driver. It is used exclusively for transportation of passengers and their luggage and will not be used by the Cardmember for transportation of passengers for hire.

Off-road vehicle means any vehicle while it is being operated on a road not maintained by a federal, provincial, state, or local agency, not including an ingress or egress to private property, or any vehicle which cannot be licensed to drive on a public road and is designed and manufactured primarily for off-road usage.

Principal driver means a Cardmember who presents himself (herself) in person at the rental agency, signs the rental agreement, declines the rental agency’s CDW (LDW in the United States) or its equivalent and takes possession of the rental auto and who complies with the terms of this Certificate. The Cardmember and all drivers must otherwise qualify under and follow the terms of the rental agreement and must be legally licensed and permitted to drive the rental auto under the laws of the jurisdiction in which the rental auto shall be used.

Rental agency means an auto rental agency licensed under the law of the applicable jurisdiction which provides a rental agreement.

Rental agreement means the written contract between the Cardmember and the rental agency for the rental auto.

Rental auto means a vehicle rented from a rental agency for up to the coverage period allowed and that is not an excluded vehicle listed and described in Part IV - Exclusions, “The following vehicles are excluded from coverage under this Certificate”.

Secondary drivers means any drivers who are not the principal driver of the rental auto who are permitted to operate the rental auto by the Cardmember (the principal driver) whether or not such person has been listed on the rental
agreement or has been identified to the rental agency at the time of making the rental. The Cardmember and all drivers must otherwise qualify under and follow the terms of the rental agreement and must be legally licensed and permitted to drive the rental auto under the laws of the jurisdiction in which the rental auto shall be used.

Supplementary Cardmember means an authorized user of the Card account.

Tax-free car means a tax-free car package that provides tourists with a short-term (17 days to 6 months), tax-free vehicle lease agreement with a guaranteed buyback.

PART II  TERM OF COVERAGE

A. WHEN COVERAGE BEGINS

All coverage for eligible Cardmembers will take effect at the time the Cardmember legally takes control of the rental auto.

B. WHEN COVERAGE ENDS:

A Cardmember's coverage will end at the earliest of the following:

1. Rental agency resumes control of the rental auto;
2. When a Cardmember is no longer defined as a Cardmember or principal driver as stated in this Certificate;
3. The date on which the Policy is cancelled except that coverage in effect at the time of such cancellation will be continued on outstanding rentals until the Cardmember returns the rental auto to the rental agency, provided the total rental period does not exceed the coverage period;

WARNING: Please note that the Cardmember's responsibility for the rental agreement does not terminate by simply dropping off the keys at the rental agency or other drop box. Any damages between that time and the time the rental agency staff complete their Inspection Report will be held to the Cardmember's responsibility, so whenever possible the Cardmember should arrange to be present when the rental agency conducts their final inspection of the rental auto.

PART III  DESCRIPTION OF COVERAGE

The Car Rental Theft and Damage Insurance compensates the Cardmember or a rental agency for theft, loss and damage, up to the actual cash value of the rental auto and valid rental agency loss of use charges when the conditions described below are met. The following conditions must be satisfied for coverage to be in effect:

1. A Cardmember must initiate and complete the entire rental transaction with the same valid Card. The full cost, including applicable taxes, of the rental, must be charged to their Card. Rental autos which are part of prepaid travel packages are also covered if the total package was paid for using the Cardmember's Card;
2. A Cardmember is covered if they receive a “free rental” as a result of a promotion, where they have had to make previous vehicle rentals if each such previous rental was entirely paid for with the Cardmember's Card and the applicable taxes for the “free rental” have been charged to the Cardmember's Card;
3. A Cardmember is covered if they receive a “free rental” day(s) as a result of the Membership Rewards Program for the number of days of free rental and the applicable taxes have been charged to their Card. If the free rental day(s) are combined with rental days for which the Cardmember must pay, the entire additional payment including taxes must be paid for using their Card;
4. A Cardmember is covered if points earned under their Membership
Rewards Program are used to pay for the rentals and the applicable taxes have been charged to their Card. However, if only a partial payment is made using the Membership Rewards Program, the entire additional payment of that rental, including any applicable taxes, must be paid for using their Card in order to be covered. Note: Rentals will not be covered for Car Rental Theft and Damage if paid for with points from a reward program other than the Membership Rewards Program;

5. Only a Cardmember can rent the vehicle and decline the rental agency’s CDW, LDW or an equivalent coverage offering. Anyone other than the Cardmember doing so would void coverage;

6. A Cardmember is covered for any car, sport utility vehicle, and mini-van, in its model year, with a Manufacturer’s Suggested Retail Price (MSRP) under eighty-five thousand dollars ($85,000) Canadian, excluding all taxes, at the place the rental agreement is signed or where the rental auto is picked up, with the exception of those listed and described in the exclusion section titled “The following vehicles are excluded from coverage under this Certificate”;

