

My Travel Insurance

Policy Wording

CHUBB®

My Travel Insurance

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Benefit Schedule

	Summary of Benefits	Plan Category		
		Essential	Standard	Superior
Personal Accident (SGD)				
1	Accidental Death & Permanent Disablement - For Children (Family Plan only) - For Adult above 70 years old	125,000 31,250 62,500	250,000 62,500 125,000	500,000 125,000 250,000
2	Double Public Transport Cover - For Children (Family Plan only) - For Adult above 70 years old	250,000 62,500 125,000	500,000 125,000 250,000	1,000,000 250,000 500,000
Overseas Medical and Travel Expenses (SGD)				
3	Overseas Medical and Accidental Dental Expenses - For Children (Family Plan only) - For Adult above 70 years old Alternative Medical Expenses	500,000 62,500 125,000 maximum 300	1,000,000 125,000 250,000 maximum 300	2,000,000 250,000 500,000 maximum 300
4	Overseas Medical Expenses (Women’s Benefit)	2,000	3,000	5,000
5	Overseas Hospital Confinement Benefit	200 per day maximum 25 days	200 per day maximum 100 days	200 per day maximum 250 days
6	Compassionate Visit Overseas	2,500	5,000	10,000
7	Return of Minors	2,500	5,000	10,000
8	Emergency Telephone Charges	150	300	Actual Cost
9	Post Journey Medical Expenses Alternative Medical Expenses	12,500 maximum 750	25,000 maximum 750	50,000 maximum 750
10	Post Journey Hospital Confinement Benefit	100 per day maximum 5 days	100 per day maximum 10 days	100 per day maximum 20 days
11	Chubb Assistance - Emergency Medical Evacuation & Repatriation	500,000	1,000,000	Unlimited
12	Chubb Assistance - Repatriation of Mortal Remains	500,000	1,000,000	Unlimited
Liability (SGD)				
13	Personal Liability	500,000	1,000,000	2,000,000
14	Legal Expenses	25,000	75,000	150,000
Travel Inconveniences (SGD)				
15	Travel Cancellation	5,000	10,000	20,000
16	Travel Curtailment	5,000	10,000	20,000
17	Travel Delay	200 per 6 consecutive hours, maximum 800	200 per 6 consecutive hours, maximum 1,200	200 per 6 consecutive hours, maximum 2,400
18	Travel Postponement	500	1,000	2,000
19	Travel Misconnection	100 per 6 consecutive hours, maximum 800	100 per 6 consecutive hours, maximum 1,000	200 per 6 consecutive hours, maximum 2,000
20	Flight Diversion	100 per 6 consecutive hours, maximum 800	100 per 6 consecutive hours, maximum 1,000	200 per 6 consecutive hours, maximum 2,000
21	Flight Overbooked	100 after 6 hours	200 after 6 hours	500 after 6 hours
22	Loss of Deposit due to Insolvency of Travel Agent	1,000	2,000	5,000
23	Loss of Frequent Flyer Points	5,000	10,000	20,000

	Summary of Benefits	Plan Category		
		Essential	Standard	Superior
24	Personal Property and Baggage	3,500 maximum 500 per item 1,000 for laptop	5,000 maximum 500 per item 1,000 for laptop	8,000 maximum 500 per item 1,000 for laptop
25	Baggage Delay	200 per 6 consecutive hours, maximum 800	200 per 6 consecutive hours, maximum 1,200	200 per 6 consecutive hours, maximum 2400
26	Personal Money and Travel Documents	1,000 maximum 300 money	3,000 maximum 300 money	5,000 maximum 300 money
27	Fraudulent Credit Card Usage	1,000	2,000	5,000
28	Credit Card Outstanding Balance	2,500	5,000	10,000
29	Kidnap / Hostage	100 per 6 hours, maximum 2,000	150 per 6 hours, maximum 5,000	200 per 6 hours, maximum 10,000
30	Hijack of Public Conveyance	100 per 6 hours, maximum 2,000	150 per 6 hours, maximum 5,000	200 per 6 hours, maximum 10,000
COVID-19 (SGD)				
31A	Overseas Death due to COVID-19	10,000	10,000	10,000
31B	Overseas Medical Expenses due to COVID-19	150,000	150,000	200,000
	- For Children (Family Plan only)	150,000	150,000	200,000
	- For Adult above 70 years old	75,000	75,000	150,000
31C	Emergency Medical Evacuation & Repatriation due to COVID-19	50,000	100,000	200,000
31D	Repatriation of Mortal Remains due to COVID-19	50,000	100,000	200,000
31E	Overseas Hospital Confinement Benefit due to COVID-19 (2 days deductible applies)	100 per day maximum 7 days	100 per day maximum 14 days	100 per day maximum 14 days
31F	Overseas Quarantine Benefit due to COVID-19	50 per day maximum 7 days	50 per day maximum 14 days	50 per day maximum 14 days
31G	Travel Cancellation due to COVID-19	2,500	5,000	10,000
31H	Travel Curtailment due to COVID-19	2,500	5,000	10,000
Lifestyle (SGD)				
32	Home Guard	NA	5,000	10,000
33	Rental Vehicle Excess	NA	500	1,000
34	Rental Vehicle Return	NA	250	500
35	Pet Cover	NA	50 per 6 consecutive hours, maximum 500	100 per 6 consecutive hours, maximum 1,000
Winter Sports (Optional) (SGD)				
36A	Ski Equipment	NA	3,000 maximum 1,000 per item	5,000 maximum 1,000 per item
36B	Piste closure	NA	50 per day maximum 250	100 per day maximum 500
36C	Unused ski equipment hire, lift passes and ski school expenses	NA	500	1,000
36D	Replacement of ski pass or ski lift pass	NA	250	500
Golf (Optional) (SGD)				
37A	Golf Equipment	NA	3,000 maximum 1,000 per item	5,000 maximum 1,000 per item
37B	Hole-In-One	NA	300	500

	Summary of Benefits	Plan Category		
		Essential	Standard	Superior
37C	Unused Green Fees	NA	750	1,000
Others				
	24-hour Worldwide Medical Emergency Assistance Hotline	Yes	Yes	Yes
	24-hour Travel Advice Hotline	Yes	Yes	Yes
	Terrorism extension	Yes	Yes	Yes
	Automatic Extension of Cover if insured is sick or injured while overseas	Public Transport: 14 days Injury / Illness: 30 days	Public Transport: 14 days Injury / Illness: 30 days	Public Transport: 14 days Injury / Illness: 30 days

Important Notes

1. The amounts listed above are the maximum coverage payable for each benefit.
2. All benefit items are on reimbursement basis where you will be reimbursed for the expenses incurred except for benefit items 1, 2, 5, 10, 17, 19, 20, 21, 25, 29, 30, 31A, 31E, 31F, 35, 36B.
3. Maximum of 90 days per Journey for Annual Multi-Trip Policy.
4. "Pre-existing Medical conditions" will not be covered.
5. Please refer to the Policy Wording for the full specifications, conditions and exclusions.

Part 1 Interpretation

Section 1 – Definitions

In this Policy, unless otherwise defined or the context otherwise requires:

Accident means a sudden unforeseen and fortuitous event and Accidental shall have a corresponding meaning.

Acts of Terrorism means any actual or threatened use of force or violence directed at or causing damage, injury, harm or disruption, or commission of an act dangerous to human life or property, against any individual, property or government, which the stated or unstated objective of pursuing economic, ethnic, nationalistic, political, racial or religious interests, whether such interests are declared or not. Robberies or other criminal acts, primarily committed for personal gain and acts arising primarily from prior personal relationships between perpetrator(s) and victim(s) shall not be considered Act of Terrorism. Act of Terrorism shall also include any act, which is verified or recognized by the (relevant) government as an act of terrorism.

Alternative Medical Expenses means the reasonable expenses for treatments of Bodily Injury or Sickness by an Alternative Medical Physician.

Alternative Medical Physician means a legally licensed traditional medical practitioner (including a Chinese acupuncturist or bonesetter) or chiropractor or physiotherapist duly registered and practicing within the scope of his license pursuant to the laws of the country in which such practice is maintained. **Alternative Medical Physician** shall not include the Insured Persons or any of their relatives unless otherwise approved by the Company.

Annual Policy means a policy issued for the selected plan where the Insured Person(s) can make an unlimited number of Journeys to the selected region of travel during the Period of Insurance.

Asia Pacific means Australia, New Zealand, China, Taiwan, Hong Kong SAR, Macao SAR, Mongolia, Japan, South Korea, India, Sri Lanka, and includes South East Asia.

Benefit means the respective benefit, as stated in the Certificate of Insurance, payable by the Company under the terms and conditions of this Policy in respect of each event or loss covered by this Policy.

Bodily Injury means injury sustained by an Insured Person resulting solely, directly and independently of all other causes from an Accident and caused by external, violent and visible means.

Cancellation Expenses means loss of deposits, advance payments for Journey or accommodation or other charges, which are either forfeited, deemed non-refundable or levied due to the cancellation of the Journey, resulting from a Specified Cause or COVID-19 Specified Cause.

Certificate of Insurance means the Certificate of Insurance which is incorporated and forms part of this Policy.

Civil Commotion means a disturbance, commotion or disorder created by civilians usually against a governing body or the policies thereof.

Communicable Disease Outbreak or Communicable Disease means a disease that may be transmitted directly or indirectly by one person or animal to another by any means due to a virus, bacteria or other microorganism and that leads to:

- (i) the imposition of quarantine or restriction in movement of people or animals by any national or international body or agency; or
- (ii) a travel advisory or warning being issued by a national or international body or agency.

Company means Chubb Insurance Singapore Limited.

Compulsory Quarantine means the Insured Person is quarantined in a facility appointed by the government authorities for at least one (1) full day until discharged. Compulsory Quarantine does not mean the closure of borders by a government or travel body, the enforcement of social distancing measures, a stay at home notice, or a period of isolation or social distancing required either before Your departure or at your destination Overseas.

Confined or Confinement means confinement in Hospital for at least a Day as a Resident in-Patient (other than for day surgery) upon the advice of and under the regular care and attendance of a Physician and for this purpose, Day shall mean a period for which the Hospital charges for room and board. Such Confinement and number of days of Confinement to be necessarily and reasonably prescribed.

COVID-19 refers to the strain of Novel Coronavirus 2019 classified in February 2020 by the World Health Organisation (WHO) as “Coronavirus Disease 2019 (COVID-19)” or any mutation or variation thereof or any related strain), contracted and commencing whilst this Policy is in force and results, directly and independently of all other such causes.

Curtailment Expenses means

- (i) loss of deposits, advance payments for Journey or accommodation or other charges, which are either forfeited, deemed non-refundable or levied due to the cancellation of the remaining of the Journey; and
- (ii) additional travel and accommodation expenses resulting from a Specified Cause or COVID-19 Specified Cause.

Dental Expenses means reasonable and necessary charges for dental treatment, carried out by a Dentist, medically necessary to treat the Insured Person's condition, including charges for medical supplies or services, not exceeding the usual level of charges for similar treatment, supplies or medical services in the locality where the expense is incurred and does not include charges that would not have been made if no insurance existed.

Dentist means a legally licensed dentist or dental surgeon duly registered and practicing within the scope of his license pursuant to the laws of the country in which such practice is maintained. Dentist shall not include the Insured Person or any of their relatives unless otherwise approved by the Company.

Effective Date means the effective date in the Certificate of Insurance.

Family Member means an Insured Adult's Partner, parent, parent-in-law, grandparent, child, brother or sister.

Financial Default means the complete suspension of operations due to financial circumstances whether or not bankruptcy petition is filed; or partial suspension of operations following a filing of a bankruptcy petition.

Home Country means any country or territory to which the Insured Person is a citizen.

Hospital means a legally constituted establishment operated pursuant to the laws of the country in which it is based, which holds a license as a hospital (if licensing is required in the state or government jurisdiction) and meets the following requirements:

- (i) operates primarily for the reception, medical care and medical treatment of sick, ailing or injured persons as in-patients;
- (ii) provides full-time nursing service by and under the supervision of a staff of graduate Nurses;
- (iii) has a staff of one (1) or more Physicians available at all times;
- (iv) maintains organised facilities for the medical diagnosis and treatment of such persons, and provides (where appropriate) facilities for major surgery within the confines of the establishment or in facilities controlled by the establishment;

and **Hospital** shall not include the following:

- (i) a mental institution; an institution confined primarily to the treatment of psychiatric disease including sub-normality; the psychiatric department of a hospital.
- (ii) a health hydro clinic or nature cure clinic; a place for or a special unit of a hospital used primarily as a place for drug addicts or alcoholics,
- (iii) a clinic, nursing, rest, rehabilitative, convalescent home, extended care facility or similar establishment.

Health Risk Warning means the Compulsory Quarantine order given by the government to close contacts of a COVID-19 positive case, which is enforceable by law.

Insured Adult(s) means (an) adult(s) between the age of eighteen (18) years and seventy-four (74) years on the Effective Date.

Insured Child(ren) means legally dependent child(ren) (including stepchild(ren)) and/or legally adopted child(ren) of the Insured Person.

Insured Person(s) means Insured Adult, his Partner and/or their Insured Child(ren) named as such on the Certificate of Insurance, as follows:

SINGLE TRIP POLICY

For “Individual” Plan, the individual must be:

- (i) an Insured Adult or

(ii) an Insured Child who is travelling with an adult throughout the Journey.

For “Couple” Plan, the “Couple” shall comprise:

(iii) a maximum of two (2) Insured Adults who need not be related.

For “Family” Plan, the “Family” shall comprise:

(iv) a maximum of two (2) Insured Adults who need not be related, and

(v) any number of Insured Child(ren) belonging to at least one of the Insured Adults referred to herein.

ANNUAL POLICY

For “Individual” Plan, the individual must be an Insured Adult.

