

Your Policy

Important Notice

- This Policy is issued to you based on the information you provided us when you applied for the insurance. You should note that you must disclose to us fully and faithfully the facts you know or ought to know that are relevant to your insurance application. If you had failed to disclose the relevant facts to us, the Policy issued to you may be void and you may not receive any benefit from it.
- This Policy, inclusive of the Policy Schedule, any Memorandum and Endorsement, is an important document. It explains the insurance cover we provide you, the rights the Policy gives you, the conditions you are to comply with, and situations where we will not pay under the Policy. Please read this Policy carefully and ensure that it meets your requirements. If the Policy does not meet your requirements or you find any error in the Policy, kindly return it to us and contact us immediately for correction.

WHEREAS

1. The Insured has applied for insurance, and
2. HSBC Insurance (Singapore) Pte. Limited (hereinafter referred to as "The Company") has agreed to provide such insurance.

The Company agrees only on the basis of the Terms and Conditions contained in this Policy to provide insurance cover to the Insured for those risks insured against to the extent and in the manner stated hereinafter in the Policy Schedule.

DEFINITIONS

"Accident" shall mean a sudden unforeseen and fortuitous event which shall independently of any other cause be the sole and direct cause of bodily injury.

"Accidental Bodily Injury" shall mean bodily injury caused solely and directly by an Accident.

"Adult" shall mean an Insured Person of at least eighteen (18) years of age and not falling within the definition of "Child / Children".

"Anniversary Date" shall mean each anniversary of the Effective Date of this Insurance.

"Benefit" in respect of an Insured Person means the amount shown in the Table of Benefits or otherwise stated in this Policy against which benefits payable under this Policy will be calculated.

"Child/Children" shall mean any dependent unmarried child, including step child/ren and legally adopted child/ren of the Insured, who is between six (6) months and under eighteen (18) years of age (or under twenty three (23) years of age if studying full-time in a recognized institution of higher learning).

"Common Carrier" shall mean any bus, coach, taxi, hotel or airport limousine, ferry, hovercraft, hydrofoil, ship, train, tram or underground train provided and operated by a carrier duly licensed for the regular transportation of fare-paying passengers,

and any fixed-wing aircraft or helicopter provided and operated by an airline or an air charter company which is duly licensed for the regular transportation of fare-paying passengers and operating only between established commercial airports or licensed commercial heliports.

"Country of Origin/Home Country" shall mean any country to which the Insured is granted rights of citizenship or permanent residence by the respective governmental authorities.

"Curtailment" means abandonment by return to Singapore of the planned holiday / Trip after arrival at the booked destination noted on the booking invoice.

"Golf Equipment" shall mean golf clubs, golf bags and golf accessories.

"Hospital" shall mean a place that holds a valid license (if required by law); operates primarily for the care and treatment of sick or injured persons; has a staff of one or more Medical Practitioner available at all times; provides 24-hour nursing service and has at least one registered professional nurse on duty at all times, has organized diagnostic and surgical facilities, either on premises or in facilities available to the Hospital on a pre-arranged basis. Hospital shall not include the following:

- A mental institution; an institution confined primarily to the treatment of psychiatric disease including sub-normality; the psychiatric department of a hospital.
- A place for the aged; a rest home; a place for drug addicts or alcoholics.
- A health hydro or nature cure clinic; a nursing or convalescent home; a special unit of a hospital used primarily as a place for drug addicts or alcoholics, or as a nursing, convalescent, rehabilitation, extended care facility or rest home.

"Aircraft Hijack" means any seizure or exercise of control by force or violence or threat of force or violence and with wrongful intent, of the Common Carrier.

"Hospital Confinement" shall mean being confined in a hospital as a registered in-patient because of a medical necessity and on the recommendation of a Medical Practitioner. One day of Hospital Confinement shall mean a continuous twenty-four (24) hours period.

"Household Effects" shall mean household furniture and furnishing, clothing and personal effects belonging to the Insured or to members of his/her family or domestic servants permanently residing with him/her and fixtures and fittings the Insured owns (or for which he/she is responsible) not being landlord's fixtures and fittings excluding Personal Money, deeds, bonds, bills of exchange, promissory notes, securities and documents of any kind.

"Insured" shall mean the applicant in whose name the Policy is issued.

"Insured Person" shall mean eligible person(s) for insurance cover and are person(s) named in the Policy Schedule.

"Loss of Eye(s)" shall mean the total and irrecoverable loss of all sight of an eye or eyes which render, in the opinion of a Medical Specialist twelve (12) calendar months after the Accident, the Insured Person absolutely blind beyond remedy by surgical or other treatment.

“*Loss of Limb*” shall mean total and permanent loss of use of the whole hand or foot which, in the opinion of a Medical Specialist twelve (12) calendar months after the Accident, is beyond remedy by surgery or other treatment or physical separation of the hand or foot at or above the wrist or ankle point.

“*Loss of Speech & Hearing*” shall mean the total and irrecoverable loss of speech and hearing which, in the opinion of a Medical Specialist twelve (12) calendar months after the Accident, is beyond remedy by surgical or other treatment.

“*Medical Expenses*” shall mean the actual expenses paid by the Insured Person to a Medical Practitioner, Hospital for medical, surgical or nursing treatment including the cost of medical supplies and ambulance hire. Medical Expenses shall include the cost of emergency dental treatment necessitated by an Accident to sound and natural teeth.