7. A Cardmember is covered when only one rental auto is rented at a time, i.e. if during the same period there is more than one vehicle rented by the Cardmember, only the first rental will be eligible for these benefits;

8. The Cardmember must decline the rental agency’s CDW, LDW or similar coverage offered by the rental agency on the rental contract. If there is no space on the vehicle rental contract for the Cardmember to indicate that they have declined the coverage, then they should indicate in writing on the contract “I decline the CDW provided by the rental agency”;

9. The length of time the Cardmember rents the same vehicle must not exceed 48 consecutive days, which includes instances where the Cardmember is renting one vehicle immediately after the other. A full calendar day between rentals must exist in order to break the 48 consecutive day cycle. If the rental period exceeds 48 consecutive days, coverage will not be provided from the first day of rental onwards;

10. The Cardmember and/or eligible person has not been indemnified for damages or expenses covered under the Policy by or through personal insurance.

When a Cardmember does not have the option available to decline the rental agency’s CDW, LDW or similar provision, the Insurer will pay for covered theft, loss and damage up to the limit of the deductible stipulated in the rental agency’s CDW, LDW or similar provision, purchased by the Cardmember. This shall not be construed to provide coverage where the rental agency is responsible by legislation or law for any damage to the rental auto.

PART IV EXCLUSIONS

This insurance will not pay any expenses relating to or in any way associated with:

1. Third party liability;

2. Damages or expenses assumed, waived, or that may be paid by the rental agency, or by its insurer pursuant to any direct compensation agreement or other applicable sections of provincial insurance acts;

3. Personal injury or damage to property, except the rental auto itself or its equipment;

4. Replacement vehicle for which an automobile insurance is covering all or part of the cost of the rental;

5. The operation of the rental auto at any time during the coverage period where an eligible person is driving while intoxicated or under the influence of any illegal or prescribed (if advised not to operate a vehicle) narcotic;
6. Any dishonest, fraudulent or criminal act committed by any eligible person or at their direction;
7. Participation in any race or speed test.
8. The use of a fuel type or octane level that differs from the manufacturer’s recommended fuel for that rental auto;
9. Normal wear and tear, gradual deterioration, or mechanical or electrical breakdown or failure, inherent vice or damage, insects or vermin;
10. The operation of the rental auto in violation of the terms of the rental agreement except:
   (a) eligible person as defined may operate the rental auto;
   (b) The rental auto may be driven on publicly maintained gravel roads;
   (c) The rental auto may be driven across provincial and state boundaries in Canada and the U.S. and between Canada and the U.S.

N.B. It must be noted that theft, loss and damage arising while the rental auto is being operated under (a), (b) or (c) above is covered by this insurance, subject however to all other terms, conditions and exclusions contained in this Certificate. However, the rental agency’s third party liability insurance may not be in force and, as such, a Cardmember must ensure that they are adequately insured privately for third party liability.

11. Seizure or destruction under a quarantine or customs regulations or confiscation by order of any government or public authority; the damage between the time of seizure, confiscation or quarantine and the time the rental agency staff complete their Inspection Report will be held to be the Cardmember’s responsibility, so whenever possible they should arrange to be present when the rental agency conducts their final inspection of the vehicle;
12. The transportation of contraband or illegal trade;
13. War, hostile or warlike action, insurrection, rebellion, revolution, civil war, usurped power, or action taken by government or public authority in hindering, combating or defending against such action;
14. The transportation of property or passengers for hire;
15. Nuclear reaction, nuclear radiation, or radioactive contamination, any weapon of war employing atomic fission or a radioactive force;
16. Intentional damage to the rental auto by an eligible person or at their direction;
17. The loss, damage or misplacement of vehicle entry devices including keys and remote control devices or any related consequent loss, damage or expense.

The following vehicles are excluded from coverage under this Certificate:
1. Automobiles or other vehicles which are not rental autos;
2. Any vehicle, in its model year, with a Manufacturer’s Suggested Retail Price (MSRP) over eighty-five thousand dollars ($85,000) Canadian, excluding all taxes, at the place the rental agreement is signed or where the rental auto is picked up;
3. Vans, cargo vans or mini cargo vans (other than mini-vans);
4. Trucks, pick-up trucks or any vehicle that can be spontaneously reconfigured into a pick-up truck;
5. Limousines;
6. Off-road vehicles;
7. Motorcycles, mopeds or motor bikes;
8. Trailers, campers, recreational vehicles or vehicles not licensed for road use;
9. Vehicles towing or propelling trailers or any other object;
10. Mini-buses or buses;
11. Any vehicle which is either wholly or in part hand made, hand finished or has a limited production of under 2,000 vehicles per year;
12. Antique vehicles, meaning a vehicle over twenty (20) years old or which has not been manufactured for ten (10) years or more;
13. Tax-free cars.