For “Couple” Plan, the “Couple” shall comprise:

(i) an Insured Adult, and

(ii) his Partner

For “Family” Plan, the “Family” shall comprise:

(iii) an Insured Adult, and

(iv) his Partner, and

(v) their Insured Child(ren)

Each Insured Child in a “Family” Plan must be accompanied by an adult on any Journey or be at least twelve (12) years old if travelling alone during the Period of Insurance.

Journey means a One Way Journey or a Return Journey.

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

Loss of Sight means the entire and permanent loss of all sight in any eye rendering the Insured Person absolutely blind in that eye and beyond remedy by surgical or other treatment.

Loss of Speech and Hearing means total and irrecoverable loss of speech and hearing which is beyond remedy by surgical or other treatment.

Medical Expenses means Usual, Reasonable and Customary Medical Expenses necessarily and reasonably incurred in the medical or surgical treatment of Bodily Injury or Sickness covered by this Policy.

Natural Disasters mean extreme weather conditions (including but not limited to typhoons, hurricanes, cyclones or tornadoes), naturally occurring wildfires, floods, tsunamis, volcanic eruptions, earthquakes, landslides or other convulsion of nature or by consequences of any of the occurrences mentioned above.

Nominated Account means a credit or charge card account designated by the Insured Person, which is not a Medisave account, to which premiums are to be charged.

Nurse means any qualified or trainee nurse or general nurse duly registered pursuant to the laws of the country in which the nurse is employed.

One Way Journey means a one way trip made by the Insured Person from Singapore to a destination outside Singapore, and shall commence on the later of the following:

(i) 12.00 a.m. on the Effective Date of the Period of Insurance specified in the Certificate of Insurance;

(ii) the time the Insured Person leaves his home or usual place of employment in Singapore to commence the trip;

and shall terminate on the earlier of the following:

(iii) 11.59 p.m. on the expiry date of the Period of Insurance specified in the Certificate of Insurance;

(iv) the time the Insured Person arrives at his place of residence or place of employment in the destination country.

Overseas means anywhere outside Singapore, except Cuba.

Partner means spouse or de-facto with whom the Insured Person has been living permanently with at least three (3) months or more at the time of Accident/Sickness.

Period of Insurance means the period during which the coverage under this Policy is effective, as stated in the Certificate of Insurance.

Permanent Disablement means disablement that results solely, directly and independently of all other causes from Bodily Injury and which occurs within one hundred and eighty (180) consecutive days of the Accident in which Bodily Injury was sustained, and:

- (i) falls into one of the categories listed in the Table of Benefits, Part 7, Section 1 - Accidental Death and Permanent Disablement; or
- (ii) is a disablement lasting twelve (12) consecutive months from the date of Accident and at the expiry of that period, is beyond hope of improvement.

Permanent Total Disablement means disablement that results solely, directly or independently of all other causes from Bodily Injury and which occurs within one hundred eighty (180) days of the Accident in which such Bodily Injury was sustained, lasts for twelve (12) consecutive months and at the expiry of the period will in all probability, entirely prevent the Insured Person from engaging in gainful employment of any and every kind for the remainder of his life.

Policy means this Policy Wording, Benefit Schedule and Certificate of Insurance describing the insurance contract between the Insured Person and the Company.

Pre-existing Medical Condition means any condition which:

- (i) the Insured Person received medical treatment, diagnosis, consultation or prescribed drugs within a twelve (12) month period preceding the commencement of a Journey, or
- (ii) medical advice or treatment was recommended by a Physician within a twelve (12) month period preceding the commencement of a Journey, or
- (iii) a reasonable person in the circumstances would be expected to be aware of within a twelve (12) month period preceding the commencement of a Journey.

Physician means a legally licensed physician or surgeon duly registered and practicing within the scope of his license pursuant to the laws of the country in which such practice is maintained. Physician shall not include the Insured Persons or any of their relatives unless otherwise approved by the Company.

Public Conveyance means any land, sea or air conveyance operated under a license for the transportation of fare paying passengers, and which has fixed and established routes only.

Renewal Date means one (1) year from the Effective Date and subsequently, the same day of each successive year.

Return Journey means a return trip made by the Insured Person from Singapore to a destination outside Singapore and back, and shall commence on the later of the following:

- (i) 12.00 a.m. on the Effective Date of the Period of Insurance specified in the Certificate of Insurance;
- (ii) the time the Insured Person leaves his home or usual place of employment in Singapore to commence the trip;

and shall terminate on the earlier of the following:

- (iii) 11.59 p.m. on the expiry date of the Period of Insurance specified in the Certificate of Insurance;
- (iv) the time the Insured Person returns to his home or usual place of employment in Singapore.

Resident In-patient means an Insured Person whose Confinement is as a resident bed patient and whose confinement is due to Bodily Injury or Sickness and is covered by this Policy and not merely for any form of nursing, convalescence, rehabilitation, rest or extended-care.

Riot means the act of any person taking part together with others in any disturbance of the public peace (whether in connection with a strike or lock-out or not) or the action of any lawfully constituted governmental authority in suppressing or attempting to suppress any such disturbance or in minimising the consequences of such disturbance.

Scheduled Departure Date means the date on which the Insured Person is scheduled to depart on a Journey as set out in his travel ticket.

Sickness means physical condition marked by a pathological deviation from the normal healthy state as verified by a Physician.

Singapore Resident means a Singapore Citizen or Singapore permanent resident or work permit holder or employment pass holder or dependent's pass holder or long-term social visit pass holder or student pass holder on the Effective Date.

Single Trip Policy means a policy issued for the selected plan where the Insured Person(s) can only make a single Journey to the selected region of travel during the Period of Insurance.

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

South East Asia means Cambodia, Laos, Myanmar, Thailand, Vietnam, Indonesia, Malaysia, Philippines, Brunei and Timor Leste.

Strike means the willful act of any striker or locked-out worker done in furtherance of a strike or in resistance to a lock-out; or the action of any lawfully constituted authority in preventing or attempting to prevent any such act in minimising the consequences of any such act.

Temporary Medical & Quarantine Facility means any government temporary facility established to confine, isolate, hold or treat individuals diagnosed with COVID-19.

Travel Companion means a person who has travel bookings to accompany the Insured Person on a Journey.

Usual, Reasonable and Customary Medical Expenses means charges for treatment, supplies or medical services medically necessary to treat the Insured Person's condition, does not exceed the usual level of charges for similar treatment, supplies or medical services in the locality where the expense is incurred and does not include charges that would not have been made if no insurance existed.

Worldwide means any countries outside Singapore, except Cuba.

Part 2 Eligibility

To be eligible for cover under this Policy:

- (i) the Insured Adult and/or his Partner must be a Singapore Resident and aged between of eighteen (18) years and seventy-four (74) years on the Effective Date.
- (ii) the Insured Child(ren), must be:
 - (a) a Singapore Resident;
 - (b) at least forty-five (45) days of age and eighteen (18) years (or twenty-three (23) years if studying full-time in a recognised tertiary institution) on the Effective Date;
 - (c) unmarried;
 - (d) unemployed; and
 - (e) travelling on a Journey with an adult, or at least twelve (12) years old if travelling alone.

Part 3 Scope And Limits Of Cover And Benefits

Section 1 - Choice Of Plans

The scope of coverage and benefits under this Policy will vary as follows:

GEOGRAPHICAL COVER

- (i) if "South East Asia" cover has been chosen, only Journeys to and from South East Asia will be covered under this Policy;
- (ii) if "Asia Pacific" cover has been chosen, only Journeys to and from Asia Pacific will be covered under this Policy;

- (iii) if “Worldwide Excluding United States of America (USA), Canada and Cuba” cover has been chosen, Journeys to and from all countries and territories outside Singapore, except USA, Canada and Cuba will be covered under this Policy;
- (iv) if “Worldwide Excluding Cuba” cover has been chosen, Journeys to and from all countries and territories outside Singapore, except Cuba will be covered under this Policy;

BENEFITS

- (v) the monetary amounts and limits of Benefits will vary according to whether an “Essential”, “Standard” or “Superior” plan has been chosen.

Section 2 - Commencement Of Coverage

Coverage pertaining to cancellation of the Journey under Section 15, 23 and 24 of Part 7, insurance is effective upon the issuance of the Certificate of Insurance and terminates on commencement of the planned Journey from Singapore.

Coverage under Section 18 of Part 7, insurance is effective upon the issuance of the Certificate of Insurance and terminates upon postponement of the planned Journey.

For all other sections, insurance commences upon commencement of a Journey.

Section 3 - Limits Of Coverage

1. Any cover under this Policy in respect of an Insured Person shall terminate on the earliest of the following events:
 - (i) Upon the expiry of any Period of Insurance during which the Insured Person ceases to satisfy any of the eligibility requirements set out herein; or
 - (ii) Upon the death of the Insured Person.
2. Termination of cover under this Policy in respect of an Insured Adult shall automatically terminate cover for all other Insured Persons.
3. Subject to Section 4 - Policy Extension, or as provided in an appropriate endorsement, the Insured Person(s) shall only be covered:
 - (i) if this Policy is an Annual Policy: for the first ninety (90) consecutive days of any Journey, and the Company shall not be liable in respect of any loss occurring after 12.00 a.m. on the ninety-first (91st) day after commencement of any Journey; or
 - (ii) if this Policy is a Single Trip Policy: for the first one hundred and eighty-three (183) consecutive days of any Journey, and the Company shall not be liable in respect of any loss occurring after 12.00 a.m. on the one hundred and eighty-fourth (184th) day after the commencement of any Journey, or the expiry of the Period of Insurance stated in the Certificate of Insurance, whichever is earlier.

Section 4 - Policy Extension

1. In the event that the Insured Person, as a ticket holding passenger on a scheduled Public Conveyance, being prevented from completing the return leg of a Journey within the Period of Insurance, as a result of:
 - (a) the Insured Person's suffering from a Bodily Injury or Sickness, which is determined to be unfit for travel by a Physician designated by Chubb Assistance at the Physician's absolute discretion;
 - (b) the Insured Person being Confined in a Hospital Overseas at the expiry of the Policy; or
 - (c) the Insured Person being quarantined as advised by a Physician.

During the Insured Person Journey, the cover for that Journey shall be automatically extended for up to thirty (30) days without additional premium.

2. In the event that the Insured Person, as a ticket holding passenger on a scheduled Public Conveyance, being prevented from completing the return leg of a Journey within the Period of Insurance, as a result of the scheduled Public Conveyance in which the Insured Person is travelling being unavoidably delayed as a result of strike or industrial actions, adverse weather conditions, natural disasters or mechanical breakdown/derangement of the Public Conveyance or due to grounding of an aircraft as a result of mechanical or structural defect during the Insured Person's Journey, the cover for that Journey shall be automatically extended for up to fourteen (14) days without additional premium.

Part 4 General Exclusions

This Policy does not cover, and the Company will not in any event be liable to pay any Benefits or indemnify the Insured Person in respect of, any loss which is, directly or indirectly, caused by, a consequence of, arises in connection with or is contributed to by any of the following:

1. Declared or undeclared war or any act of war, invasion, foreign enemy, civil war, rebellion, revolution, insurrection, military or usurped power.
2. Loss, destruction or damage to any property whatsoever or any loss or expense whatsoever arising there from or any consequential loss directly or indirectly caused or contributed by or arising from ionising radiations or contamination by radio-activity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel.
3. Any willful or intentional acts of the Insured Person whether sane or insane (except in an attempt to save a human life), self-inflicted injury, suicide acts or agreements or any attempt thereat, provoked homicide or assault.
4. The Insured Person acting as a law enforcement officer, emergency medical or fire service personnel, civil defense personnel or military personnel of any country or international authority, whether full- time service or as a volunteer, other than for reservist training under the Section 14 of the Enlistment Act, Chapter 93 of Singapore.
5. The Insured Person engaging in, practicing for or taking part in training in any speed contest or racing (other than on foot) and any professional competition or sports.
6. Any condition, which is or results from or is a complication of infection with Human Deficiency Syndrome ('HIV'), any variance including Acquired Immune Deficiency Syndrome ('AIDS'), and AIDS Related Complications ('ARC'), or any opportunistic infections and/ or malignant neoplasm (tumor) found in the presence of HIV, AIDS or ARC.
7. Any condition which is, results from or a complication of pregnancy, childbirth, miscarriage (except miscarriage due to Bodily Injury) or abortion, intoxication by alcohol or drugs not prescribed by a Physician.
8. Illegal acts (or omissions) of the Insured Person or the Insured Person's executors, administrators, legal heirs or personal representatives, loss resulting directly or indirectly from action taken by the Government Authorities including confiscation, seizure, destruction and restriction.
9. The Insured Person engaging in aviation, other than as a fare- paying passenger in, boarding and alighting from any fixed- wing aircraft and/or helicopter provided and operated by a regularly scheduled airline or private unscheduled air chartered company which is duly licensed for the regular transportation of fare- paying passengers.
10. Any loss or expenses which is, directly or indirectly, caused by, a consequence of, arises in connection with or is contributed to by the Insured Person undertaking any Journey against the advice of a Physician or for the purpose of seeking medical attention.
11. Any Pre-existing Medical Conditions.
12. Any prohibition or breach of government regulation or any failure by the Insured Person to take reasonable precautions to avoid a claim under this Policy following the warning of any intended strike, Riot or Civil Commotion, or Natural Disasters through or by general mass media.
13. Any loss or expenses with respect to Cuba or a Specially Designated List or which if reimbursed or paid by the Company would result in the Company being in breach of trade or economic sanctions or other such similar laws or regulations.
14. The Insured Person not taking all reasonable efforts to safeguard his property or to avoid any injury or minimise any claim under the policy.
15. Any condition which is, results from or a complication of suicide or attempted suicide or intentional self-injury.
16. Mental and nervous disorders, including but not limited to insanity.
17. The Insured Person engaging in naval, military or air force service or operation or testing of any kind of conveyance or being employed as a manual worker or whilst engaging in offshore activities like diving, oil-rigging, mining or aerial photography or handling of explosive or loss of or damage to hired or leased equipment.
18. Any condition which results from or is a complication of venereal disease.
19. Any Communicable Disease Outbreak or any fear or threat of a Communicable Disease Outbreak unless expressly included at the date of inception or renewal of this Policy.