“*Medical Practitioner*” shall mean a practitioner of western medicine duly qualified and registered as such under the laws of the country in which the claim arises and where the treatment takes place but excluding the Insured Person, or business partner or an employer or employee of the Insured; or an agent of an Insured Person, or a person who is related to an Insured Person in any way.

“*Medical Specialist*” means a licensed specialist medical practitioner duly registered with the Medical Council as provided for under the Singapore Medical Registration Act (Cap 174) or where consultation is obtained overseas, a specialist medical practitioner registered with the appropriate authority and is so authorised to practise medicine pursuant to the laws of the country in which such practice is maintained. The Medical Specialist shall not include an Insured Person or a relative of such Insured Person unless approved by the Company.

“*Nominated Account*” shall mean the bank account or the Visa or MasterCard credit card account first nominated by the Insured as the account for premium debit at inception of this Policy or such other account nominated by the Insured from time to time for such purpose.

“*Nuclear, Chemical, Biological Terrorism*” shall mean the use of any nuclear weapon or device or the emission, discharge, dispersal, release or escape of any solid, liquid or gaseous chemical agent and/or biological agent during the period of this insurance by any person or group(s) of persons, whether acting alone or on behalf of or in connection with any organization(s) or government(s) committed for political, religious or ideological purposes or reasons including the intention to influence any government and/or to put the public, or any section of the public, in fear.

“*One Way Travel*” shall mean a journey undertaken by an Insured Person not intending to return to Singapore within ninety (90) days of departure from Singapore. One Way Travel journey shall commence not more than three (3) hours prior to the booked departure time when he/she leaves his/her place of residence or office to the place of embarkation in Singapore or to the intended destination(s) overseas and ceases on whichever of the following occurring first:

- a. The expiry of the Period of Insurance specified in the Policy;
- b. Within twenty-four (24) hours upon arrival at the final destination.

“*Overseas*” means anywhere outside Singapore

“*Permanent Total Disability*” means continuous total disability of an Insured Person which commences within thirty (30) days from the date of Accident and is, in the opinion of a Medical Specialist twelve (12) calendar months after the Accident, beyond hope of improvement or recovery so as to render the Insured Person completely unable to engage in any gainful occupation or employment for the remainder of the Insured Person’s life.

“*Personal Money*” shall mean cash, bank notes, cheques, travellers’ cheques, money orders taken on the Trip.

“*Policy Schedule*” shall mean the Schedule Page which forms part of the Policy.

“*Pre-existing Medical Condition*” shall mean any illness, disease or medical condition which presented any signs or symptoms of which the Insured / Insured Person was aware or ought reasonably to have been aware or for which medical advice or treatment was recommended by a Medical Practitioner / Medical Specialist prior to the insurance application date (for Single trip Policy), or the date of booking the scheduled Trip (for Annual Plan Policy).

For Annual Plan policies, a medical condition for which an Insured Person has made a claim on a previous Trip or a medical condition where treatment was sought or diagnosed within a twelve (12) month period prior to Insured Person’s travel, such condition will be considered a Pre-existing Medical Condition for the purpose of subsequent Trips.

“*Pregnancy Related Sickness*” shall refer to sickness or treatment suffered as a result of pregnancy related sickness. Such sickness or treatment shall exclude the following:

- a. Abortion or miscarriage;
- b. Any expenses incurred due to events occurring during the first trimester of pregnancy (0 - 12 weeks);
- c. Any disease or disorder of the foetus;
- d. Any depressive, psychological or psychiatric illness, including post-natal depression;
- e. Childbirth, including premature childbirth;
- f. Serious complications of pregnancy including but not limited to cervical insufficiency, ectopic pregnancy, excessive or low amniotic fluid, intrauterine growth restriction (IUGR), iron deficiency anaemia, eclampsia, gestational diabetes or hypertension, puerperal infection, placenta previa, abruption placenta, acute nephritis or any complications caused by congenital heart defects.

“*Principal Overseas Medical Expenses*” shall mean the actual expenses paid by the Insured Person to a Medical Practitioner, or Hospital for medical surgical or nursing treatment including the cost of medical supplies and ambulance hired during the Trip outside of Singapore. Medical Expenses shall include the cost of emergency dental treatment necessitated by an Accident to sound and natural teeth.

“*Selected Plan*” shall mean the choice of Classic or Superior Plan made by the Insured or the Insured Person’s representative at the time of application.

“*Serious Illness / Serious Bodily Injury / Serious Medical Condition*” whenever applied to the Insured Person is one which requires treatment by a Medical Practitioner and which results in the Insured Person being certified by that Medical Practitioner as unfit to travel or to continue with the original Trip. When applied to the immediate family member or travelling companion insured under the Policy, it shall mean Accidental Bodily Injury or Sickness certified as being life threatening by a Medical Practitioner and which results in the Insured Person’s discontinuation or cancellation of his / her original Trip.

“*Sickness*” shall mean illness, disease or medical condition contracted and commencing during the Trip, and excludes any Pre-existing Medical Condition.

“*Travel Documents*” shall mean passports, visa, travel tickets and other like travel documents.

“*Traditional Chinese Medicine (TCM) / Physician*” shall mean treatment by a registered herbalist, acupuncturist, bonesetter or chiropractor licensed under any applicable laws. The attending physician shall not be an Insured Person; or business partner or an employer or employee of the Insured Person; or an agent of an Insured Person, or a person who is related to an Insured Person in any way.