PART V IN THE EVENT OF AN ACCIDENT THEFT

All claims must be reported within 48 hours of the theft, loss and damage occurring by calling 1-800-243-0198 (in Canada or the United States) or by calling collect +905-475-4822 (elsewhere in the world).

The rental auto must be carefully checked for scratches or dents before and after the Cardmember rents the vehicle. They should be sure to point out where the scratches or dents are located to a rental agency representative and have him or her note these on the appropriate form and retain a copy for their records.

If the rental auto has sustained damage of any kind during the coverage period, the Cardmember must immediately phone one of the numbers provided and must not sign a blank sales draft to cover the damage and loss of use charges or a sales draft with an estimated cost of repair and loss of use charges.

It is important to note that the Cardmember will remain responsible for the theft, loss and damage and that they may be contacted in the future to answer inquiries during the claim process.

If a Cardmember is making a claim, their claim must be submitted with as much documentation as possible, as requested below, within 45 days of discovering the theft, loss and damage.

The following claim documentation is required:

- Statement(s) if requested;
- Sales draft showing that the rental auto was paid in full with the Card, or the sales draft showing the balance of charges for the rental if points earned under the Membership Rewards Program were used to pay for part of the rental;
- A copy of both sides of the vehicle rental agreement;
- The accident or damage report, if available;
- The itemized repair bill;
- The receipt for paid repairs;
- The police report, when available, and if a police report is not legally required in the jurisdiction in which the accident occurred, then the name, badge number and division address of the police officer contacted;
- A copy of the billing or pre-billing statement if any repair charges were billed to the account.

Forward this documentation to:

Royal & Sun Alliance Insurance Company of Canada
Claims Management Services
2 Prologis Blvd., Suite 100
Mississauga, Ontario L5W 0G8

For all written and verbal correspondence, please include the Cardmember’s name, the Policyholder’s name, and the Policy number PSI018515861.
LIMITATION PERIODS: Every action or proceeding against an insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the Insurance Act (for actions or proceedings governed by the laws of British Columbia, Alberta and Manitoba), the Limitations Act, 2002 (for actions or proceedings governed by the laws of Ontario), Article 2925 of the Civil Code of Quebec (for actions or proceedings governed by the laws of Quebec), or other applicable legislation.

CANADIAN CURRENCY: All payments shall be payable in the lawful currency of Canada. All benefit limits indicated are in Canadian currency.

DISAGREEMENT OVER SIZE OF LOSS: If there is a disagreement about the amount of the loss, either the Cardmember or the Insurer can make a written demand for an appraisal. After the demand, the Cardmember selects a competent appraiser and the Insurer selects a competent appraiser. After examining the facts, each of the two appraisers will give an opinion on the amount of the loss. If they do not agree, they will select an arbitrator. Any figure agreed to by two of the three (the appraisers and the arbitrator) will be binding. The Cardmember must pay the appraiser he or she chooses. The Insurer will pay the appraiser they chose. The Cardmember will share with the Insurer the cost of the arbitrator and the appraisal process.

SUBROGATION: To the extent the Insurer pays for a loss suffered by a Cardmember, the Insurer will take over the rights and remedies the Cardmember had relating to the loss. This is known as subrogation. The Cardmember must help the Insurer preserve their rights against those responsible for the Insurer’s loss. This may involve signing any papers and taking any other steps the Insurer may reasonably require. If the Insurer takes over a Cardmember’s rights, the Cardmember must sign an appropriate subrogation form supplied by the Insurer.

SANCTIONS: The Insurer is required to comply with economic, financial and trade sanctions (“Sanctions”) imposed by Canada and may be required to comply with Sanctions imposed by the United States in certain circumstances. The Insurer is a member of the RSA Group whose principal insurance company in the United Kingdom is required to comply with Sanctions imposed by the European Union and the United Kingdom and the parties acknowledge that the Insurer intends to adhere to the same standard. Accordingly, the Insurer shall not provide any coverage or be liable to provide any indemnity or payment or other benefit under this Certificate of Insurance which would breach applicable Sanctions imposed under the laws of Canada, the European Union, the United Kingdom, or the United States.

IMPORTANT NOTICE ABOUT YOUR PERSONAL INFORMATION

Royal & Sun Alliance Insurance Company of Canada is committed to protecting your privacy and the confidentiality of your personal information. We will collect, use and disclose personal information for the purposes identified in our Privacy Policy. To obtain more information, you can review our Privacy Policy online at www.rsagroup.ca or request a copy by calling 1-888-877-1710.