20. Any known event/foreseen circumstance, which means Riot, strike, Civil Commotion or Natural Disaster that were publicised or reported by the media or through travel advice issued by a national or international body or agency before the Policy was taken up or before the trip was booked (in the case of an Annual Policy).

Sanctions Exclusions Applicable to this Policy

This insurance does not apply to the extent that trade or economic sanctions or other laws or regulations prohibit Us from providing insurance, including, but not limited to, the payment of claims. All other terms and conditions of the Policy remain unchanged.

Chubb Insurance Singapore Limited is a subsidiary/branch of a US company and Chubb Limited, a NYSE listed company. Consequently, Chubb Insurance Singapore Limited is subject to certain US laws and regulations in addition to EU, UN and Singapore sanctions restrictions which may prohibit it from providing cover or paying claims to certain individuals or entities or insuring certain types of activities related to certain countries such as Cuba.

Part 5 Special Conditions

Section 1 - Conditions Applicable To Annual Policies Only

1. Cancellation

The Company may cancel this Policy at any time by giving seven (7) days' notice delivered to the Insured Person or mailed to his last address as shown by the records of the Company stating when thereafter such cancellation shall be effective. In the event of such cancellation, the Company will return promptly the pro-rata unearned portion of any premium actually paid by the Insured Person. Such cancellation shall be without prejudice to any claim originating prior thereto.

The Insured Person may cancel this Policy at any time by giving notice to the Company provided no claim has arisen during the current Period of Insurance. In the event of such cancellation, the Company will promptly return any portion of the premium paid that has not been deemed to be earned by the Company. The premium deemed to be earned shall be, computed in accordance with the applicable percentage indicated below.

	Percentage Of Annual Premium
2 Months (Minimum)	40%
3 Months	50%
4 Months	60%
5 Months	70%
6 Months	75%
Over 6 Months	100%

Such cancellation shall be without prejudice to any event giving rise to a claim under this Policy prior to the effective date of such cancellation.

2. Notification Requirements

If the Insured Person is admitted to Hospital, the Insured Person must advise Chubb Assistance as soon as practically possible.

The Insured Person must notify the tour, public transport or accommodation provider immediately upon finding out that a change or cancellation is required to the itinerary as practically possible.

3. Addition Of Insured Person

No person shall be covered by this Policy unless such person is specifically named as an Insured Person and evidenced by a written endorsement to this Policy.

Additional premium will be charged on a pro-rata basis for each additional Insured Person included under this Policy after the commencement of the Period of Insurance or at the time of renewal of this Policy.

4. Automatic Renewal (Applicable to Annual Policies Only)

As agreed with You at the inception of this Policy, this Policy will, subject to its terms and conditions, be automatically renewed each year upon actual receipt of the full premium for that year by the Company, unless:

- (i) You notify Us in writing prior to expiry of the Policy that you do not wish to renew for the following year; or
- (ii) We notify You, at least forty-five (45) days prior to expiry of the Policy, that we do not intend to renew the Policy for the following year.

The process for automatic renewal shall be as follows:

We will attempt to debit the premium from the Nominated Account within fifteen (15) days prior to expiry of the Policy.

Provided that We actually receive the premium prior to the expiry of the Policy, the Policy will renew for another one (1) year.

This Policy shall be cancelled automatically without any written notice from the Company if the full premium is not received by the Company before the expiry of the Policy.

If the Company has debited the Nominated Account and the Insured Person wishes to cancel the Policy prior to the expiry of the Policy, the Company will refund the premium in full. The cancellation will be deemed as effective from the expiry of the Policy.

Section 2 - Conditions Applicable To Single Trip Policies Only

1. Premium

The Company will not refund the premium once the Certificate of Insurance is issued.

2. Extension And Expansion Of Coverage

An Insured Person may at any time during a Journey, obtain an extension of the Period of Insurance or an expansion of the geographical coverage from “South East Asia” to “Asia Pacific”, “Worldwide Excluding USA, Canada and Cuba” or “Worldwide Excluding Cuba”, by notifying the Company of the desired change and paying the appropriate additional premium.

Part 6 General Conditions

1. Payment Before Cover Warranty

- (i) It is hereby agreed and declared that the total premium due must be paid and actually received in full by the Company (or the intermediary through whom this Policy was effected) on or before the Effective Date of the coverage under the Policy or the Renewal Date.
- (ii) In the event that the total premium due is not paid and actually received in full by the Company (or the intermediary through whom this Policy was effected) on or before the Effective Date or the Renewal Date, no benefits whatsoever shall be payable by the Company.
- (iii) For any Policy where the Company agrees that payment of the premium is to be made by credit or charge card/ debit card, the submission of a complete and properly signed Direct Debit Authorisation form (or such other forms as may be required by the card centre, bank or the Company) to the Company on or before the Effective Date shall be deemed to be payment received by the Company, subject to clause 1(iv).
- (iv) In the event of any rejection by the card centre or the bank of the Direct Debit Authorisation form (or any such form referred to in clause 1(iii)), or any inability by the Company to obtain payment of the premium by credit or charge card/ debit card due to any reason, the Company shall allow a second attempt for the charge and deduction of the outstanding premiums from the relevant card centre or bank.

Should the second attempt fail for any reason, the Policy shall be deemed to be cancelled immediately effective from the day of the month when premium was due and unpaid and no benefit shall be payable by the Company. The Company will inform the Insured Adult of the cancellation by sending a notice in writing to the Insured Adult's address on file. Any payment received thereafter shall be of no effect whatsoever on the cancellation of the Policy.

2. Entire Contract, Changes

This Policy, the Certificate of Insurance and any amendments or endorsements shall constitute the entire contract of insurance. No change to the terms and conditions of this Policy shall be valid unless approved in writing by an authorised representative of the Company and such approval shall be endorsed hereon or attached hereto. No broker or agent has the authority to amend or to waive any of the terms and conditions of this Policy.

3. Conditions Precedent To Liability

The liability of the Company for any Benefit under this Policy is conditional upon:

- (i) the truth of the statements and information as provided to the Company by the Insured Persons; and
- (ii) the due observance and fulfillment of the terms and conditions of this Policy insofar as they relate to anything to be done or complied with by the Insured Persons.

4. Legal Action

No action shall be brought to recover on this Policy prior to the expiration of sixty (60) days after written proof of claim has been filed in accordance with the provisions of this Policy.

5. Misrepresentation

This Policy shall be voidable in the event of any misrepresentation, misdescription, non-disclosure or concealment of any circumstances by the Insured Persons which is material to this Policy.

6. Fraud

If any claim under this Policy shall be, in any respect, fraudulent or if any fraudulent means or devices shall be used by any person to obtain a Benefit under this Policy, the Company shall have no liability in respect of such claim and the Company shall be entitled to terminate this Policy with immediate effect.

7. Claims Procedure

Written notice must be given to the Company's Claims Department at www.amex.chubbclaims.com.sg

If the Insured Person, or the Insured Person's legal representative wants to make a claim, they must:

- (i) complete a claim form (claim forms are available from the Company);
- (ii) attach to the claim form:
 - (a) original receipts for any expenses incurred that are being claimed;
 - (b) any reports that have obtained from the police, a carrier or other authorities about the Accident, loss or damage; and
 - (c) any other documentary evidence required by the Company under the Insured Person's Policy.
- (iii) provide the Company with the completed claim form and accompanying documents within thirty (30) days of the incident taking place which gives rise to the claim; and
- (iv) give the Company at the Insured Person, or the Insured Person's legal representative's expense all medical and other certificates and evidence required by the Company that are reasonably required to assess the claim.

The Company may have the Insured Person medically examined at the Company expense when and as often as the Company may reasonably require after a claim has been made. The Company may also arrange an autopsy if the Company reasonably require one. In the event the Physician whom the Company appoint determines that the Confinement, or medical leave or period of medical leave, given by the Insured Person's Physician, was unreasonable or unnecessary, the Company will only pay to the Insured Person such benefit based on the Confinement, period of Confinement, or medical leave or period of medical leave determined to be reasonable by the Physician appointed by the Company.

8. Payment Of Claims

Any Benefits payable under this Policy shall be paid to the Insured Person or to the Insured Person's estate in the event of the Insured Person's death, except under Part 7, Section 11 - Chubb Assistance.

- (i) Emergency Medical Evacuation and Repatriation and Section 12; and

- (ii) Chubb Assistance - Repatriation of Mortal Remains. Any receipt by the Insured Person of any Benefit payable under this Policy shall in all cases be deemed final and complete discharge of all liability of the Company in respect of such Benefit.

9. Premium Payment

The premium as stated in the Certificate of Insurance will be charged to the Nominated Account when due.

10. Termination For Non-Payment Of Premium

This Policy shall deem to have been void from the intended Effective Date if the premium is not paid.

11. Right Of Recovery

In the event authorisation of payment and/or payment is made by the Company or Chubb Assistance or an authorised representative of Chubb Assistance for a medical claim whereby policy liability is not engaged, the Company or Chubb Assistance or an authorised representative of Chubb Assistance reserves the right to recover against the Insured Person the full sum which the Company or Chubb Assistance or an authorised representative of Chubb Assistance is liable to the Hospital into which the Insured Person was admitted.

12. No Multiple Policies

The Insured Person can only be covered under one (1) travel insurance policy underwritten by the Company for the same Journey. If the Insured Person is covered under more than one (1) such policy, the Company will consider the Insured Person to be covered under the policy with the highest benefits.

13. Compliance With Policy Provisions

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

14. Other Insurances

Except as otherwise provided in this Policy, if the Insured Person has or should have any other insurance providing cover for the same loss, damage or liability, the Company shall only be liable to pay the balance of any amount not covered by any other insurance.

15. Subrogation

In the event of any payment made by the Company under one (1) or more sections of this Policy, the Company will be subrogated to all the Insured Person's rights of recovery against any person or organisation. The Insured Person shall provide the Company with reasonable assistance including but not limited to, executing and delivering any instruments and/or documents. The Insured Person shall take no actions which may prejudice the Company's subrogation rights.

16. Notice Of Trust Or Assignment And Third Party Rights

The Company shall not be bound or be affected by any notice of any trust, charge, lien, assignment or other dealing with or in relation to this Policy.

A person who is not a party to this Policy contract shall have no right under the Contracts (Rights of Third Parties) Act 2001 to enforce any of its terms.

17. Dispute

Any disputes the Insured Person has with the Company arising out of or in connection with the coverage available under this Policy shall be referred to the Financial Industry Disputes Resolution Centre Ltd (FIDREC) for adjudication. Any determination by FIDREC in respect of any dispute shall be final and binding on the Insured Person and the Company. If any dispute or disagreement cannot be referred to or resolved by FIDREC, the dispute or disagreement must be referred to and finally resolved by arbitration under the Arbitration Act (Cap. 10) and any statutory modification or re-enactment thereof then in force, and administered by the Singapore International Arbitration Centre ("SIAC") in accordance with the Arbitration Rules of the SIAC for the time being in force, which rules are deemed to be incorporated by reference in this clause. The seat of the arbitration shall be Singapore, the Tribunal shall consist of one (1) arbitrator, and the language of the arbitration shall be English. In no case shall the Insured Person seek to recover on the Insured Person's Policy before the expiration of sixty (60) days after written proof of claim has been submitted to the Company in accordance with the provisions of the Insured Person's Policy.

18. Governing Law

This Policy shall be governed by and interpreted in accordance with Singapore law.

19. Interest

No amounts payable by the Company under this Policy shall carry interest.

20. Currency

Premiums and benefits payable under this Policy shall be in Singapore dollars.

21. Clerical Error

A clerical error by the Company will not make an invalidate insurance policy valid, nor a valid insurance policy invalid.

22. Awareness of Circumstances

At the time of effecting this Policy, the Insured Person must not be aware or ought to know of any circumstances, facts or risks related to Insured Person's Journey which may give rise to a claim under this Policy. In such case, no claim will be payable.

23. Gender

A masculine personal pronoun as used herein includes the feminine, wherever the context requires.

24. Coverage Validity

The Insured Person will not be covered under this Policy if the Insured Person lives outside of Singapore for more than one hundred and eighty-two (182) days in the twelve (12) month period following the Policy Commencement Date or the latest Renewal Date, whichever is later.

25. Policy Owners' Protection Scheme

This Policy is protected under the Policy Owners' Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for the Insured Person's Policy is automatic and no further action is required from the Insured Person. For more information on the types of benefits that are covered under the scheme as well as the limits of coverage, where applicable, please contact the Company or visit the GIA / LIA or SDIC websites (www.gia.org.sg or www.lia.org.sg or www.sdic.org.sg).

26. Personal Data Protection Consent

The Insured Person is deemed to give consent and authorisation to the Company to collect, use, disclose, and/or process his/her personal data or information supplied to the Company without further notification to the Insured Person confidentially with the Company's affiliated companies, third party service providers, business partners and/or other parties, which may be sited outside Singapore, for the purposes stated in the Company's Purpose Statement, including administering policies taken out with the Company, handling claims and customer services. Copies of the Company's Purpose Statement and Data Protection Policy can be found at www.chubb.com/sg-privacy and the Insured Person is deemed to have read the same.

If the Insured Person has consented for the Company to contact the him/her in order to perform marketing related activities, please be advised that the Insured Person can withdraw his/her consent by writing to the Company to notify the Company of the Insured Person's instruction. Upon the Insured Person's written request, the Company shall, without charge, cease to use the Insured Person's personal information for purposes other than those directly related to the Insured Person's Policy.

The Insured Person may write to the Company's Data Protection Officer at 138 Market Street, #11-01, CapitaGreen, Singapore 048946 for any request to withdraw his/her consent, access to and/or correction of any information supplied to the Company and the Company may reserve the right to charge a reasonable fee to offset the administrative costs in complying with access requests.