“*Trip*” shall mean a journey undertaken by an Insured Person and commencing not more than three (3) hours prior to the booked departure when he/she leaves his/her place of residence or office to the place of embarkation in Singapore or to the intended destination(s) overseas and ceases on whichever of the following occurring first:

Attached Policy Schedule

- a. The expiry of the period of insurance specified in the Policy;
- b. The Insured Person's return to his/her permanent place of residence;
- c. Within three (3) hours upon arrival into Singapore.

TERRITORY

ASEAN refers to Brunei, Cambodia, Indonesia, Laos, Malaysia, Myanmar, Philippines, Thailand and Vietnam

Asia refers to Australia, China, Hong Kong SAR, India, Japan, Macau SAR, New Zealand, South Korea, Taiwan, in addition to ASEAN

Worldwide refers to all other countries in addition to ASEAN or Asia as defined above.

INSURED COVERAGE

Section 1 - PERSONAL ACCIDENT BENEFITS

Subject to the terms of this Policy, in the event of Accidental Bodily Injury sustained by an Insured Person during a Trip which results in death or disability, the Company will pay the insured benefits (subject to the limits of the Selected Plan) as stipulated in the Table of Benefits attached to this Policy as per the Scale of Benefits below:

Scale of Benefits

1.1. Death	100%
1.2. Permanent Total Disability	100%
1.3. Loss of both Eyes	100%
1.4. Loss of two Limbs	100%
1.5. Loss of one Eye and one Limb	100%
1.6. Loss of Speech and Hearing	100%
1.7. Loss of one Eye or one Limb	50%
1.8. Death arising from an accident while as a fare-paying passenger in a Common Carrier	200%

Provided that:

No benefits will be payable:

1. unless death or the disability occurs within twelve (12) months of the date of the Accidental Bodily Injury;
2. if at the time of the Accident, an Insured Person has already had amputation or Loss of use of a hand, arm, foot, leg or has lost the sight of one or both eyes, such loss shall not be included in assessing any benefit payable under this Policy;
3. Double Indemnity for public conveyance benefit as stated in Section 1.8 above applies in event of an Accident occurring whilst the Insured Person is Overseas and is riding as a fare-paying passenger in a Common Carrier, resulting in death of the Insured Person;
4. Double Indemnity for public conveyance benefit as stated in Section 1.8 shall not apply under Classic Plan;
5. Benefits 1.1 - 1.8 listed under the Scale of Benefits of this Section are not cumulative and only one benefit will be payable for any one event.

Section 2 - MEDICAL AND RELATED EXPENSES BENEFITS

In the event that the Insured Person suffers Accidental Bodily Injury or Sickness (including Pregnancy Related Sickness) during a Trip and requires urgent treatment, the Company will pay the insured benefits as stipulated in the Table of Benefits attached to this Policy.

Section 2.1- Overseas Medical Expenses

The Company will reimburse the Insured Person for overseas medical expenses for Accidental Bodily Injury or Sickness, including additional accommodation and travelling expenses necessarily incurred outside Singapore within ninety (90) days of the incident.

Provided that:

1. In any event, the total amount payable for expenses for treatment shall not exceed the Overseas Medical Expenses Benefit as stipulated in the Schedule of Benefits Table attached to this Policy.

2. No benefit shall be payable:
 - a. for surgical and medical treatment which in the opinion of the Medical Practitioner treating the Insured Person can be reasonably delayed until the Insured Person's return to Singapore or in the case of Insured Person on One-Way Travel not returning to Singapore, until arrival in the country of final destination;
 - b. for Pre-existing Medical Condition;
 - c. if Insured Person had been travelling against specific medical advice;
 - d. for the additional cost of a single or private room at a hospital or charges in respect of special or private nursing, cosmetic surgery, eyeglasses and refraction or hearing aids, and prescriptions therefore except as necessitated by an Accident occurring during the Trip.
3. All treatments including specialist treatments must be prescribed / referred by a Medical Practitioner in order for expenses to be reimbursed under this Policy and shall not exceed the usual level of charges for similar treatments, medical services or supplies in the location where the expenses were incurred had this insurance not existed.
4. Additional accommodation and travelling expenses necessarily incurred by a family member or travelling companion when required on medical advice to remain or to travel with the Insured Person who has been hospitalised or whose Trip has been delayed due to their Serious Medical Condition shall be limited to ten percent (10%) of the Principal Overseas Medical Expenses Benefit.

Section 2.2 - Medical Expenses Incurred Overseas for Pregnancy Related Sickness

The Company will reimburse the Insured Person up to a maximum of S\$10,000 in the event of medical expenses necessarily incurred whilst overseas for Pregnancy Related Sickness.

Provided that:

1. This Policy shall not cover Pregnancy Related Sickness upon return to Singapore or Home Country nor apply to One-Way Travel cover.
2. If the Insured Person is entitled to a reimbursement of all or part of Pregnancy Related Sickness expenses from any other source or if there is in place any other insurance against events covered under this section, the Company will only be liable for the excess recoverable from such other source or insurance.

Section 2.3 - Treatment by Traditional Chinese Medicine (TCM) / Physician

The Company will reimburse the Insured Person for expenses incurred for treatment by a registered herbalist, acupuncturist, bonesetter or chiropractor up to sum of S\$100 under Classic Plan and S\$300 under Superior Plan.