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BUYER’S ASSURANCE® PROTECTION PLAN

Effective Date of this Certificate:
August 1, 2019.

INTRODUCTION

Royal & Sun Alliance Insurance Company of Canada (referred to in this Certificate as the “Insurer”) provides the insurance for this Certificate under Master Policy PSI018966745 (referred to in this Certificate as the “Policy”) issued to Amex Bank of Canada (referred to in this Certificate as the “Policyholder”). A copy of the Master Policy is on file at Royal & Sun Alliance Insurance Company of Canada, 18 York Street, Suite 800, Toronto, ON, M5J 2T8.

This Certificate is not a contract of insurance and contains only a summary of the principal provisions of the Policy. A Cardmember or a claimant under the Policy or Group Policy may, on request to the Company, obtain a copy of the Policy or Group Policy, subject to certain access limitations permitted by applicable law. All benefits are subject in every respect to the Policy which alone constitutes the agreement under which payments are made.

The insurance provided under this Certificate is supplementary. This insurance coverage is in excess of any other applicable, valid and collectible insurance indemnity available to the Cardmember.

This Certificate of Insurance outlines what the Buyer’s Assurance Protection Plan is and what is covered along with the conditions under which a payment will be made to a Cardmember. It also provides instructions on how to make a claim.

IMPORTANT NOTICE - PLEASE READ CAREFULLY

• Coverage is only available if you are a resident of Canada.

• The basic Cardmember is responsible for this insurance coverage, including coverage bound by any purchases made by a supplementary Cardmember below the age of majority.

• This Certificate contains clauses which may limit the amounts payable.

For any questions concerning the details included herein and to confirm the coverage provided under the Policy, please contact the Insurer 1-800-243-0198 (in Canada or the United States) or call collect +905-475-4822 (elsewhere in the world).

PART I DEFINITIONS

Throughout this Certificate of Insurance, all italicized terms have the specific meaning explained below.

Basic Cardmember means the person in whose name Amex Bank of Canada has opened a Card account and does not include a supplementary Cardmember, provided always that the basic Cardmember’s Card account privileges have not expired, been revoked, terminated or suspended.

Card means The Platinum Card®.

Cardmember means a holder of a valid Basic or Supplementary Card from American Express issued in Canada by Amex Bank of Canada.

Item means a new item (a pair or set being one item) of personal property (not purchased by or for use by a business for commercial purposes), or gift, for which the full purchase price is charged to the Card.

Manufacturer’s warranty means an expressly written warranty issued by the manufacturer of the item at the time of purchase. The manufacturer’s warranty
must be provided at no additional cost and be valid in Canada or the United States. **Occurrence** means a loss or losses arising from a single event or incident which is neither expected nor intended by the Cardmember.

**Other insurance** means any and all policies of insurance, contracts of indemnity, service contracts or warranties which provide additional coverage to a Cardmember for loss or damage covered under the Buyer’s Assurance Protection Plan.

**Purchase price** means the actual cost of the item, including any applicable sales tax, as shown on the store receipt.

**Supplementary Cardmember** means an authorized user of the Card account.

## PART II  DESCRIPTION OF COVERAGE

When a Cardmember charges the entire purchase price of an item to their Card, the Buyer’s Assurance Protection Plan will extend the terms of the original manufacturer’s warranty for a period of time equal to the duration of the original manufacturer’s warranty (excluding any extended warranty offered by the manufacturer or any other party), up to one additional year on warranties of five years or less that are eligible in Canada or in the United States. Coverage is provided for product malfunction, defect or damage covered by the terms of the item’s original manufacturer’s warranty, at no additional cost. Coverage takes effect immediately following the expiry of the item’s original manufacturer’s warranty, up to a maximum of one full year. In the event the item’s original manufacturer’s warranty is no longer available due to bankruptcy of the manufacturer, this insurance will provide coverage immediately following the manufacturer’s date of bankruptcy, up to a maximum of one full year.

The benefits provided under the Buyer’s Assurance Protection Plan apply only to the Cardmember. Only the Cardmember has any legal or equitable right, remedy, or claim to benefits under the Buyer’s Assurance Protection Plan.

## PART III  LIMITATIONS

1. Indemnification for loss is limited to a maximum of $10,000 per item (not to exceed $25,000 per Cardmember per policy year for all occurrences and for all items combined) and is further subject to the terms, conditions and exclusions set forth in this Certificate.

2. The insurance provided under this Certificate is supplementary. This Certificate is not a substitute for other insurance which also insures against direct physical damage, malfunction or defect. This Certificate will indemnify the Cardmember only to the extent that direct physical damage, malfunction or defect is not covered by such other insurance.