27. Modification

The Company reserves the right to modify the terms and conditions of this Policy within the Period of Insurance by giving the Insured prior notice of at least thirty (30) days, and such modification shall be applicable from the effective date as stated in the Company's written notice to the Insured Person's address on file.

No modification of this Policy shall be valid unless approved in writing by the authorised representative of the Company, and such approval shall be evidenced by way of an endorsement to this Policy issued by the Company. No broker or agent has the authority to modify or to waive any of the terms and conditions of this Policy.

Part 7 Benefits

The benefits payable under the respective Sections in this Part 7 as mentioned below are mutually exclusive:

- (i) Sections 1 and 2
- (ii) Sections 15, 18 and 23
- (iii) Sections 17 and 20
- (iv) Sections 19 and 21
- (v) Sections 25, 26, 36A and 37A

Section 1 – Accidental Death And Permanent Disablement

Plan	Sum Assured
Superior	S\$500,000 per Adult S\$250,000 per Adult (70 years old and above) S\$125,000 per Child
Standard	S\$250,000 per Adult S\$125,000 per Adult (70 years old and above) S\$62,500 per Child
Essential	S\$125,000 per Adult S\$62,500 per Adult (70 years old and above) S\$31,250 per Child

If, during the Period of Insurance, whilst the Insured Person is on a Journey, the Insured Person sustains Bodily Injury which results in death and/or Permanent Disablement within one hundred and eighty (180) days after the date of the Accident, the Company will pay up to the relevant Benefit amount specified in the Table of Benefits read with the Certificate of Insurance subject to the terms and conditions of this Policy.

Table Of Benefits

Loss Events	Compensation Payable % of Capital sum stated in the Certificate of Insurance
Accidental Death	100%
Permanent Total Disablement	100%
Total and Permanent Loss of Speech and Hearing	100%
Loss of Sight in both eyes	100%
Loss of two Limbs	100%
Loss of one Limb	50%
Loss of Sight in one eye	50%
Total and Permanent Loss of Speech	50%
Total and Permanent Loss of Hearing in	
i) both ears	50%
ii) one ear	15%

The occurrence of any specific loss for which indemnity is payable under this Section shall at once terminate all insurance under the Policy, but such termination shall be without prejudice to any other claim originating from the Accident causing such loss.

No indemnity will be paid under any circumstances for more than one (1) of the losses, the greatest for which provision is made in this Section.

No payment will be made for any loss caused by or resulting from Sickness.

Section 2 - Double Public Transport Cover

If, during the Period of Insurance, whilst the Insured Person is on a Journey, the Insured Person sustains Bodily Injury under Section 1 - Accidental Death and Permanent Disablement whilst riding as a fare paying passenger in a Public Conveyance, the Company will double the benefit amount payable under Section 1.

Section 3 - Overseas Medical And Accidental Dental Expenses

Plan	Sum Assured
Superior	S\$2,000,000 per Adult S\$500,000 per Adult (70 years old and above) S\$250,000 per Child
Standard	S\$1,000,000 per Adult S\$250,000 per Adult (70 years old and above) S\$125,000 per Child
Essential	S\$500,000 per Adult S\$125,000 per Adult (70 years old and above) S\$62,500 per Child

If, during the Period of Insurance, whilst the Insured Person is on a Journey, the Insured Person incurs Medical Expenses as a direct result of Bodily Injury or Sickness, or Dental Expenses as a direct result of Bodily Injury, the Company will indemnify the Insured Person in respect of such expenses up to the relevant Benefit amount specified in the Certificate of Insurance subject to the terms and conditions of this Policy.

ADDITIONAL CONDITIONS

- (i) Where an Insured Person has been treated by an Alternative Medical Physician, the liability of the Company in respect of Alternative Medical Expenses incurred shall not exceed Singapore Dollars three hundred (S\$300).
- (ii) For the avoidance of doubt, in the event the Insured Person becomes entitled to a refund of or reimbursement of all or part of such expenses from any other source, or if there is in place any other insurance against the events covered under this section, the Company will only be liable to pay the balance of any amount not covered by any other insurance.

ADDITIONAL EXCLUSIONS

In addition to the General Exclusions, this Policy does not cover, and the Company will not in any event be liable in respect of any claim under this Overseas Medical and Accidental Dental Expenses section which is directly or indirectly, caused by, a consequence of, arising from, in connection with or contributed by any of the following:

- (i) Any expenses relating to any treatment for Bodily Injury or Sickness where such treatment was first sought more than sixty (60) days from the time the Bodily Injury or Sickness was first sustained.
- (ii) Any expenses incurred for prostheses, contact lenses, spectacles, hearing aids, dentures or medical equipment unless prescribed by a Physician for the treatment of Bodily Injury or Sickness.
- (iii) Any expenses relating to any treatment not prescribed by a Physician.

Section 4 - Overseas Medical Expenses (Women's Benefit)

If, during the Period of Insurance, whilst the Insured Person is on a Return Journey, the Insured Person incurs Medical Expenses as a direct result of pregnancy-related Sickness, the Company will indemnify the Insured Person in respect of such expenses up to the relevant Benefit amount specified in the Certificate of Insurance subject to the terms and conditions of this Policy.

ADDITIONAL CONDITIONS

For the avoidance of doubt, in the event the Insured Person becomes entitled to a refund of or reimbursement of all or part of such expenses from any other source, or if there is in place any other insurance against the events covered under this section, the Company will only be liable to pay the balance of any amount not covered by any other insurance.

ADDITIONAL EXCLUSIONS

In addition to the General Exclusions, this Policy does not cover, and the Company will not in any event be liable in respect of any claim under this Overseas Medical Expenses (Women's Benefit) section which is directly or indirectly, caused by, a consequence of, arising from, in connection with or contributed by any of the following:

- (i) Any expenses relating to any treatment for pregnancy-related Sickness where such treatment was obtained in Singapore or the Insured Person's Home Country;
- (ii) Any expenses incurred due to events occurring during the first trimester of pregnancy (i.e. 0-12 weeks);
- (iii) ectopic pregnancy, childbirth, including premature childbirth or stillbirth;
- (iv) abortion or miscarriage, except if related to Bodily Injury and not attributed to any natural causes and/or sickness relating to pregnancy or childbirth;
- (v) tests or treatment relating to fertility, contraception, sterilisation, birth defects or congenital illnesses;
- (vi) any depressive, psychological or psychiatric illness, including post- natal depression; and
- (vii) Pre-existing Medical Conditions.

Section 5 - Overseas Hospital Confinement Benefit

If, during the Period of Insurance, whilst the Insured Person is on a Journey, the Insured Person is necessarily and reasonably Confined in a Hospital Overseas as a result of Bodily Injury or Sickness, the Company will pay the Insured Person the relevant Benefit amount as specified in the Certificate of Insurance subject to the terms and conditions of this Policy.

The daily benefit amount shall be paid for each complete day of Confinement from the first day of Confinement and up to a maximum of the relevant Benefit amount specified in the Certificate of Insurance, and for this purpose, every day of Confinement as a result of the same event (Bodily Injury or Sickness) shall be counted towards the total number of days of Confinement, notwithstanding that such days do not run consecutively.

Provided further that this Benefit shall be payable only if the following conditions are met:

- (i) Confinement must occur within thirty (30) days after sustaining Bodily Injury or Sickness.
- (ii) Confinement must be considered medically necessary by a Physician in his professional capacity.

ADDITIONAL EXCLUSIONS

In addition to the General Exclusions, this Policy does not cover, and the Company will not in any event be liable in respect of any claim under this Overseas Hospital Confinement Benefit section which is directly or indirectly, caused by, a consequence of, arising from, in connection with or contributed by any of the following:

- (i) Any expenses relating to any treatment or aid obtained in Singapore.
- (ii) Any expenses relating to Confinement for any surgery or medical treatment, which in the opinion of a Physician, could reasonably have been delayed until the return of the Insured Person to Singapore.

Section 6 - Compassionate Visit Overseas

If, during the Period of Insurance, whilst the Insured Person is on a Journey, the Insured Person is:

1. Confined in a Hospital Overseas for more than five (5) consecutive days and his/her medical condition forbids evacuation; or
2. Suffers from Bodily Injury or Sickness resulting in death, and no adult member of the Insured Person's family is with them, the Company will pay for hotel accommodation and travel (economy travel ticket) expenses necessarily incurred for one (1) Family Member, relative or friend, who on written advice of a Physician, is required to visit and stay with the Insured Person until the Insured Person is medically fit to be discharged in the event of hospital confinement or to assist in final arrangements in the event of death, up to the relevant Benefit amount specified in the Certificate of Insurance subject to the terms and conditions of this Policy.

Section 7 - Return Of Minors

If, during the Period of Insurance, whilst the Insured Person is on a Journey, the Insured Person is Confined in a Hospital Overseas and there is no other adult to accompany the Insured Child(ren) home, the Company will indemnify the Insured Person for hotel accommodation and travel (economy travel ticket) expenses necessarily incurred for one (1) Family Member, relative or friend to accompany the Insured Child(ren) back to Singapore, up to the relevant Benefit amount specified in the Certificate of Insurance subject to the terms and conditions of this Policy.

Section 8 - Emergency Telephone Charges

If, during the Period of Insurance, whilst the Insured Person is on a Journey, as a direct result of Bodily Injury or Sickness, the Insured Person incurred charges for personal mobile phone or standard land line used for the sole purpose of engaging the services of Chubb Assistance, or an authorised representative of Chubb Assistance, during a medical emergency, and for which a medical claim has been submitted under Section 3, the Company will indemnify the Insured Person in respect of Emergency Telephone Charges up to the Benefit amount as specified in the Certificate of Insurance.

ADDITIONAL CONDITIONS

Charges incurred from the standard land line must be supported by an itemised statement of charges.

ADDITIONAL EXCLUSIONS

In addition to the General Exclusions, this Policy does not cover, and the Company will not in any event be liable in respect of any claim under this Emergency Telephone Charges section which is directly or indirectly, caused by, a consequence of, arises in connection with or contributed to by public telephone using international calling card.

Section 9 - Post Journey Medical Expenses

If, during the Period of Insurance, whilst the Insured Person is on a Journey, the Insured Person sustains Bodily Injury or Sickness, and:

- (i) If the Insured Person was treated by a Physician Overseas or the Insured Person is immediately Confined in a Hospital upon returning to Singapore, the Insured Person may continue to seek medical treatment from a Physician in Singapore within thirty-one (31) consecutive days from the date of his/her return to Singapore, and We will reimburse him/her up in respect of such expenses up to a maximum of the relevant Benefit amount specified in the Certificate of Insurance subject to the terms and conditions of this Policy; or
- (ii) If the Insured Person is not been treated by a Physician Overseas, the Insured Person may seek medical treatment from a Physician in Singapore within seventy-two (72) consecutive hours from the time of he/she returns to Singapore, and We will reimburse him/her in respect of such expenses incurred within thirty-one (31) consecutive days from the date of his/her return to Singapore, up to the maximum of the relevant Benefit amount specified in the Certificate of Insurance subject to the terms and conditions of this Policy.

ADDITIONAL CONDITIONS

- (i) Where an Insured Person has been treated by an Alternative Medical Physician the liability of the Company in respect of Medical Expenses incurred shall not exceed Singapore Dollars seven hundred and fifty (S\$750).
- (ii) For the avoidance of doubt, in the event the Insured Person becomes entitled to a refund of or reimbursement of all or part of such expenses from any other source, or if there is in place any other insurance against the events covered under this section, the Company will only be liable to pay the balance of any amount not covered by any other insurance.

ADDITIONAL EXCLUSIONS

In addition to the General Exclusions, this Policy does not cover, and the Company will not in any event be liable in respect of any claim under this Post Journey Medical Expenses section which is directly or indirectly, caused by, a consequence of, arising from, in connection with or contributed by any of the following:

- (i) Any expenses relating to any treatment for Bodily Injury or Sickness where such treatment was first sought more than thirty-one (31) days from the date the Insured Person returned to Singapore.
- (ii) Any expenses incurred for prostheses, contact lenses, spectacles, hearing aids, dentures or medical equipment unless prescribed by a Physician for the treatment of Bodily Injury or Sickness.
- (iii) Any expenses relating to any treatment not prescribed by a Physician.

Section 10 – Post Journey Hospital Confinement Benefit

If, during the Period of Insurance, whilst the Insured Person is on a Journey, and as a result of Bodily Injury or Sickness, is immediately hospitalised upon return to Singapore, the Company will pay the Insured Person the relevant Benefit amount as specified in the Certificate of Insurance subject to the terms and conditions of this Policy.

The daily benefit amount shall be paid for each complete day of Confinement from the first day of Confinement and up to a maximum of the relevant Benefit amount specified in the Certificate of Insurance, and for this purpose, every day of Confinement as a result of the same event (Bodily Injury or Sickness) shall be counted towards the total number of days of Confinement, notwithstanding that such days do not run consecutively.

Provided further that this benefit shall be payable only if the following conditions are met:

- (i) Confinement must occur within thirty (30) days after sustaining Bodily Injury or Sickness.
- (ii) Confinement must be considered medically necessary by a Physician in his professional capacity.

Section 11 – Chubb Assistance – Emergency Medical Evacuation And Repatriation

If, during the Period of Insurance and while on a Journey, the Insured Person:

- (i) suffers a Bodily Injury or Sickness as diagnosed by a Physician designated by Chubb Assistance; and
- (ii) the necessary medical treatment is not available, either at the nearest Hospital where the Insured Person was transported to or in the immediate vicinity thereof, after suffering the Bodily Injury or Sickness, the Company may, based on the advice of a Physician that the Insured Person is medically fit to be evacuated, determine in its sole discretion, that the Insured Person, should be evacuated to another location for the necessary medical treatment.