This section also covers expenses incurred for treatment or follow-up treatment in Singapore by a Traditional Chinese Medicine Physician for Accidental Bodily Injury or Sickness which the Insured Person sustained whilst overseas.

Provided that:

1. If prior treatment had not been sought overseas, the Insured Person must seek treatment in Singapore within five (5) days upon return to Singapore.
2. If treatment had already been sought overseas, the Insured Person has up to a maximum of thirty (30) days upon return to Singapore to continue treatment in Singapore.
3. In all event, the total expenses for treatment by a Traditional Chinese Medicine Physician incurred overseas and in Singapore shall be up to sum of S\$100 under Classic Plan and S\$300 under Superior Plan.

Section 2.4 - Overseas Hospital Confinement

If during a Trip, the Insured Person is necessarily admitted to a Hospital abroad as a result of Accidental Bodily Injury or Sickness sustained during the Trip, the Company will pay to the Insured Person for each Hospital Confinement day the relevant benefit amount specified in the Table of Benefits attached to this Policy.

Provided that:

No benefits will be payable under this section:

1. for treatment obtained in Singapore, and
2. in the case of travellers on One-Way Travel not returning to Singapore, for treatment obtained either in Singapore or in the country of final destination.

Section 2.5 - Post Travel Medical Expenses

The Company will reimburse the Insured Person for Medical Expenses necessarily incurred for medical treatment received upon return to Singapore for:

1. Follow-up treatment within thirty-one (31) days from the date of the Insured Person's return where overseas medical expenses are payable for Accidental Bodily Injury or Sickness under Section 2.1 of this Policy.
2. Treatment within five (5) days from the date of Insured Person's return where initial treatment for the Accidental Bodily Injury or Sickness was not sought overseas up to a maximum of thirty-one (31) days from the date of first treatment in Singapore.

In any event, the amount payable for total expenses for treatment shall not exceed the Post Travel Medical Expenses Benefit as stipulated in the Table of Benefits attached to this Policy.

Section 2.6 - Compassionate Overseas Visit

In the event that the Insured Person is hospitalised overseas for more than seven (7) days and the Insured Person's medical condition forbids evacuation and no adult member of the Insured Person's family is with the person, the Company will pay the reasonable hotel and travelling expenses incurred by one adult relative of the Insured Person to visit and stay with the Insured Person until the Insured Person can return to Singapore.

The Company will pay up to the Compassionate Overseas Visit Benefit stipulated in the Table of Benefits attached to this Policy.

Section 2.7 - Return of Child / Children

In the event that the Insured Person is hospitalised overseas and no other adult is accompanying the Child / Children, the Company will pay the reasonable hotel and travelling expenses that may be incurred for an adult relative to accompany the Child / Children back to Singapore.

The Company will pay up to the Return of Child / Children Benefit stipulated in the Table of Benefits attached to this Policy.

Section 2.8 - Emergency Medical Evacuation

If as a result of an Accidental Bodily Injury sustained or Sickness commencing during a Trip, and in the opinion of the Company and / or International SOS Pte Ltd (hereinafter referred to as "ISOS"), it is judged medically appropriate to move the Insured Person to another location for medical treatment, or to return the Insured Person to Singapore, ISOS shall arrange for the evacuation, utilising the means best suited to do so.

The means of evacuation arranged by ISOS may include air ambulance, surface ambulance, regular air transportation, railroad or any other appropriate means. All decisions as to its means of transportation and the final destination will be made by ISOS and will be based solely upon medical necessity.

The covered expenses are expenses for the service provided and/or arranged for the transportation, medical services and medical supplies necessarily incurred as a result of the emergency evacuation of an Insured Person.

Provided that :

The Company shall not be liable for:

1. Any expenses for a service 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.
2. Any expenses not provided and arranged by ISOS or its authorised representative, except the Company reserves the right to waive this exclusion in the event that the Insured Person or their travelling companion cannot for reasons beyond their control notify ISOS during an emergency medical situation.

Section 2.9 - Repatriation of Mortal Remains or Funeral Expenses

In the event of death payable under this Policy, the Company will pay the reasonable cost incurred for burial or cremation in the locality where death occurred, or return the body or ashes to Singapore or directly to the deceased Insured Person's Country of Origin.

The Company will pay up to the Repatriation of Mortal Remains or Funeral Expenses Benefit stipulated in the Table of Benefits attached to this Policy.

Section 3 - TRAVEL INCONVENIENCE BENEFITS

Section 3.1- Trip Cancellation

For the purpose of this Section, the Insurance shall become effective and commence upon the approval of the application for this insurance (for Single Trip policy) or from the beginning of the period of insurance as specified in the Policy Schedule (for Annual Plan policy) whichever is the earlier.

On the cancellation of a scheduled Trip, the Company will indemnify, up to the Trip Cancellation Benefit stipulated in the Schedule of Benefits Table attached to this Policy, each Insured Person in respect of losses of tour, passage-fare or accommodation deposits or payments which are irrecoverable from the tour operator, Common Carrier or provider of accommodation.