3. The total liability of the Insurer for any item under this Certificate shall not exceed the purchase price of that item.

4. Claims for items belonging to a pair or set will be covered for the full purchase price of the pair or set providing the items are not useable individually and cannot be replaced individually.

5. Valid claims will be settled, at the Insurer’s sole option, either by replacing, repairing or rebuilding the item or by cash payment in an amount not to exceed the purchase price, subject always to the limits of liability of the Insurer hereunder.

## PART IV  ADDITIONAL TERMS, CONDITIONS, RESTRICTIONS AND EXCLUSIONS

1. There shall be no coverage or entitlement to benefits under this Certificate for loss arising from the following:
   a. Any physical damage, including damage as a direct result of natural disaster or a power surge, except to the extent the original manufacturer’s
warranty covers such damage.

b. Occurrences caused by any of the following:
   I. Fraud,
   II. Abuse,
   III. War or hostilities of any kind (e.g. Invasion, rebellion insurrection),
   IV. Confiscation by order of any government, public authority, or customs official,
   V. Risk of contraband,
   VI. Illegal activity or acts,
   VII. Radioactive contamination;

c. Negligence;

d. Improper installation or alteration;

e. Ancillary costs incurred in respect of an item and not forming part of the purchase price;

f. Inherent product defects;

g. Mechanical failure or product defects covered under product recall;

h. All occurrences that take place outside the Buyer’s Assurance Protection Plan coverage effective period.

2. There shall also be no coverage or entitlement to benefits under this Certificate for the following:

a. Products with manufacturer’s warranties not valid in Canada or the United States;

b. Products which, at the time of purchase, are used, rebuilt, refurbished or remanufactured, including demos;

c. Products covered by an unconditional satisfaction guarantee;

d. Motorized vehicles (such as cars, trucks, motorcycles, boats, airplanes) and their parts (including batteries, carburetors, pipes, hoses, pistons, brakes, tires, or mufflers);

e. Motorized devices and their parts used for agriculture, landscaping, demolition or construction;

f. Improvements or upgrades to a residential or commercial property, including but not limited to permanently affixed goods. Business fixtures, including but not limited to air conditioners, refrigerators, heaters;

g. Loss or damage to electrical appliances or devices of any kind (including wiring) when loss or damage is due to electrical currents artificially generated, including arcing, unless fire or explosion ensues and then only for such loss and damage;

h. Land or buildings;

i. Jewellery;

j. Consumable or perishable items;

k. Animals or living plants;

l. One of a kind products which cannot be replaced;

m. Business property including but not limited to inventory, items purchased for resale or items that would form part of a sellable product;

n. Sports equipment and goods where the loss or damage is due to the use thereof.

o. Products with manufacturer’s warranties, or combined manufacturer’s warranties and service plan agreements, lasting in excess of five years;

p. The equipment manufacturer’s warranty is defined as the basic coverage offered by the manufacturer at the time of purchase. Buyer’s Assurance Protection Plan is not applicable to additional coverages purchased from the manufacturer or another party.
PART V NOTICE OF LOSS/ PROOF OF LOSS/ PAYMENT OF CLAIMS

The Cardmember must report their claim within 30 days from the date of occurrence. It is important to remember that the Cardmember must retain all receipts and the original manufacturer’s warranty for the item(s) until the claim process is complete. The Cardmember may also be asked to obtain a repair estimate.

1) To report an occurrence, the Cardmember must call toll free 1-800-243-0198 (in Canada or the United States) or +905-475-4822 elsewhere in the world.

2) To submit a claim, the following documentation is required:
   a. the original sales receipt;
   b. the corresponding Amex Bank of Canada account statement; and
   c. the original manufacturer’s warranty.

3) The Insurer will decide whether to have the item repaired, rebuilt or replaced, or to reimburse the Cardmember (cash or credit) up to the amount charged to the Card, and not to exceed the original purchase price. Buyer’s Assurance Protection Plan does not reimburse for shipping and handling expenses or installation, assembly, or other service charges.

4) The Cardmember must provide all requested documentation to the Insurer within 60 days from the date of the occurrence (or 30 days after request by the Insurer) to remain eligible for benefits.

5) For some claims, the Cardmember may be required to send in the damaged item, at their expense, for further evaluation of their claim. If requested, the Cardmember must send in the damaged item within 30 days from the date of request to remain eligible for benefits.

APPRAISAL

In the event of disagreement as to the value of an item, the property saved or the amount of a loss, those questions shall be determined by appraisal as provided under applicable provincial or territorial insurance legislation. There shall be no right to an appraisal until a specific demand is made in writing and until after proof of loss has been delivered.