Chubb Assistance or its authorised representative, shall arrange for the evacuation within a reasonable timeframe and utilise the best suited means based on the medical severity of the Insured Person's condition, including but not limited to, air ambulance, surface ambulance, regular air transportation, railroad or any other appropriate means. All decisions as to the means of transportation and the final destination will be made by Chubb Assistance, or its authorised representative, and will be based solely upon medical necessity.

The Insured Person may in appropriate circumstances be returned to Singapore.

The Company shall pay directly to Chubb Assistance the Covered Expenses, up to the relevant Benefit amount specified in the Certificate of Insurance, subject to the terms and conditions of this Policy.

If due to reasons beyond the control of the Insured Person, the Insured Person is unable to notify Chubb Assistance to make the necessary evacuation arrangements, the Company shall, if satisfied that the evacuation was due to the necessary medical treatment not being available, either at the nearest Hospital where the Insured Person was transported to or in the immediate vicinity thereof, reimburse the Insured Person for expenses incurred in relation to the evacuation, up to the amount which Chubb Assistance would have incurred for services provided under the same circumstances, subject to the terms and conditions of this Policy.

ADDITIONAL DEFINITIONS

Covered Expenses means expenses for services provided and/or arranged by Chubb Assistance for the transportation, medical services and medical supplies necessarily incurred as a result of the evacuation of an Insured Person.

ADDITIONAL EXCLUSIONS

In addition to the General Exclusions, this Policy does not cover, and the Company will not in any event be liable in respect of any claim under this Emergency Medical Evacuation and Repatriation section which is directly or indirectly, caused by, a consequence of, arises in connection with or contributed to by any of the following:

- (i) Any expenses incurred for services provided by another party for which the Insured Person is not liable to pay, or any expenses already included in the cost of a scheduled trip.
- (ii) Any expenses for a service not approved and arranged by Chubb Assistance or its authorised representative, except as mentioned in paragraph four (4) of this Section.
- (iii) Any treatment performed or ordered by a person who is not a Physician.
- (iv) Any expenses incurred in relation to treatment that can be reasonably delayed until the Insured Person returns to Singapore.

Section 12 – Chubb Assistance – Repatriation Of Mortal Remains

If, during the Period of Insurance, whilst the Insured Person is on a Journey, the Insured Person dies as a result of a Bodily Injury or Sickness, Chubb Assistance, or its authorised representative shall make the necessary arrangements for the return of the Insured Person's mortal remains to Singapore. The Company shall pay directly to Chubb Assistance the Covered Expenses for such repatriation up to the relevant Benefit amount specified in the Certificate of Insurance, subject to the terms and conditions of this Policy.

In addition to the transportation of the remains, the Company shall reimburse to the Insured Person's estate expenses actually incurred for services and supplies by a mortician or undertaker, including but not limited to the cost of a casket, and the embalming and cremation if so elected.

ADDITIONAL DEFINITION

Covered Expenses means expenses for services provided and/or arranged by Chubb Assistance for the transportation, medical services and medical supplies necessarily incurred as a result of the repatriation of the Insured Person's mortal remains.

ADDITIONAL EXCLUSIONS

In addition to the General Exclusions, this Policy does not cover, and the Company will not in any event be liable in respect of any claim under this Repatriation of Mortal Remains section which is directly or indirectly, caused by, a consequence of, arising from, in connection with or contributed by any of the following:

- (i) Any expenses incurred for services provided by another party for which the Insured Person is not liable to pay, or any expenses already included in the cost of the Journey.
- (ii) Any expenses incurred for the transportation of the Insured Person's remains not approved and arranged by Chubb Assistance or its authorised representative.

Section 13 – Personal Liability

If, during the Period of Insurance, whilst the Insured Person is on a Journey, the Insured Person incurs legal liability to a third party, the Company will indemnify the Insured Person in respect of each occurrence or a series of occurrences giving rise to such liability arising directly or indirectly from one (1) source or original cause, up to the Benefit amount as specified in the Certificate of Insurance subject to the terms and conditions of this Policy as a result of:

- (i) Death or injury to any person; and
- (ii) Accidental Property Damage to property of that person.

ADDITIONAL CONDITIONS

For the avoidance of doubt, in the event the Insured Person becomes entitled to a refund or reimbursement of all or part of such expenses from any other source, or if there is in place any other insurance against the events covered under this section, the Company will only be liable to pay the balance of any amount not covered by any other insurance.

ADDITIONAL DEFINITIONS

Property Damage means any physical damage to, destruction of, or loss of use of tangible property.

ADDITIONAL EXCLUSIONS

In addition to the General Exclusions, this Policy does not cover, and the Company will not in any event be liable in respect of any claim under this Personal Liability section which is directly or indirectly, caused by, a consequence of, arises in connection with or contributed to by any of the following:

- (i) Harm and Property Damages to the property of or to any person who is the Insured Person's relative or employee or deemed by law to be his employee.
- (ii) Property Damage to property which belongs to the Insured Person or is in his custody or control.
- (iii) Damages relating to any liability assumed under contract.
- (iv) Damages relating to the willful, malicious or unlawful act or omission on the part of the Insured Person.
- (v) The ownership, possession or use of vehicles, aircraft, firearms or animals, or arising from the negligent supervision and vicarious liability for the acts of the Insured Child(ren) in connection with the above.

- (vi) Past or present business, trade or professional activities, including the rendering of or failure to render business, trade or professional services.
- (vii) Any criminal proceedings taken against the Insured Person whether he is actually convicted or not.
- (viii) The transmission of Communicable Disease by an Insured Person.
- (ix) The possession or use of any controlled substance/drugs unless prescribed by a Physician.
- (x) Sexual molestation, corporal punishment, physical or mental abuse.
- (xi) Pollution which includes the alleged or potential introduction of substance which makes the environment impure or harmful.

Section 14 – Legal Expenses

If, during the Period of Insurance, whilst the Insured Person is on the Journey, the Insured Person incurs legal expenses as a result of false arrest or wrongful detention by any government or public authority, the Company will reimburse the Insured Person up to the maximum of the relevant Benefit amount specified in the Certificate of Insurance, subject to the terms and conditions of this Policy.

Section 15 – Travel Cancellation

If, during the Period of Insurance, an Insured Person is forced to cancel any part of a planned Journey prior to the commencement of that Journey as the direct and necessary result of a **Specified Cause** which manifests after the purchase of the Policy but before commencement of the Journey, the Company will indemnify the Insured Person in respect of **Cancellation Expenses** incurred up to the Benefit amount as specified in the Certificate of Insurance subject to the terms and conditions of this Policy.

ADDITIONAL DEFINITIONS

Specified Cause means

- (i) the Insured Person dying or becoming ill or sustaining Bodily Injury rendering the Insured Person unfit to travel in the opinion of a Physician;
- (ii) the death, of the Insured Person's Family Member or Travel Companion, or Bodily Injury or Sickness of such person necessitating him to be Confined to a Hospital;
- (iii) compulsory jury service, subpoena or hijack of the Insured Person, Family Member or Travel Companion;
- (iv) cancellation of scheduled Public Conveyance services consequent upon Strike, Riot or Civil Commotion;
- (v) the Insured Person's residence becoming uninhabitable due to natural disasters (including but not limited to fire, storm, or flood) occurring such that the Insured Person's presence is required on the premises on the Scheduled Departure Date;
- (vi) due to natural disasters (including but not limited to typhoon, earthquake, hurricane, cyclones, tornados, flood, fire, volcanic eruptions, landslide, tsunami or other convulsion of nature) which prevents the Insured Person from continuing with the scheduled trip.

Whereby, for paragraphs (i) to (v), the events mentioned occur within thirty (30) days before the Scheduled Departure Date, for paragraph (vi) the event occurs within thirty (30) days before the Scheduled Departure Date and must be accompanied with travel advice from relevant authority(s).

ADDITIONAL EXCLUSIONS

In addition to the General Exclusions, this Policy does not cover, and the Company will not in any event be liable in respect of any claim under this Travel Cancellation section which is directly or indirectly, caused by, a consequence of, arising from, in connection with or contributed by any of the following:

- (i) changes in plans by the Insured Person or a Family Member for any reason;
- (ii) financial circumstances of the Insured Person or a Family Member;
- (iii) any business or contractual obligations of the Insured Person or a Family Member;
- (iv) Financial Default by Travel Agent, agency or tour operator, airline or cruise operator from whom the Insured Person bought or with whom he made his travel arrangements;

- (v) any loss that is covered by any other existing insurance scheme, government programme or which will be paid or refunded by a hotel, carrier or travel agent or any other provider of travel and/or accommodation;
- (vi) any loss will be paid, credited by a voucher or credit or refunded by a hotel, carrier or travel agent or any other provider of travel and/or accommodation;
- (vii) any claim due to any regulations or orders given by the government or relevant authority of any country or group of countries on border closures of a country (whether land, sea, airspace or designated border control points).
- (viii) loss or expense incurred as the result of Bodily Injury or Sickness of an Insured Person or Family Member or Travel Companion for:
 - (a) medical care or treatment has been given; and/or
 - (b) symptoms existed which would cause a reasonably prudent person to seek diagnostic care or treatment;up to sixty (60) days prior to the commencement of a Journey.

Section 16 – Travel Curtailment

If, during the Period of Insurance, an Insured Person is forced to curtail or alter the itinerary of any part of a planned Journey during the course of that Journey, as the direct and necessary result of any Specified Cause (as defined in Section 15) which manifest during the Journey, the Company will indemnify the Insured Person in respect of **Curtailment Expenses** incurred up to the relevant Benefit amount specified in the Certificate of Insurance subject to the terms and conditions of this Policy.

ADDITIONAL EXCLUSIONS

In addition to the General Exclusions, this Policy does not cover, and the Company will not in any event be liable in respect of any claim under this Travel Curtailment section which is directly or indirectly, caused by, a consequence of, a consequence of, arising from, in connection with or contributed by any of the following:

- (i) changes in plans by the Insured Person or a Family Member for any reason;
- (ii) financial circumstances of the Insured Person or a Family Member;
- (iii) any business or contractual obligations of the Insured Person or a Family Member;
- (iv) Financial Default by the Travel Agent, agency or tour operator, airline or cruise operator from whom the Insured Person bought;
- (v) or with whom he made his travel arrangements;
- (vi) any loss that is covered by any other existing insurance scheme, government programme or which will be paid or refunded by a hotel, carrier or travel agent or any other provider of travel and/or accommodation;
- (vii) loss of or expense incurred as the result of Bodily Injury or Sickness of an Insured Person or Family Member or Travel Companion for which:
 - (a) medical care or treatment has been given; and/or
 - (b) symptoms existed which would cause a reasonably prudent person to seek diagnostic care or treatment;up to sixty (60) days prior to the commencement of a Journey.

Section 17 – Travel Delay

If, during the Period of Insurance, whilst the Insured Person is on a Journey, the departure of the Public Conveyance in which the Insured Person had arranged to travel is delayed for at least six (6) consecutive hours at any single location Overseas and in Singapore from the time specified in the itinerary supplied to the Insured Person due to strike or industrial action, adverse weather conditions or mechanical breakdown/derangement of the Public Conveyance or due to grounding of the Public Conveyance as a result of mechanical or structural defect, the Company will pay the Insured Person the relevant Benefit amount specified in the Certificate of Insurance for every full six (6) consecutive hours of delay (the delay being calculated from the departure time of the Public Conveyance specified in the itinerary), up to the maximum Benefit amount specified in the Certificate of Insurance.

The delay must be verified in writing by the operator(s) of the Public Conveyance or their handling agent(s) as well as the number of hours delayed and the reason for the delay.

ADDITIONAL EXCLUSIONS

In addition to the General Exclusions, this Policy does not cover, and the Company will not in any event be liable in respect of any claim under this Travel Delay section which is directly or indirectly, caused by, a consequence of, arises in connection with or contributed to by any of the following:

- (i) failure of the Insured Person to check in according to the itinerary supplied to him;
- (ii) strike or industrial action existing on the date the Insured Person applied for cover under this Policy;
- (iii) late arrival of the Insured Person at the airport or port after check-in or boarding time (except if the late arrival is due to strike or industrial action).

Section 18 – Travel Postponement

If, during the Period of Insurance, the Insured Person is forced to postpone the Journey prior to the commencement of that Journey as the direct and necessary result of any Specified Cause (as defined in Section 15) which manifests after the purchase of the Policy but before commencement of the Journey, the Company will indemnify the Insured Person in respect of **Postponement Expenses** occurring up to thirty (30) days prior to Scheduled Departure Date, up to the Benefit amount as specified in the Certificate of Insurance subject to the terms and conditions of this Policy.

ADDITIONAL DEFINITION

Postponement Expenses means the resulting administrative charges incurred to postpone the Journey:

- (i) which full payment was made by the Insured Person;
- (ii) for which the Insured Person is legally liable; and
- (iii) which are not recoverable from any other source.

ADDITIONAL EXCLUSIONS

In addition to the General Exclusions, this Policy does not cover, and the Company will not in any event be liable in respect of any claim under this Travel Postponement section which is directly or indirectly, caused by, a consequence of, arises in connection with or contributed to by any of the following:

- (i) changes in plans by the Insured Person or a Family Member for any reason;
- (ii) financial circumstances of the Insured Person or a Family Member;
- (iii) any business or contractual obligations of the Insured Person or a Family Member;
- (iv) financial default (whether full or partial suspension of operations due to financial circumstances following a filing of bankruptcy) or failure to provide promised services by a person, agency, tour operator or organisation with whom the Insured Person has made his/her travel arrangements;
- (v) any loss that is covered by any other existing insurance scheme, government programme or which will be paid or refunded by a hotel, carrier or travel agent or any other provider of travel and/or accommodation;
- (vi) loss or expense incurred as the result of Bodily Injury or Sickness of an Insured Person or Family Member or Travel Companion for which:
 - (a) medical care or treatment has been given; and/or
 - (b) symptoms existed which would cause a reasonably prudent person to seek diagnostic care or treatment;
 up to sixty (60) days prior to the commencement of a Journey.