Provided that:

1. Benefits will be paid under this Section only for cancellation losses of a scheduled Trip resulting from:
 - a. death, Serious Illness / Serious Bodily Injury / Serious Medical condition of the Insured Person, or a travelling companion, spouse, parent, parent-in-law, grandparent, child, sister, brother, fiancée, business partner or co-director of the Insured Person;
 - b. witness summons, jury service or compulsory quarantine of the Insured Person;
 - c. serious damage to Insured Person's principal residence by fire, flood or similar natural disaster (typhoon, windstorm, tsunami, earthquake and like) within one (1) week from departure date which requires the Insured Person's presence on the premises on the departure date.
2. No benefits will be paid for:
 - a. loss arising from a Pre-existing Medical Condition;
 - b. loss arising directly or indirectly from government regulation or Act, delay or amendment of the booked itinerary or failure in provision of any part of the booked holiday (including error, omission or default) by the provider of any service forming part of the booked holiday as well as of the agent or tour operator through whom the holiday is booked;
 - c. loss arising directly or indirectly from disinclination to travel or financial circumstances of any Insured Person;
 - d. loss arising directly or indirectly from failure to notify travel agent/tour operator or provider of transport or accommodation immediately when it is found necessary to cancel or curtail the travel arrangement;
 - e. any claim under this Section if the person whose condition gives rise to the claim was receiving in-patient treatment in a hospital or had received a terminal prognosis at the time of the application of this insurance.

Section 3.2- Trip Postponement

The Company will indemnify each Insured Person up to the Trip Postponement Benefit stipulated in the Table of Benefits attached to this Policy for the resulting administrative charges if the Trip is postponed due to any of the following occurring within thirty (30) days (except for item 4) before the date of departure of the Trip:

1. death or Serious Illness / Serious Bodily Injury / Serious Medical Condition or quarantine of the Insured Person; or travelling companion, spouse, parent, parent-in-law, grandparent, child, sister, brother, fiancée, business partner or co-director of the Insured Person.
2. witness summons, jury service or compulsory quarantine of the Insured Person.
3. unexpected strike, riot or civil commotion beyond the control of the Insured Person at the planned destination.
4. serious damage to Insured Person's residence in Singapore by fire, flood or similar natural disaster (typhoon, windstorm, tsunami, earthquake and like) within one (1) week from departure date which requires the Insured Person's presence on the premises on the departure date.

The Company shall only be liable for the resulting administrative charges :

- a. on which full payment was made for the initial Trip by the Insured Person, and
- b. for which the Insured Person is legally liable, and
- c. which are not recoverable from any other source.

Provided that:

No benefits will be paid for any claim:

- i. under 1 above if the person whose condition gives rise to the claim was receiving in-patient treatment in a hospital or had received a terminal prognosis at the time of the application of this insurance;
- ii. caused directly or indirectly by government regulations or control;
- iii. caused by cancellation by the Common Carrier;
- iv. that is covered by any other existing insurance or programme;
- v. which will be paid or refunded by the hotel, travel agent or any other provider of travel and /or accommodation; or
- vi. should this insurance be purchased less than seven (7) days before the date of departure.

Section 3.3 - Trip Curtailment

The Company will pay the Insured Person up to the Trip Curtailment Benefit as stipulated in the Table of Benefits attached to this Policy each Insured Person in respect of unused irrecoverable pre-paid transport cost or accommodation charges included in the contracted holiday or Trip and additional hotel and repatriation cost to Singapore arising from necessary and unavoidable curtailment of a Trip as a direct result of the death, Serious Illness / Serious Bodily Injury / Serious Medical Condition of the Insured Person; or a travelling companion, spouse, parent, parent-in-law, grandparent, child, sister, brother, fiancée, business partner or co-director of the Insured Person.

Provided that:

1. Benefits are payable under this Section only when:
 - a. any occurrences giving rise to indemnities did not exist at the time of application date (for Single Trip Policy), or the date of booking the scheduled Trip (for Annual Plan Policy)
 - b. the person whose condition gives rise to any claim under this Section was not receiving in-patient treatment in a hospital or had received a terminal prognosis at the time of the application of this insurance.
2. Benefits are not payable for loss arising from a Pre-existing Medical Condition.

Section 3.4 - Travel Delay

In the event that the departure of the Common Carrier in which the Insured Person has arranged to travel is delayed for at least eight (8) hours from the time specified in the travel itinerary supplied to the Insured Person due to strike or industrial action, adverse weather conditions, mechanical breakdown and derangement or due to grounding of a Common Carrier as a result of mechanical or structural defect, the Company will pay S\$100 for each full eight (8) hours' delay (the delay being calculated from the departure time of the Common Carrier specified in the itinerary) up to a maximum limit of S\$1,000 per Insured Person.

Provided that:

No benefits will be paid for delay:

1. arising from failure of the Insured Person to check in with the Common Carrier (or their handling agents) according to the itinerary supplied to the Insured Person or from the failure of the Insured Person to obtain written confirmation from the carriers (or their handling agents) of the number of hours of delay and the reason for such delay;
2. loss arising from strike or industrial action already existing at the date this insurance is purchased by the Insured;
3. loss arising from late arrival of the Insured Person at the airport, port or station after check-in booking-in time (except for the late arrival due to strike or industrial action).

Section 3.5 - Missed Travel Connection

The Company will pay a cash benefit of S\$200 in the event the Insured Person missed the connecting flight, voyage or train connection arising from the delay of the conveyance in which the Insured Person was travelling as a passenger to the place for the Insured Person's connecting flight, voyage or train connection.

Provided that:

1. The Insured Person must have received a confirmed reservation on the connecting flight, voyage or train connection.
2. The missed flight, voyage or train connection must be verified in writing by the operator(s) of the airline/ cruise/ferry/train services or their handling agent(s).