PARTS

Except in the case of claims for items belonging to a pair or set, in the case of damage to any part of an item, consisting, when complete for use, of several parts, the Insurer is not liable for more than the repair or replacement value of the part damaged, including the cost of installation. Where parts of a pair or set are usable individually, liability will be limited to payment equal to a proportionate part of the purchase price for the item or items which form the basis of a claim hereunder.

SUBROGATION

As a condition to the payment of any claim to a Cardmember under the Policy, the Cardmember shall, upon request, transfer the damaged item to the Insurer and assign to the Insurer all legal rights which the Cardmember has against all other parties for the loss. The Cardmember shall give the Insurer all such assistance as the Insurer may reasonably require to secure its rights and remedies, including the execution of all documents necessary to enable the Insurer to bring suit in the name of the Cardmember.

DUE DILIGENCE

The Cardmember shall use diligence and do all things reasonable to avoid, mitigate or diminish any loss of or damage to property protected by Buyer’s Assurance Protection Plan. The Insurer will not unreasonably apply this provision to avoid claims under the Policy.

FALSE CLAIM
If a Cardmember makes any claim knowing it to be false or fraudulent in any respect, such Cardmember shall no longer be entitled to any benefits hereunder nor to the payment of any claim made under the Policy.

LIMITATION PERIODS

Every action or proceeding against an insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the Insurance Act (for actions or proceedings governed by the laws of British Columbia, Alberta and Manitoba), the Limitations Act, 2002 (for actions or proceedings governed by the laws of Ontario), Article 2925 of the Civil Code of Quebec (for actions or proceedings governed by the laws of Quebec), or other applicable legislation.

SANCTIONS

The Insurer is required to comply with economic, financial and trade sanctions (“Sanctions”) imposed by Canada and may be required to comply with Sanctions imposed by the United States in certain circumstances. The Insurer is a member of the RSA Group whose principal insurance company in the United Kingdom is required to comply with Sanctions imposed by the European Union and the United Kingdom and the parties acknowledge that the Insurer intends to adhere to the same standard. Accordingly, the Insurer shall not provide any coverage or be liable to provide any indemnity or payment or other benefit under this Certificate of Insurance which would breach applicable Sanctions imposed under the laws of Canada, the European Union, the United Kingdom, or the United States.

CANADIAN CURRENCY

All payments shall be payable in the lawful currency of Canada. All benefit limits indicated are in Canadian currency.

AMENDMENT

This coverage may be cancelled, changed or modified at the option of the Policyholder at any time without notice. This Certificate replaces any and all certificates previously issued to the Cardmember with respect to the Policy.

IMPORTANT NOTICE ABOUT YOUR PERSONAL INFORMATION

Royal & Sun Alliance Insurance Company of Canada is committed to protecting your privacy and the confidentiality of your personal information. We will collect, use and disclose personal information for the purposes identified in our Privacy Policy. To obtain more information, you can review our Privacy Policy online at www.rsagroup.ca or request a copy by calling 1-888-877-1710.

This insurance product is underwritten by Royal & Sun Alliance Insurance Company of Canada.

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INTRODUCTION

Royal & Sun Alliance Insurance Company of Canada (referred to in this Certificate as the “Insurer”) provides the insurance for this Certificate under Policy PS018516570 (referred to in this Certificate as the “Policy”) issued to Amex Bank of Canada (referred to in this Certificate as the “Policyholder”). This Certificate is not a contract of insurance and contains only a summary of the principal provisions of the Policy. A Cardmember or a claimant under the Policy or Group Policy may, on request to the Insurer, obtain a copy of the Policy or Group Policy, subject to certain access limitations permitted by applicable law. All benefits are subject in every respect to the Policy which alone constitutes the Agreement under which payments are made. This coverage may be cancelled, changed or modified at the option of the card issuer at any time without notice. This Certificate replaces any and all certificates previously issued to the Cardmember with respect to the Policy.

This Certificate of Insurance outlines what Purchase Protection® Plan Insurance is and what is covered along with the conditions under which a payment will be made to a Cardmember. It also provides instructions on how to make a claim.

IMPORTANT NOTICE - PLEASE READ CAREFULLY

• Coverage is only available if you are a resident of Canada.
• The basic Cardmember is responsible for this insurance coverage, including coverage bound by any purchases made by a supplementary Cardmember below the age of majority.
• This Certificate contains clauses which may limit the amounts payable.

For confirmation of coverage or for any questions concerning the information in this Certificate, call toll free 1-800-243-0198 (in Canada and the United States) or call collect +905-475-4822 (elsewhere in the world).

PART I DEFINITIONS

Throughout this Certificate of Insurance, all italicized terms have the specific meaning explained below.