Section 19 – Travel Misconnection

If, during the Period of Insurance, whilst the Insured Person is on a Journey, the Insured Person's confirmed onward travel connection Overseas is missed at the transfer point due to the late arrival of the Insured Person's incoming confirmed connecting scheduled Public Conveyance and no onward transportation is available to the Insured Person within six (6) consecutive hours on his actual arrival time, the Company will pay to the Insured Person the relevant Benefit amount specified in the Certificate of Insurance for every full six (6) consecutive hours of misconnection (the misconnection being calculated from the actual arrival to the actual departure of the Insured Person), up to the maximum Benefit amount specified in the Certificate of Insurance.

The travel misconnection details must be verified in writing by the operator(s) of the Public Conveyance or their handling agent(s) as well as the reason for the travel misconnection, the scheduled and actual time of arrival and the scheduled and actual departure time of the next available Public Conveyance.

Section 20 - Flight Diversion

If, during the Period of Insurance, whilst the Insured Person is on a Journey, the aircraft in which the Insured Person had arranged to travel is diverted for at least six (6) consecutive hours at any single location from the time specified in the itinerary supplied to the Insured Person due to adverse weather conditions, the Company will pay the Insured Person the relevant Benefit amount specified in the Certificate of Insurance for every full six (6) consecutive hours of diversion resulting in delay in arriving at the planned destination up to the maximum Benefit amount specified in the Certificate of Insurance.

The delay must be verified in writing by the operator(s) of the aircraft or their handling agent(s) as well as the number of hours delayed and the reason for the delay.

Section 21 - Flight Overbooked

If, during the Period of Insurance, whilst the Insured Person is on a Journey, the Insured Person is denied boarding of an aircraft on a commercial scheduled flight due to over-booking, and no alternative transportation is made available to the Insured Person for at least six (6) hours calculated from the original scheduled departure time of such flight, the Company will pay to the Insured Person the relevant Benefit amount specified in the Certificate of Insurance.

The overbooked flight details must be verified in writing by the operator(s) of the airline or the handling agent(s).

Section 22 - Loss Of Deposit Due To Insolvency Of Travel Agent

If, during the Period of Insurance, the Insured Person is forced to cancel the Journey prior to the commencement of that Journey as the direct and necessary result of Financial Default by the Travel Agent in Singapore, the Company will indemnify the Insured Person in respect of Cancellation Expenses (as defined in Section 15) due to Insolvency of **Travel Agent** for the loss of travel deposits, up to the Benefit amount as specified in the Certificate of Insurance subject to the terms and conditions of this Policy, provided always that this coverage is effective only if this Policy is purchased before the Insured Person becomes aware of any circumstances which could lead to the disruption of his Journey.

ADDITIONAL DEFINITION

Travel Agent means a legally licensed travel agent duly registered in Singapore and carrying out his activities within the scope of his licence pursuant to the laws of Singapore. Travel agent shall not include airline or cruise operator.

Section 23 - Loss Of Frequent Flyer Points

If, during the Period of Insurance, the Insured Person purchase an airline ticket (or other travel and/or accommodation expense) using frequent flyer points or similar reward points and the airline ticket (or other travel and/or accommodation expense) is subsequently cancelled as a result of any Specified Cause (as defined in Section 15) and the loss of such points cannot be recovered from any other source, the Company will indemnify the Insured Person the retail price for that ticket (or other travel and/ or accommodation expense) at the time it was issued up to the Benefit amount specified in the Certificate of Insurance subject to the terms and conditions of this Policy, provided always that this coverage is effective only if this Policy is purchased before the Insured Person becomes aware of any circumstances which could lead to the disruption of his Journey.

Section 24 - Personal Property And Baggage

If, during the Period of Insurance, whilst the Insured Person is on a Journey, the Insured Person sustains loss of or damage to his **Personal Property and Baggage**, the Company will indemnify the Insured Person in respect of such loss up to the relevant Benefit amount stated in the Certificate of Insurance subject to the terms and conditions of this Policy and the following additional conditions.

ADDITIONAL CONDITIONS

- (i) The Company will not pay more than Singapore Dollars five hundred (S\$500) for any one (1) article or a pair or a set of articles; or more than Singapore Dollars one thousand (S\$1,000) for **Portable Computers**.
- (ii) The loss or damage of each article must be accompanied by proof of purchase such as but not limited to receipts, bank statements or credit card statements. If no proof of purchase is provided, the Company may decline the claim or accept it at a reduced value. The Company may make payment subject to due allowance of wear and tear and depreciation or at the Company's option replace or repair such articles.

- (iii) The loss or damage must be reported to the police or relevant authority within the jurisdiction where the loss or damage occurred and within twenty-four (24) hours of such loss or damage. Any claims for indemnity under this section must be accompanied by a copy of a police report or a report issued by the relevant authority as evidence of such loss.
- (iv) The submission of a claim under this Section 24 shall preclude the Insured person from making a claim under Section 25 arising out of the same event.
- (v) For the avoidance of doubt, in the event the Insured Person becomes entitled to a refund or reimbursement of all or part of such expenses from any other source, or if there is in place any other insurance against the events covered under this section, the Company will only be liable to pay the balance of any amount not covered by any other insurance.

ADDITIONAL DEFINITIONS

Personal Property and Baggage means personal goods belonging to the Insured Person, which are taken by him on the Journey or acquired by him and carried on his person or hand-carried or check-in as accompanied baggage with the carrier during the Journey.

Portable Computers means laptop and hand-held computers.

ADDITIONAL EXCLUSIONS

In addition to the General Exclusions, this Policy does not cover, and the Company will not in any event be liable in respect of any claim under this Personal Property and Baggage section which is directly or indirectly, caused by, a consequence of, arising from, in connection with or contributed by any of the following:

- (i) loss of or damage of property caused by wear and tear, gradual deterioration, destruction by moths, vermin, inherent vice or damage sustained due to any process or while actually being worked upon or resulting therefrom;
- (ii) loss of or damage of property caused by mechanical or electrical breakdown or derangement or damage sustained due to any process initiated by an Insured Person to repair, clean or alter any property;
- (iii) loss of or damage of property resulting directly or indirectly from insurrection, rebellion, revolution, civil war, usurped power, or action taken by governmental authorities in hindering, combating or defending against such an occurrence, seizure or destruction under quarantine or customs regulations, confiscation by order of any government or public authority or risk of contraband or illegal transportation or trade;
- (iv) loss of or damage arising from confiscation or retention by customs or other officials;
- (v) loss of or damage of property as a result of the Insured Person's failure to take due and reasonable care and precautions to safe-guard and secure such property;
- (vi) loss of or damage of jewellery and watches not carried as hand-carried baggage or kept under the Insured Person's supervision;
- (vii) loss of data recorded on tapes, cards, discs or otherwise, including the cost of reproducing the data;
- (viii) loss of or damage not reported to either the police or relevant authority within the jurisdiction where the loss or damage occurred within twenty-four (24) hours of the discovery of such loss of or damage;
- (ix) loss of or damage of property whilst in the custody of an airline or other carrier, unless reported immediately on discovery and, in the case of an airline, a Property Irregularity Report is obtained; and
- (x) loss of or damage to property insured under any other insurance policy, or otherwise reimbursed by a common carrier or a hotel.

PROPERTY NOT COVERED

The Company will not pay for damage to or loss of:

- (i) animals;
- (ii) motor vehicles, aircraft, and other conveyances or equipment or parts pertaining to such conveyances;
- (iii) artificial limbs, false teeth, contact lenses or corneal lenses;
- (iv) tickets, except for administrative fees required to reissue tickets;
- (v) coupons, negotiable instruments, title deeds, manuscripts, money, stamps, stocks and bonds, postal or money orders, securities of any kind;

- (vi) property shipped as freight, or shipped prior to the Scheduled Departure Date;
- (vii) cards, including but not limited to credit cards;
- (viii) contraband;
- (ix) business goods or samples/ prototypes or equipment of any kind or any products/components meant for trade;
- (x) hired or leased equipment;
- (xi) foodstuff;
- (xii) computers (including software and accessories) other than Portable Computers;
- (xiii) Ski Equipment (as defined in Section 36A); and
- (xiv) Golf Equipment (as defined in Section 37A).

Section 25 - Baggage Delay

If, during the Period of Insurance, whilst the Insured Person is on a Journey, the Insured Person's baggage that is accompanied and checked in with the Public Conveyance is not delivered to him within six (6) hours of the Insured Person's arrival at the scheduled destination, the Company will pay to the Insured Person the relevant Benefit amount specified in the Certificate of Insurance for every full six (6) consecutive hours of delay, up to the maximum Benefit amount specified in the Certificate of Insurance, subject to the terms and conditions of this Policy.

Section 26 - Personal Money And Travel Documents

If, during the Period of Insurance, whilst the Insured Person is on a Journey, the Insured Person sustains loss of **Money** and **Travel Documents** due to theft or by force, violence, or threat of violence, or due to natural disasters, the Company will indemnify the Insured Person in respect of such loss up to the relevant Benefit amount as specified in the Certificate of Insurance subject to the terms and conditions of this Policy and the following additional conditions.

ADDITIONAL CONDITIONS

- (i) The Company will not indemnify an amount in excess of Singapore Dollars three hundred (S\$300) for loss of Money.
- (ii) The loss or damage must be reported to the police or relevant authority within the jurisdiction where the loss or damage occurred and within twenty-four (24) hours of such loss or damage. Any claims for indemnity under this section must be accompanied by a copy of a police report or a report issued by the relevant authority as evidence of such loss.
- (iii) For the avoidance of doubt, in the event the Insured Person becomes entitled to a refund or reimbursement of all or part of such expenses from any other source, or if there is in place any other insurance against the events covered under this section, the Company will only be liable to pay the balance of any amount not covered by any other insurance.
- (iv) The Insured Person must take every possible safeguard to ensure the security of his Money and Travel Documents.

ADDITIONAL DEFINITIONS

Money means coins, bank notes, postal money orders or travellers' cheques.

Travel Documents means passport, visas, travel tickets or driving license.

ADDITIONAL EXCLUSIONS

In addition to the General Exclusions, this Policy does not cover, and the Company will not in any event be liable in respect of any claim under this Personal Money and Travel Documents section which is directly or indirectly, caused by, a consequence of, arising from, in connection with or contributed by any of the following:

- (i) devaluation of currency or shortage due to errors or omissions during any transactions involving money;
- (ii) loss due to confiscation or detention by customs or any other authority;
- (iii) loss not reported to either the police or relevant authority within the jurisdiction where the loss occurred within twenty-four (24) hours of the discovery of such loss; and
- (iv) loss of postal money orders or travellers' cheques not immediately reported to the local branch or agent of the issuing authority.

Section 27 – Fraudulent Credit Card Usage

If, during the Period of Insurance, whilst the Insured Person is on a Journey, the Insured Person sustains financial loss as a direct result of a credit, charge or bankers card being lost or stolen and being subsequently used fraudulently by any person other than the Insured Person, the Company will indemnify the Insured Person for such loss up to the maximum Benefit amount specified in the Certificate of Insurance subject to the terms and conditions of this Policy and the following additional conditions.

ADDITIONAL CONDITIONS

- (i) The loss must be reported to the card company(s) within six (6) hours after discovery of the incident. Any claim must be accompanied by a copy of the report issued by the card company(s) evidencing such loss.
- (ii) For the avoidance of doubt, in the event the Insured Person becomes entitled to a refund or reimbursement of all or part of such expenses from any other source, or if there is in place any other insurance against the events covered under this section, the Company will only be liable to pay the balance of any amount not covered by any other insurance.
- (iii) The Insured Person must take every possible safeguard to ensure the security of his credit, charge or bankers card(s).
- (iv) Loss must be reported to either the police or relevant authority within the jurisdiction where the loss occurred within twenty-four (24) hours of the discovery of such loss.

Section 28 – Credit Card Outstanding Balance

If, during the Period of Insurance, whilst the Insured Person is on a Journey, the Insured Person sustains Bodily Injury which results in death payable under Section 1 - Accidental Death and Disablement, or Section 2 - Double Public Transport Cover, the Company will indemnify the Insured Person for his **Outstanding Balance** made on his **Credit Card** or **Charge Card** as evidenced by the latest statement of his Credit Card or Charge Card, up to the maximum Benefit amount specified in the Certificate of Insurance subject to the terms and conditions of this Policy and the following additional conditions.

ADDITIONAL CONDITION

For the avoidance of doubt, in the event the Insured Person becomes entitled to a refund or reimbursement of all or part of such expenses from any other source, or if there is in place any other insurance against the events covered under this section, the Company will only be liable to pay the balance of any amount not covered by any other insurance.

ADDITIONAL DEFINITIONS

Outstanding Balance means the Insured Person's outstanding amount owed to the relevant Credit Card or Charge Card issuer for the purchase transactions made while on a Journey prior to the accident resulting in his death.

Credit Card means the Insured Person's Credit Card issued to his name.

Charge Card means the Insured Person Charge Card issued to his name.

Section 29 – Kidnap/Hostage

If, during the Period of Insurance, whilst the Insured Person is on a Journey, the Insured Person is kidnapped or wrongly confined, abducted or restrained by criminal force, the Company will pay the Insured Person the relevant Benefit amount specified in the Certificate of Insurance for every six (6) consecutive hours period that the kidnap continues, up to the maximum Benefit amount specified in the Certificate of Insurance subject to the terms and conditions of this Policy and the following additional condition.

ADDITIONAL CONDITION

The kidnap must be reported to the police having jurisdiction at the place of loss no more than twenty-four (24) hours after the incident. Any claims under this kidnap section must be accompanied by a police report and the Company must be satisfied with the contents thereof before being liable to pay the benefit under this Section.

ADDITIONAL EXCLUSION

In addition to the General Exclusions, this policy does not cover kidnap by anyone of the Insured Person(s) or a Family Member whether acting alone or in collusion with others.