Section 3.6 - Overbooked Flight

The Company will pay a cash benefit of S\$200 in the event the Insured Person is denied from boarding the aircraft arising from the overbooking of the flight in which the Insured Person had received a confirmed reservation from the travel agent or airline.

The inability to board the aircraft and the overbooking of the flight must be verified in writing by the operator(s) of the airline or their handling agent(s).

Section 3.7 - Baggage and Personal Effects

The Company will by payment or at its option by replacement or repair, indemnify the Insured Person up to the Baggage and Personal Effects Benefit per Table of Benefits attached to this Policy for loss of or damage to baggage taken, sent in advance or purchased on the Trip (including clothing and personal effects worn or carried on the person, in trunks, suitcases and like receptacles, Golf Equipment and laptops), occurring during the period of insurance and owned by the Insured Person.

Provided that:

1. The Insured Person shall observe ordinary and proper care for the safety of the property insured, including examination of baggage when received and in the event of any destruction, loss or damage coming to the knowledge of the Insured Person, the Insured Person shall give immediate notice to:
 - a. the police in the case of theft, loss or wilful damage by a third party;
 - b. the Common Carrier when loss or damage has occurred in transit.
2. The limit of the Company's liability per item, pair or set is S\$500 (S\$1,000 in the case of laptops).

3. No benefits will be payable:
 - a. for normal wear and tear, gradual deterioration, mechanical or electrical breakdown or derangement.
 - b. for loss or damage arising from delay, confiscation, detention, requisition or destruction by customs or other officials or authorities.
 - c. for loss of or damage to cash, bank notes, bonds, coupons, stamps, negotiable instruments, title deeds, manuscripts, securities of any kind and travel documents.
 - d. for breakage of or damage to fragile articles, glassware, record players, tape recorders, wireless or television apparatus, musical instruments, sculptures, household goods or equipment unless occasioned by accident to the conveyance in which the baggage is being carried.
 - e. for loss of or damage to any business goods or samples.
 - f. for loss of or damage to spectacles or contact lenses.
 - g. in respect of loss or damage whilst in the custody of a Common Carrier, unless reported immediately on discovery and in the case of an airline, a baggage irregularity report is obtained.
 - h. in respect of losses not reported to the police within twenty-four (24) hours and a report obtained.
 - i. for loss of or damage to Golf Equipment while in use.

Section 3.8 - Baggage Delay (whilst overseas)

If the Insured Person's baggage has been misdirected, misplaced or delayed by the Common Carrier and has not been returned to the Insured Person upon arriving at the overseas destination, the Company will pay, subject to the limit shown, the amount for each 8-hour delay, from the time the Insured Person arrived at the overseas destination, as stipulated in the Table of Benefits.

Provided that:

1. The delay must not be arising from detention or confiscation by customs or other officials or authorities.
2. The delay must be certified by a baggage irregularity report from the Common Carrier or by a letter from the tour operator.
3. No benefit will be payable if the baggage is delayed upon the Insured Person's return to Singapore or in the case of One-Way Travel cover, upon the Insured Person's arrival in scheduled final destination.
4. Insured Person cannot claim under both Section 3.7 and Section 3.8 for the same loss event.

Section 3.9 - Personal Money & Travel Documents

The Company will indemnify the Insured Person for accidental loss of Personal Money including the cost to replace loss of Travel Documents taken on the journey up to the loss of Personal Money and Travel Documents Benefit stipulated per Table of Benefits attached to this Policy.

Provided that:

1. The loss must be reported to the police having jurisdiction at the place of loss, within twenty-four (24) hours of the loss, or discovery of the loss. The claim must be supported by the police report.
2. No benefits will be payable for:
 - a. shortages due to error, omission, exchange or depreciation in value;
 - b. loss of travellers' cheques not immediately reported to the local branch or agent of issuing authority;
3. In respect of tickets and passes, the Company's maximum liability shall be limited to the reimbursement of actual replacement cost necessarily incurred by the Insured Person or proportionate share of the unused portion of the tickets / passes, whichever is the less.
4. A claim under this Section can only be made once during any one Trip.

Section 3.10 - Aircraft Hijack

The Company will pay up to the Aircraft Hijack Benefit as stipulated in the Table of Benefits attached to this Policy in the event of an unlawful hijack of the aircraft upon which the Insured Person is travelling on.

Section 3.11 - Personal Liability

The Company will indemnify the Insured Person against Legal Liability to a third party up to the Personal Liability Benefit as stipulated in the Table of Benefits attached to this Policy in respect of any one claimant or any number of claimants arising out of one or more events during the period of insurance; arising during a Trip as a result of

1. accidental bodily injury to any third party;
2. accidental loss of or damage to property belonging to a third party.

Such indemnification shall include payment made in respect of:

- a. third parties costs and expenses recoverable from the Insured Person and
- b. the Insured Person's costs and expenses incurred with the written prior consent of The Company.