Basic Cardmember means the person in whose name Amex Bank of Canada has opened a Card account and does not include a supplementary Cardmember, provided always that the basic Cardmember’s Card account privileges have not expired, been revoked, terminated or suspended.

Card means The Platinum Card®.

Cardmember means a holder of a valid Basic or Supplementary Card from American Express issued in Canada by Amex Bank of Canada.

Eligible person(s) means a Cardmember and recipients of gifts from such Cardmember, while covered under the Policy.

Insured item means a new item (a pair or set being one item) of personal property (not purchased by or for use by a business for commercial purposes), for which at least a portion of the purchase price is charged to the Card.

Occurrence means a loss or losses arising from a single event or incident which is neither expected nor intended by an eligible person.

Other insurance means any and all policies of insurance or indemnity which
provide additional coverage to a Cardmember for loss, theft or damage covered under this Certificate.

*Purchase price* means the actual cost of the insured item, including any applicable sales tax, as shown on the store receipt and where at least a portion of the cost is charged to the Cardmember’s Card.

*Supplementary Cardmember* means an authorized user of the Card account.

**PART II TERM OF COVERAGE**

**A. WHEN COVERAGE BEGINS:**

A Cardmember’s coverage will take effect at the time the Cardmember purchases the insured item.

**B. WHEN COVERAGE ENDS:**

A Cardmember’s coverage will end at the earliest of the following:

1. One hundred twenty (120) days after the date on which the insured item is purchased by the Cardmember;
2. When a Cardmember is no longer defined as a Cardmember as stated in the Policy;
3. The date on which the Policy is cancelled.

**PART III DESCRIPTION OF COVERAGE**

The Purchase Protection Plan automatically, without registration, protects most insured items when at least a portion of the purchase price is charged to the Card by insuring the item for one hundred twenty (120) days from the date of purchase in the event of direct physical damage or theft (hereinafter called “Loss”) anywhere in the world, if the item is not covered by other insurance. If the item is stolen or damaged, it will be replaced, repaired, or the Cardmember will be reimbursed the portion of the insured item that was charged to the Card, at the discretion of the Insurer. Items the Cardmember gives as gifts are covered under the Purchase Protection Plan subject to compliance with the terms and conditions of this Certificate.

**PART IV LIMITATIONS**

1. Indemnification for Loss is limited to $1,000 per Cardmember per occurrence (even if the occurrence involves more than one insured item) and is further subject to the terms, conditions and exclusions set forth in this Certificate.

2. The insurance provided under this Certificate is supplementary. This Certificate is not a substitute for other insurance which also insures against direct physical damage or theft to the insured item. This Certificate will indemnify eligible persons only to the extent that direct physical damage or theft is not covered by such other insurance.

3. The total liability of the Insurer for any insured item under this Certificate shall not exceed the purchase price of that item.

4. For insured items where only a portion of the purchase price is charged to the Card, total liability will be limited to the portion of the purchase price charged to the Card.

5. Claims for insured items belonging to a pair or set will be paid for at the portion of the purchase price charged to the Card of the pair or set providing the items are not useable individually and cannot be replaced individually. Where parts of a pair or set are useable individually, liability will be limited to payment equal to a proportionate part of the purchase price that the number of lost, stolen or damaged parts bear to the number of parts in the complete pair or set.
6. Valid claims will be settled, at the Insurer's sole option, either by replacing, repairing or rebuilding the insured item or by cash payment in an amount not to exceed the purchase price, subject always to the limits of liability.

PART V  EXCLUSIONS

1. There shall be no payment under this Certificate for Loss arising from the following perils:
   a. Wear and tear;
   b. Theft of items attached to or carried by or in a motor vehicle;
   c. Mysterious disappearance, lost items;
   d. Inherent product defects, faulty material or workmanship;
   e. War, invasion, hostilities, rebellion, insurrection, confiscation by order of any government or public authority or risks of contraband or Losses arising from illegal activity or acts;
   f. Flood and earthquake;
   g. Radioactive contamination.

2. There shall also be no payment under this Certificate for Loss of:
   a. Cash, or its equivalent, Travellers Cheques, tickets and any other negotiable instruments;
   b. Animals or living plants;
   c. Consumable goods;
   d. Perishable goods such as food and liquor;
   e. Items left behind;
   f. Ancillary costs incurred in respect of an insured item and not forming part of the purchase price;
   g. Jewellery and watches in baggage unless carried by hand and under the personal supervision of the Cardmember or by a person travelling with and sharing the same travel accommodations as the Cardmember (travelling companion), for the trip;
   h. Motorized vehicles;
   i. Property solely used and pertaining to a business, profession or occupation;
   j. Property as a result of deliberate physical abuse to the property, excluding vandalism;
   k. Property which was procured illegally; or
   l. Where the Cardmember knowingly makes a false or fraudulent claim.