Section 30 - Hijack Of Public Conveyance

If, during the Period of Insurance, whilst the Insured Person is on a Journey, the Insured Person is a victim of a **Hijack** of a Public Conveyance or motor vehicle on which the Insured Person is travelling, the Company will pay the Insured Person the relevant Benefit amount specified in the Certificate of Insurance for every six (6) consecutive hours period that the Hijack continues, up to the maximum Benefit amount specified in the Certificate of Insurance subject to the terms and conditions of this Policy and the following additional condition.

ADDITIONAL CONDITION

Any claims under this Hijacking Section must be accompanied by a police report or a report issued by the carrier confirming that the Insured Person was a victim of Hijack and the duration of such Hijack.

ADDITIONAL DEFINITION

Hijack means any seizure or exercise of control by force or violence or threat of force or violence and with wrongful intent of a Public Conveyance or motor vehicle.

Section 31A - Overseas Death due to COVID-19

If, during the Period of Insurance, while the Insured Person is on a Journey, the Insured Person dies as a direct result of COVID-19, the Company will pay up to the relevant Benefit amount specified in the Certificate of Insurance subject to the terms and conditions of this Policy.

Section 31B - Overseas Medical Expenses due to COVID-19

If, during the Period of Insurance, whilst the Insured Person is on a Journey, the Insured Person is necessarily and reasonably Confined in a Hospital or other Temporary Medical & Quarantine Facility as a direct result of COVID-19 as diagnosed by a Physician who is directly treating, testing or, attending to the Insured Person's medical circumstances, the Company will cover the Insured Person in respect of such Medical Expenses upon notification to Chubb Assistance for hospitalisation and medical arrangement up to the maximum Benefit specified in the Certificate of Insurance, subject to the terms and conditions of this Policy.

ADDITIONAL CONDITIONS

If due to reasons beyond the Insured Person's control, the Insured Person is unable to notify Chubb Assistance to make the necessary arrangements, the Company shall reimburse the Insured Person up to the amount which Chubb Assistance would have incurred for the services provided under the same circumstances, subject to the terms and conditions of this Policy.

ADDITIONAL EXCLUSION

In addition to Part 4 - General Exclusions, We will not pay under Section 31B - Overseas Medical Expenses due to COVID-19 for any of the following:

- (a) any further expenses incurred by the Insured Person if the Company wish to return the Insured Person back to Singapore, but the Insured Person refuses (where in the opinion of the treating Physician and Chubb Assistance, the Insured Person is fit to travel);
- (b) any expenses incurred in relation to treatment by an Alternative Medical Physician;
- (c) any expenses relating to specialist treatment not prescribed or referred by a Physician in general practice; or
- (d) expenses incurred for mandatory diagnostic tests that the Insured Person is required to take for the trip, such as pre-departure tests and post-arrival tests.

Section 31C - Emergency Medical Evacuation & Repatriation due to COVID-19

If, during the Period of Insurance, whilst on a Journey, the Insured Person:

- (a) is diagnosed with COVID-19 by a Physician who is directly treating, testing or, attending to the Insured Person's medical circumstances, and this is further validated by the designated Physician appointed by Chubb Assistance; and
- (b) the necessary medical treatment is not available, either at the nearest Hospital where the Insured Person was transported to or in the immediate vicinity thereof, after being diagnosed with COVID-19;

The Company may, based on the advice of the designated Physician appointed by Chubb Assistance that the Insured Person is medically fit to be evacuated, determine in our sole discretion, that the Insured Person, should be evacuated to another location for the necessary medical treatment.

Chubb Assistance or its authorised representative, shall arrange for the evacuation within a reasonable timeframe and utilise the best suited means based on the medical severity of Your condition, including but not limited to, air ambulance, surface ambulance, regular air transportation, railroad or any other appropriate means.

All decisions as to the means of transportation and the final destination will be made by Chubb Assistance, or its authorised representative, and will be based solely upon medical necessity. The Insured Person may in appropriate circumstances be returned to Singapore.

The Company shall pay directly to Chubb Assistance the Covered Expenses, up to the maximum Benefit specified in the Certificate of Insurance, subject to the terms and conditions of this Policy.

If due to reasons beyond the Insured Person's control, the Insured Person is unable to notify Chubb Assistance to make the necessary evacuation arrangements, The Company shall, if satisfied that the evacuation was due to the necessary medical treatment not being available, either at the nearest Hospital where the Insured Person was transported to or in the immediate vicinity thereof, reimburse the Insured Person for expenses incurred in relation to the evacuation, up to the amount which Chubb Assistance would have incurred for services provided under the same circumstances, subject to the terms and conditions of this Policy.

Section 31D - Repatriation of Mortal Remains due to COVID-19

If, during the Period of Insurance, while the Insured Person is on a Journey, the Insured Person suffers death as a direct result of COVID-19, Chubb Assistance or its authorised representative shall make the necessary arrangements for the return of the Insured Person's mortal remains to Singapore or his/her Home Country. We shall pay directly to Chubb Assistance the Covered Expenses for such repatriation and the Company shall reimburse to the Insured Person's estate the actual expenses incurred Overseas for services and supplies by a mortician or undertaker, including the cost of embalming and cremation if so elected, subject to the terms and conditions of this Policy. All payments made by the Company shall not exceed the maximum Benefit specified in the Certificate of Insurance.

Additional Definition

Covered Expenses means expenses for services provided and/or arranged by Chubb Assistance for the transportation, medical services and medical supplies necessarily incurred as a result of the Insured Person's evacuation.

Additional Exclusions applicable for Section 31C- Emergency Medical Evacuation & Repatriation due to COVID-19 and Section 31D - Repatriation of Mortal Remains due to COVID-19

In addition to Part 4 - General Exclusions, We will not pay under Section 31C- Emergency Medical Evacuation & Repatriation due to COVID-19 and Section 31D - Repatriation of Mortal Remains due to COVID-19 for any of the following:

- (a) any expenses incurred for services provided by another party for which the Insured Person is not liable to pay, or any expenses already included in the cost of a scheduled trip;
- (b) any expenses for a service not approved and arranged by Chubb Assistance or its authorised representative, except as otherwise mentioned in this Section;
- (c) any treatment performed or ordered by a person who is not a Physician; and
- (d) any expenses incurred in relation to treatment that can be reasonably delayed until the Insured Person return to Singapore.

Section 31E - Overseas Hospital Confinement Benefit due to COVID-19

If, during the Period of Insurance, the Insured Person is necessarily and reasonably Confined in a Hospital or other Temporary Medical & Quarantine Facility Overseas as a result of COVID-19, and as diagnosed by a Physician who is directly treating, testing or, attending to the Insured Person's medical circumstances, the Company will pay the Insured Person the relevant daily Benefit up to the maximum Benefit amount specified in the Certificate of Insurance, subject to the terms and conditions of this Policy.

The daily Benefit amount shall be paid for each complete day twenty-four (24) hours of Confinement from the third (3rd) day of Confinement and up to the maximum Benefit specified in the Certificate of Insurance.

For this purpose, each day of Confinement shall be counted towards the total number of days of Confinement, notwithstanding that such days do not run consecutively.

Additional Conditions

Overseas Hospital Confinement Benefit due to COVID-19 shall be payable only if the following conditions are met:

- (a) after a minimum Confinement period of forty-eight (48) hours; and
- (b) Confinement must be considered medically necessary by a Doctor in his professional capacity.

Additional Exclusions:

The Company will not pay under Overseas Hospital Confinement Benefit due to COVID-19 for any of the following:

- (a) any Confinement in Singapore;
- (b) first forty-eight (48) hours of the Confinement.

Section 31F – Overseas Quarantine Benefit due to COVID-19

If, during the Period of insurance, the Insured Person is necessarily placed under Compulsory Quarantine at Temporary Medical & Quarantine Facility or in facility approved by the government authorities as a direct result of being diagnosed with COVID-19 and confirmed by a Physician, the Company will pay the Insured Person the relevant daily Benefit up to the maximum Benefit amount specified in the Certificate of Insurance, subject to the terms and conditions of this Policy.

The Overseas Quarantine Benefit due to COVID-19 will only be paid for each twenty-four (24) consecutive hour period of Compulsory Quarantine and up to the maximum sum insured specified in the Benefit Schedule. For this purpose, each day of Quarantine shall be counted towards the total number of days of Quarantine, notwithstanding that such days do not run consecutively.

Section 31G – Travel Cancellation due to COVID-19

If, the Insured Person is forced to cancel any part of his Journey as the direct and necessary direct result of any COVID-19 Specified Cause occurring within fifteen (15) days prior to the Scheduled Departure Date, the Company will reimburse the Insured Person in respect of Cancellation Expenses up to the maximum Benefit specified in the Certificate of Insurance, subject to the terms and conditions of this Policy. This coverage is effective only if this Policy is purchased before the Insured Person becomes aware of any circumstances which could lead to the disruption of a planned Journey.

Additional Definition

COVID-19 Specified Cause means

- (a) the Insured Person or his/her Travel Companion is diagnosed COVID-19 and confirmed by a Physician within fifteen (15) days prior to the Scheduled Departure Date;
- (b) the death of the Insured's Family Member or Travel Companion due to COVID-19 which resulted in the Insured Person cancelling the Journey; or
- (c) the Insured Person or his/her Travel Companion serving a Compulsory Quarantine or stay home notice order or Health Risk Warning from the government due to close contact with a positive COVID-19 carrier, and as a result missed the Scheduled Departure Date.

Section 31H – Travel Curtailment due to COVID-19

If, during the Period of Insurance, while the Insured Person is on a Journey, the Insured Person is forced to curtail or alter the itinerary of any part of a planned Journey during the course of that Journey, as the direct and necessary result of any of the COVID-19 Specified Cause (as defined in Section 31G), the Company will pay the Insured Person in respect of Curtailment Expenses incurred up to the maximum Benefit specified in the Certificate of Insurance, subject to the terms and conditions of this Policy. This coverage is effective only if this Policy is purchased before the Insured Person became aware of any circumstances which could lead to the disruption of a planned Journey.

Additional Exclusions Applicable for Section 31G - Travel Cancellation due to COVID-19 and Section 31H - Travel Curtailment due to COVID-19

In addition to Part 4 - General Exclusions, We will not pay under Section 31G - Travel Cancellation due to COVID-19 and Section 31H - Travel Curtailment due to COVID-19 for any of the following:

- (a) any change of plans on the Insured Person's part or that of any other person to travel (except as a result of the COVID-19 Specified Cause);
- (b) financial circumstances of the Insured Person or a Family Member;
- (c) any business or contractual obligations of the Insured Person or a Family Member;
- (d) financial default (whether full or partial suspension of operations due to financial circumstances following a filing of bankruptcy) or failure to provide promised services by a person, agency, tour operator or organisation with whom the Insured Person has made his/her travel arrangements;
- (e) any loss that is covered by any other existing insurance scheme, government programme or which will be paid or refunded by a hotel, carrier or travel agent or any other provider of travel and/or accommodation;
- (f) any loss that will be paid, credited by a voucher or credit or refunded by a hotel, carrier or travel agent or any other provider of travel and/or accommodation;
- (g) any claim due to any regulations or orders given by the government or relevant authority of any country or group of countries on border closures of a country (whether land, sea, airspace or designated border control points); or
- (h) compensation for any air miles or holiday points You have used to pay for the Overseas Journey in part or in full.

Section 32 - Home Guard

If, during the Period of Insurance, whilst the Insured Person is on a Journey, the Company will indemnify the Insured Person for loss of or damage to **Home Contents** kept in the Insured Person's place of residence, arising out of any one of the following perils, up to the relevant Benefit amount as specified in the Certificate of Insurance subject to the terms and conditions of this Policy and the following additional conditions:

- (i) Fire, lightning, thunderbolt, subterranean fire.
- (ii) Explosions.
- (iii) Aircraft and other aerial devices or articles dropped therefrom.
- (iv) Impact by:
 - (a) Any vehicle, plant, machinery and equipment;
 - (b) Falling trees or branches but not loss or damage caused by falling or lopping of trees by or on the Policyholder's behalf;
 - (c) Breakage or collapse of television and radio aerials, aerial fittings and masts.
- (v) Bursting or overflowing of domestic water tanks, apparatus or pipes (forming part of the domestic fixed water system), washing machine or water mains.
- (vi) Theft, but only if accompanied by forcible and violent breaking into or out of the place of residence, or any attempt thereat.
- (vii) Riot, civil commotion or acts of strikers or locked out workers or persons taking part in labour disturbances.
- (viii) Malicious act of person(s) other than by a member of the Insured Person's family or by any person lawfully in the residence.

ADDITIONAL CONDITIONS

- (i) In settling claims for theft or total destruction, the basis of settlement will be replacement in the same form without deduction for wear and tear or depreciation except in respect of wearing apparel and household items.
- (ii) In the event of loss or damage to any Home Contents forming part of a pair or set, the liability of the Company shall not exceed a proportionate part of the value to the pair or set.
- (iii) For the avoidance of doubt, in the event the Insured Person becomes entitled to a refund or reimbursement of all or part of such expenses from any other source, or if there is in place any other insurance against the events covered under this section, the Company will only be liable to pay the balance of any amount not covered by any other insurance.

ADDITIONAL DEFINITION

Home Contents means all description of household goods, personal effects and possessions of the Insured Person and Insured Family Members.

ADDITIONAL EXCLUSIONS

In addition to the General Exclusions set out in the Policy, this Policy does not cover, and the Company will not in any event be liable to indemnify the Policyholder in respect of, any claim under this Home Guard section which is, directly or indirectly, caused by, a consequence of, arising from, in connection with or contributed by any of the following:

- (i) In respect of shortage due to error, omission, exchange or depreciation in value.
- (ii) Escape of water or oil from any washing machine, dishwasher or fixed domestic water or heating installation if the Insured Person's place of residence is unoccupied.
- (iii) Theft during or after the occurrence of a fire.
- (iv) The burning of property through the order of any public authority.