Provided that:

1. The Insured Person shall not admit liability or enter into any settlement without obtaining the written consent of the Company.
2. There will be no payment under this Section unless judgements are delivered in the first instance by or obtained from a court of competent jurisdiction within the relevant country.
3. This Section of the Policy will not pay for loss or damage arising directly or indirectly from, in respect of, or consequent upon:
 - a. employer's liability, contractual liability or liability to a member of an Insured Person's family;
 - b. liability incurred by the acts of animals belonging to or in the care, custody or control of the Insured Person;
 - c. any wilful, malicious or unlawful act;
 - d. pursuit of trade, business or profession;
 - e. property belonging to or held in trust, or in the care, custody or control of the Insured Person;
 - f. ownership or occupation of land or building (other than occupation only of any temporary residence);
 - g. liability arising out of the ownership, possession or use of vehicles, aircraft, or watercraft;
 - h. legal costs resulting from any criminal proceedings;
 - i. the influence of drugs and/or intoxicating liquor;
 - j. ski racing, ski jumping, ice jockey, the use of bob-sleighs or skeletons, riding or driving in races or rallies or the use of firearms.

Section 4 - LIFESTYLE BENEFITS

Section 4.1 - Rental Vehicle Excess

The Company will reimburse the Insured Person up to the Rental Vehicle Excess Benefit stipulated under Table of Benefits attached to this Policy for any excess or deductible which the Insured Person becomes legally liable to pay in respect of loss or damage caused by an Accident to a rental vehicle.

Provided that:

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

4. No benefits will be paid under this Section for:
 - a. Loss or damage arising from the 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 the violation of laws, rules and regulations of the country.
 - b. Loss or damage arising from wear and tear, gradual deterioration, damage from inherent vice, latent defect or damage.

Section 4.2 24-hour Worldwide Medical Emergency and Travel Assistance Hotline

The Company contracts with International SOS Pte Ltd (“ISOS”) under an Arrangement Service Agreement to provide the Insured Person a 24-hour helpline service. The services provided under this Section of the Policy are by way of referral and arrangement only, and all expenses actually incurred are to be borne by the Insured Person. Where expenses are incurred in relation to Section B, these will be borne by the Company subjecting to the terms and conditions governing Section 2. The services under Section C are provided upon the specified terms and conditions. These services are available only when the Insured Person is on a Trip.

Section A - Medical Assistance:

1. Telephone Medical Advice
ISOS will arrange for the provision of medical advice to the Insured Persons over the telephone.
2. Medical Service Provider referral
ISOS will provide the Insured Persons with information about physicians, hospitals, clinics, dentists and dental clinics worldwide.

Section B - Medical Arrangements

1. Arrangement of Hospital Admission
ISOS 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
ISOS will monitor the Insured Person’s medical condition during hospitalisation.

Section C - Medical Emergencies

1. Arrangement of Hotel Accommodation Expenses
Refer to Section 2.6 and 2.7 of the Policy.
2. Arrangement of Emergency Medical Evacuation
Refer to Section 2.8 of the Policy.
3. Arrangement for Repatriation of Mortal Remains
Refer to Section 2.9 of the Policy.

Section D - Pre-Trip and Assistance during the Trip

ISOS will provide information concerning the following for foreign countries worldwide:

1. Visa requirements;
2. Inoculation requirements;
3. Weather and temperatures;
4. Exchange rates of major currencies against the Singapore dollar;
5. Embassy Referral;
6. Interpreter Referral;
7. Legal Referral;
8. Lost Luggage Assistance;
9. Lost Passport Assistance;

OPTIONAL BENEFITS (available for Annual Plan only)

Section 5 - Home Contents Coverage

The Company will by payment or at its option by reinstatement or repair, indemnify the Insured Person for up to the Home Contents Coverage Benefit stipulated under Table of Benefits Page attached to this Policy in the event of accidental physical loss of or damage to contents including valuables within the residence of the Insured Person in Singapore that was left vacant because of the Insured Person’s Trip, caused by fire during the Trip but only after the Insured Person(s) has legally left Singapore.

Provided that:

No benefits will be paid for:

1. Wear, tear, depreciation, the process of cleaning, dyeing, repairing or restoring any article, the action of light or atmospheric conditions, moth, insects, vermin or other gradually operating cause.
2. any loss or damage occasioned through the wilful act of the Insured Person or with the connivance of the Insured Person.
3. loss (whether temporary or permanent) of the Insured Persons’ property or any part thereof by reason of confiscation, requisition, detention or legal or illegal occupation of such property or of any premises, vehicle or thing containing the same by any government authorities.
4. electrical or mechanical breakdown.
5. consequential loss or damage of any kind.
6. motor vehicles, boats, livestock, bicycles and any equipment or accessories relating thereto.
7. loss or damage insured under any other insurance policy, or reimbursed by any other party.

Section 6 - Pet’s Care Coverage

The Company will pay :

1. the additional expenses which the Insured Person becomes legally liable to pay in respect of where the Insured Person has placed his / her cat or dog in a kernel or pet hotel for the duration of the Trip and the Insured Person is unable to collect them on the day previously agreed with the kernel or pet hotel, and this is solely due to the Insured Person’s final inbound flight, rail, coach or sea vessel to Singapore being delayed.
2. Accidental death to the Insured Person’s cat or dog arising from fire within the kernel or pet hotel where the Insured Person has placed his / her cat or dog.

Provided that:

- a. The Insured shall provide:
 - i. Written confirmation from the Common Carrier advising the reason for the delay and the scheduled and actual departure time of the carrier.
 - ii. Written confirmation from the kernel / pet hotel operator advising the original pick-up date and the actual pick-up date.
- b. The Company is not liable for any payment under this Section where the reason for the delay was made known or was informed publicly prior to the purchase of this Policy.
- c. The Company’s liability under this Section of the Policy is for up to S\$250.