PART VI  NOTICE OF LOSS AND CLAIMS

All claims must be reported within 48 hours of the theft, loss and damage occurring by calling 1-800-243-0198 (in Canada or the United States) or by calling collect +905-475-4822 (elsewhere in the world).

If the Cardmember is making a claim, their claim must be submitted with as much documentation as possible, as requested below, within 30 days after date of loss. The Cardmember will need to provide all documentation within 90 days of the date of direct physical damage or theft of the insured item to the claims administrator at the address provided below.

The following claim documentation is required:

1. Original purchase receipt for item being claimed;
2. Statement showing purchase;
3. If claim is due to damage, a repair estimate or note from repair facility stating irreparable;
4. If claim is due to damage and damage is visible, pictures of the damaged items;
5. Homeowner’s policy showing amount of deductible;
6. If claim is due to theft, a copy of the police report. If a copy was not provided, we will need the police report number, name & badge number of the police officer.

Forward this documentation to:

Royal & Sun Alliance Insurance Company of Canada
Claims Management Services
2 Prologis Blvd., Suite 100
Mississauga, Ontario L5W 0G8

For all correspondence, please include the Cardmember’s name, the Policyholder’s name and the Policy number PSI018516570.

Upon the request from the Insurer, the Cardmember will, at the Cardmember’s expense, send the damaged insured item for which a claim is made to the Insurer. When a claim is paid, the Cardmember shall, upon request from the Insurer, transfer the insured item and assign the legal right to the insured item’s ownership to the Insurer to the extent of the Loss indemnified under this Certificate.

FRAUD
Any fraud or willfully false statement in a statutory declaration in relation to any of the above particulars vitiates the claim of the person making the declaration.

APPRAISAL
In the event of disagreement as to the value of the insured item, the property saved or the amount of loss, those questions shall be determined by appraisal as provided under The Insurance Act before there can be any recovery under this Certificate whether the right to recover on the contract is disputed or not, and independently of all other questions. There shall be no right to an appraisal until a specific demand is made in writing and until after proof of loss has been delivered.

PARTS
Except in the case of claims for insured items belonging to a pair or set (see Part IV, [5]), all other loss of, or damage, to any part of the insured item, consisting, when complete for use, of several parts, the Insurer is not liable for more than the repair or replacement value of the part damaged, including the cost of installation.

SUBROGATION
When a claim is paid, the eligible person shall, upon request from the Insurer, transfer the item to the Insurer and assign the legal right to recover from the party responsible for the Loss to the Insurer to the extent of the Loss indemnified under this Certificate.

LIMITATION PERIODS
Every action or proceeding against an insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the Insurance Act (for actions or proceedings governed by the laws of British Columbia, Alberta and Manitoba), the Limitations Act, 2002 (for actions or proceedings governed by the laws of Ontario), Article 2925 of the Civil Code of Quebec (for actions or proceedings governed by the laws of Quebec), or other applicable legislation.

SANCTIONS
The Insurer is required to comply with economic, financial and trade sanctions (“Sanctions”) imposed by Canada and may be required to comply with Sanctions imposed by the United States in certain circumstances. The Insurer is a member of the RSA Group whose principal insurance company in the United Kingdom is
required to comply with Sanctions imposed by the European Union and the United Kingdom and the parties acknowledge that the Insurer intends to adhere to the same standard. Accordingly, the Insurer shall not provide any coverage or be liable to provide any indemnity or payment or other benefit under this Certificate of Insurance which would breach applicable Sanctions imposed under the laws of Canada, the European Union, the United Kingdom, or the United States.

**CANADIAN CURRENCY**

All payments shall be payable in the lawful currency of Canada. All benefit limits indicated are in Canadian currency.

**IMPORTANT NOTICE ABOUT YOUR PERSONAL INFORMATION**

Royal & Sun Alliance Insurance Company of Canada is committed to protecting your privacy and the confidentiality of your personal information. We will collect, use and disclose personal information for the purposes identified in our Privacy Policy. To obtain more information, you can review our Privacy Policy online at [www.rsagroup.ca](http://www.rsagroup.ca) or request a copy by calling 1-888-877-1710.

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CUSTOMER SERVICE NUMBERS

Chubb Life Insurance Company of Canada: 1-877-777-1544
Travel Accident Insurance

Royal & Sun Alliance Insurance Co. of Canada: 1-800-243-0198
Out of Province/Country Emergency Medical Insurance
Trip Cancellation/Interruption Insurance
Flight and Baggage Delay & Hotel Burglary Insurance
Lost or Stolen Baggage Insurance
Car Rental Theft and Damage Insurance
Buyer’s Assurance® Protection Plan
Purchase Protection® Plan