Section 33 - Rental Vehicle Excess

If, during the Period of Insurance, while the Insured Person is on a Journey, the Company will reimburse the Insured Person for any excess or deductible which becomes legally liable to pay in respect of loss or damage to the rental vehicle caused by an accident during the rental period while on the Journey, up to the relevant Benefit amount as specified in the Certificate of Insurance subject to the terms and conditions of this Policy and the following additional conditions.

ADDITIONAL CONDITIONS

- (i) The rental vehicle must be rented from a licensed rental agency.
- (ii) As part of the hiring arrangement Insured Person must take up all comprehensive motor insurance against loss or damage to rental vehicle during the rental period.
- (iii) Insured Person must comply with all requirements of the rental organisation under the hiring agreement and of the insurer under such insurance, as well as the laws, rules and regulations of the country.

ADDITIONAL EXCLUSIONS

In addition to the General Exclusions, this Policy does not cover, and the Company will not in any event be liable in respect of any claim under this Rental Vehicle Excess section which is directly or indirectly, a consequence of, arising from, in connection with or contributed by any of the following:

- (i) Loss of or damage arising from operation of the rental vehicle in violation of the terms of the rental agreement or loss or damage which occurs beyond the limits of any public roads or in the violation of laws, rules and regulations of the country.
- (ii) Loss of or damage arising from wear and tear, gradual deterioration, damage from insects or vermin, inherent vice, latent defect or damage.

Section 34 - Rental Vehicle Return

If, during the Period of Insurance, while the Insured Person is on a Journey, the Insured Person rents or hires a car or a campervan from a licensed rental agency and is unable to return the rental vehicle due to the Insured Person being Confined in a Hospital Overseas as a result of Bodily Injury or Sickness, the Company will reimburse the Insured Person the reasonable costs for returning the rental vehicle to the nearest hire depot, provided that the Insured Person is legally liable under the vehicle rental agreement, up to the relevant Benefit amount as specified in the Certificate of Insurance subject to the terms and conditions of this Policy.

Section 35 - Pet Cover

In the event that the Insured Person is being prevented from completing the return leg of a Journey within the Period of Insurance, as a result of Travel Delay under Section 17 or the Insured Person's being Confined in a Hospital Overseas at the expiry of the Policy whilst during the Insured Person's Journey, and that the Insured Person incurs an additional cost of putting the pet in a pet's boarding home, the Company will pay the Insured Person the relevant Benefit amount specified in the Certificate of Insurance for every full six (6) consecutive hours of delay up to the maximum Benefit amount specified in the Certificate of Insurance.

WINTER SPORTS OPTION

Section 36A - Ski Equipment

If, during the Period of Insurance, whilst the Insured Person is on a Journey, the Insured Person sustains loss of or damage to his **Ski Equipment**, the Company will indemnify the Insured Person in respect of such loss up to the relevant Benefit amount as specified in the Certificate of Insurance subject to the terms and conditions of this Policy and the following additional conditions.

ADDITIONAL CONDITIONS

- (i) The Company will not indemnify in excess of Singapore Dollars one thousand (S\$1,000) for each item or each pair or a set of items;
- (ii) All Ski Equipment must be owned by the Insured Person and not hired by, loaned or entrusted to the Insured Person;
- (iii) In respect of items more than one (1) year old, the Company will indemnify after taking into account wear and tear and depreciation or at its absolute discretion, replace or repair such items;
- (iv) The loss or damage must be reported to the police or relevant authority having jurisdiction where the loss or damage occurred within twenty-four (24) hours of such loss or damage. Any claims for indemnity under this section must be accompanied by a copy of a police report or a report issued by the relevant authority evidencing such loss;
- (v) For the avoidance of doubt, in the event the Insured Person becomes entitled to a refund or reimbursement of all or part of such expenses from any other source, or if there is in place any other insurance against the events covered under this section, the Company will only be liable to pay the balance of any amount not covered by any other insurance.

ADDITIONAL DEFINITION

Ski Equipment means skis (including bindings), ski boots, ski poles, snowboards (including bindings) and snowboard boots.

ADDITIONAL EXCLUSIONS

In addition to the General Exclusions, this Policy does not cover, and the Company will not in any event be liable in respect of any claim under this Ski Equipment section which is directly or indirectly, caused by, a consequence of, arising from, in connection with or contributed by any of the following:

- (i) loss or damage occurring during the use of the Ski Equipment;
- (ii) loss of or damage to the Ski Equipment caused by wear and tear, gradual deterioration, destruction by moths, vermin, inherent vice;
- (iii) loss or damage arising from confiscation or retention of the Ski Equipment by customs or other officials;
- (iv) loss or damage as a result of the Insured Person's failure to take due and reasonable care and precaution to safe-guard and secure the Ski Equipment;
- (v) loss or damage not reported to either the police or relevant authority within the jurisdiction where the loss or damage occurred within twenty- four (24) hours of the discovery of such loss of or damage to the Ski Equipment.

Section 36B - Piste Closure

If, during the Period of Insurance, whilst the Insured Person is on a Journey, the Insured Person is prevented from skiing due to closure of ski track/ run at the pre-booked resort due to bad weather, the Company will pay the relevant Benefit amount specified in the Certificate of Insurance subject to the terms and conditions and the following additional condition of this Policy for each day of ski track/run closure.

ADDITIONAL CONDITION

Any claims for indemnity must be accompanied by a copy of written confirmation from the resort management confirming the number of days and reason of closure.

Section 36C - Unused Ski Equipment Hire, Lift Passes And Ski School Expenses

If, during the Period of Insurance, whilst the Insured Person is on a Journey, the Insured Person is prevented from skiing as a result of Bodily Injury or Sickness, the Company will indemnify the Insured Person for any non-refundable, pre-paid Ski Equipment hire, lift passes and unused ski school expenses, up to the relevant Benefit amount as specified in the Certificate of Insurance subject to the terms and conditions of this Policy and the following additional condition.

ADDITIONAL CONDITION

Any claims for indemnity must be accompanied by a copy of a medical report from the Physician substantiating the Bodily Injury or Sickness and confirming the Insured Person's inability to ski during the period for which the indemnity is being claimed.

Section 36D - Replacement Of Ski Pass Or Ski Lift Pass

If, during the Period of Insurance, whilst the Insured Person is on a Journey, the Insured Person's ski pass or ski lift pass is lost due to theft, the Company will indemnify the Insured Person by replacing the stolen ski pass or equipment up to the relevant Benefit amount as specified in the Certificate of Insurance and subject to the terms and conditions of this Policy and the following additional condition.

ADDITIONAL CONDITION

The Insured Person must report the loss to the police or relevant authority within twenty-four (24) hours of such loss. Any claims for indemnity under this section must be accompanied by a copy of a police report or a report issued by the relevant authority evidencing such loss.

GOLF OPTION

Section 37A - Golf Equipment

If, during the Period of Insurance, whilst the Insured Person is on a Journey, the Insured Person sustains loss of or damage to his Golf Equipment, the Company will indemnify the Insured Person in respect of such loss up to the relevant Benefit amount as specified in the Certificate of Insurance subject to the terms and conditions of this Policy and the following additional conditions.

ADDITIONAL DEFINITION

Golf Equipment means golf clubs, golf bag, golf shoes and non-motorised golf trolley.

ADDITIONAL CONDITIONS

- (i) The Company will not indemnify in excess of Singapore Dollars one thousand (\$S\$1,000) for each item or each pair or a set of items;
- (ii) All Golf Equipment must belong, on loan, or entrusted to the Insured Person, and not hired or rented by the Insured Person;
- (iii) In respect of items more than one (1) year old, the Company will indemnify after taking into account wear and tear and depreciation or at its absolute discretion, replace or repair such items;
- (iv) The loss or damage must be reported to the police or relevant authority having jurisdiction where the loss or damage occurred within twenty-four (24) hours of such loss or damage. Any claims for indemnity under this section must be accompanied by a copy of a police report or a report issued by the relevant authority evidencing such loss; and
- (v) For the avoidance of doubt, in the event the Insured Person becomes entitled to a refund or reimbursement of all or part of such expenses from any other source, or if there is in place any other insurance against the events covered under this section, the Company will only be liable to pay the balance of any amount not covered by any other insurance.

ADDITIONAL EXCLUSIONS

In addition to the General Exclusions, this Policy does not cover, and the Company will not in any event be liable in respect of any claim under this Golf Equipment section which is directly or indirectly, caused by, a consequence of, arising from, in connection with or contributed by any of the following:

- (i) loss or damage occurring during the use of the Golf Equipment;
- (ii) loss or damage of Golf Equipment caused by wear and tear, gradual deterioration, destruction by moths, vermin, inherent vice;
- (iii) loss or damage arising from confiscation or retention of the Golf Equipment by customs or other officials; and
- (iv) loss or damage as a result of the Insured Person's failure to take due and reasonable care and precautions to safe-guard and secure the Golf Equipment.

Section 37B – Hole-In-One

If, during the Period of Insurance, while the Insured Person is on a Journey, the Insured Person scores a Hole-In-One, the Company will indemnify the Insured Person for the **Hospitality Expenses** incurred up to the relevant Benefit amount specified in the Certificate of Insurance subject to the terms and conditions of this Policy and the following additional condition.

ADDITIONAL DEFINITION

Hospitality Expenses means customary food and beverages purchased at the golf club house for the purpose of celebrating the Hole-in-One scored by the Insured Person.

ADDITIONAL CONDITION

Any claims for indemnity must be accompanied by a copy of the certificate for the Hole-In-One issued by the club and original receipts supporting the Hospitality Expenses.

Section 37C – Unused Green Fees

If, during the Period of Insurance, whilst the Insured Person is on a Journey, the Insured Person is prevented from playing golf as a result of Bodily Injury or Sickness, the Company will indemnify the Insured Person for any non-refundable, pre-paid and unused green fees up to the relevant Benefit amount as specified in the Certificate of Insurance subject to the terms and conditions of this Policy and the following additional condition.

ADDITIONAL CONDITION

Any claims for indemnity must be accompanied by a copy of a medical report from the Physician substantiating the Bodily Injury or Sickness and confirming the Insured Person's inability to play golf as a result of such Bodily Injury or Sickness during the period for which the indemnity is being claimed.

Section 38 – Terrorism Extension

In the event that of a claim arising directly or indirectly from any Act of Terrorism, this policy is extended to cover the Insured Person up to the maximum Benefit amount specified in the Certificate of Insurance for each section.

Part 8 Chubb Assistance – Scope Of Services (Tel. No. +65 6836 2922)

The services provided under Sections A to C of this Part 8 are by way of referral and arrangement only, and all expenses actually incurred are to be borne by the Insured Persons. Where expenses are incurred in relation to the services under Section D, these will be borne by the Company. The services under Section E are provided upon the specified terms and conditions. These services are available only when the Insured Persons are on a Journey.

Section A – Pre-Trip Assistance:

1. Visa Information Services

Chubb Assistance will provide information concerning visa requirements for foreign countries worldwide.

2. Inoculation Information Services

Chubb Assistance will provide information concerning inoculation requirements for foreign countries worldwide.

3. Weather Forecast Information Services

Chubb Assistance will assist the Insured Person who has lost the luggage while travelling outside Singapore by contacting the appropriate authorities involved and providing directions for recovery.

4. Foreign Exchange Rate Information Services

Chubb Assistance will provide information concerning exchange rates of major currencies against the Singapore dollar.

Section B – Travel Assistance:

1. Embassy Referral

Chubb Assistance will provide the address, telephone number and hours of opening of the nearest appropriate consulate and embassy worldwide.

2. Legal Firm Referral

Chubb Assistance will provide the address, telephone number and hours of opening of the nearest appropriate legal firm.

3. Lost Luggage Assistance

Chubb Assistance will assist the Insured Person who has lost the luggage while travelling outside Singapore by contacting the appropriate authorities involved and providing directions for recovery.

4. Lost Passport Assistance

Chubb Assistance will assist the Insured Person who has lost a passport while travelling outside Singapore by contacting the appropriate authorities involved and providing directions for recovery.

5. Interpreter Referral

Chubb Assistance will assist the Insured Person by providing the address, telephone number and hours of operating of interpreters worldwide.

6. Emergency Reservation for Airline and Hotel

Chubb Assistance will assist the Insured Person in an emergency with travel and accommodation booking and ticketing while travelling outside Singapore.

7. Lost Reporting Assistance

Chubb Assistance will provide the relevant advice should the Insured Person lose his credit or charge card while travelling outside Singapore.

Section C - Medical Assistance:

1. Telephone Medical Advice

Chubb Assistance will arrange for the provision of medical advice to the Insured Persons over the telephone.

2. Medical Service Provider Referral

Chubb Assistance will provide the Insured Persons with information about physicians, hospitals, clinics, dentists and dental clinics worldwide.

Section D - Medical Arrangements:

1. Arrangement of Hospital Admission

Chubb Assistance will assist the Insured Person with hospital admission if the medical condition of the Insured Person is of such gravity as to require hospitalisation.

2. Monitoring of Medical Condition during hospitalisation

Chubb Assistance will monitor the Insured Person's medical condition during hospitalisation.

Section E - Medical Emergencies:

1. Arrangement of Hotel Accommodation Expenses

Refer to Section 6 and 7 of Part 7.

2. Arrangement of Emergency Medical Evacuation and Repatriation

Refer to Section 11 of Part 7.

3. Arrangement of Repatriation of Mortal Remains

Refer to Section 12 of Part 7.

About Chubb

Chubb is a world leader in insurance. With operations in 54 countries and territories, Chubb provides commercial and personal property and casualty insurance, personal accident and supplemental health insurance, reinsurance and life insurance to a diverse group of clients. The company is defined by its extensive product and service offerings, broad distribution capabilities, exceptional financial strength and local operations globally. Parent company Chubb Limited is listed on the New York Stock Exchange (NYSE: CB) and is a component of the S&P 500 index. Chubb employs approximately 43,000 people worldwide. Additional information can be found at: www.chubb.com.

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