Section 7 - Golf Equipment Coverage

The Company will indemnify the Insured Person for loss of or damage to Golf Equipment taken along for the Trip or purchased by the Insured Person during the Trip provided that the loss or damage was sustained whilst in transit, or occurred in a golf course or driving range overseas.

Provided that:

1. If as a result of the damage, the Golf Equipment is proven to be beyond reasonable economical repair, the claim will be dealt with under this Policy as if the article had been lost.
2. The Company may make payment or at its option by reinstatement or repair the Golf Equipment subject to due allowance for wear and tear and depreciation.
3. The Company shall not be liable to pay for:
 - a. loss or damage due to wear and tear or damage due to any process of repair or being worked upon resulting therefrom.
 - b. loss of or damage to golf balls and clubs whilst actually in the course of play or practice.
 - c. loss of or damage arising from wilful act or negligence of the Insured Person.

- d. loss of or damage arising from confiscation or retention by customs or other officials.
 - e. loss or damage covered by any other policy
4. Insured Person may not claim under Policy Sections 3.7, 3.8 or this Section 7 of the Policy for the same event.
 5. The Company's liability under this Section of the Policy is for up to S\$500.

SPECIAL PROVISIONS

1. Except in respect of insured benefit under Section 3.1 and 3.2, the insurance coverage under other Sections shall commence when the Insured Person leaves his/her place of residence or office to the place of embarkation in Singapore (whichever is later) to commence the journey until the time of return to their place of residence or office in Singapore (whichever is earlier) on completion of the journey. In any event the journey insured is not to commence more than three (3) hours prior to booked departure time or cease more than three (3) hours after return to Singapore or arrival at final destination (whichever is earlier). However there are exceptions in respect of circumstances falling under Special Conditions (3) below or as otherwise specifically provided under the Automatic Extension or One-Way Travel provisos attaching to this Policy.
2. Unless pre-agreed and noted by endorsement, all Trips are deemed to have terminated on the date falling ninety (90) days after the commencement of the Trip.

SPECIAL CONDITIONS APPLICABLE TO ANNUAL PLAN

1. In the event the Insured is/are not satisfied with the Policy for any reason, it may be returned to the Company for annulment within fourteen (14) business days after receipt of the Policy by the Insured. The Policy would be deemed to have been received seven (7) business days after the Company's despatch of the Policy. Any premium billed will be refunded without interest. Where payment had been made via direct debit authorisation or credit card, the Company will refund by crediting such premium to the direct debit authorisation or credit card payment nominated account. This is applicable to Annual Plan only. In such event, this Policy shall be deemed to have been void from its inception and the Company shall not be liable for any insured benefits under this Policy.
2. Under Section 3.1 and 3.2 is effective immediately upon issuance of the Policy.
3. Insurance coverage under all other Sections shall commence each time the Insured Person leaves his/her place of residence or office to the place of embarkation in Singapore (whichever is later) to commence the journey until the time of return to their residence or office in Singapore (whichever is earlier) on completion of the journey. In any event the Trip insured is not to commence more than three (3) hours prior to the booked departure time or cease more than three (3) hours after return to Singapore or arrival at final destination (whichever is earlier). Exceptions to the above apply in respect of circumstances falling under (3) below or as otherwise specifically provided under the Automatic Extension proviso attaching to this Policy.
4. The One-Way Travel benefits is not applicable for any travel under the Annual Plan.
5. The Policy will be automatically renewed at each Anniversary Date; subject to the payment of premium on the Policy due on the Anniversary Date, until the expiry date unless written notice of termination has been received by the Company. No renewal document will be issued and the existing Policy is the evidence of valid cover, unless otherwise notified.
5. It is a condition precedent to this Policy that under the annual payment plan, the premium as stated in the Policy Schedule when due must be paid. Unless the Company had agreed and noted in the Policy Schedule, the premium shall be payable by direct debit against the Insured's Nominated Account

TERMINATION OF ANNUAL POLICY

1. If the Insured gives notice in writing to the Company to terminate this Policy, such termination shall be effective on the first day of the next billing cycle month after notice is received by the Company.
2. If the Company gives notice of termination by registered letter to the Insured at their address last known to The Company, such termination shall be effective from the first day of the next billing cycle month after seven (7) days following the date of such issued notice.
3. In the event that the Insured Person had commenced the Trip before receiving the Company's notice of termination, and notwithstanding the aforesaid Clause (2) of this Section above, the Company shall remain liable under the term of the Policy until the completion of the Insured Person's said trip. Provided that all other terms and conditions of the Policy remain unchanged.

GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS

The insurance under this Policy does not cover claims directly or indirectly occasioned by, happening through or in consequence of:

1. riot, civil commotion, war, invasion, act of foreign enemy, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection, military or usurped power or confiscation or nationalisation or requisition or destruction of or damage to property by or under the order of any government or public or local authority;
2. Terrorist Activity in Algeria, Libya, Egypt, Israel, Jordan, Lebanon, Syria, Iraq, Iran, Kuwait, Saudi Arabia, Yemen, Afghanistan and Sudan
3. hitch-hikers, activities as personnel in armed forces, police, fire fighting and civil defense services, occupation involving the handling of explosives, firearms, occupation involving work in confined spaces in vessels, tanks, tunnels, underground civil works, mines, rigs or ships, industrial workers using heavy machinery, woodworking related, or any occupation involving working at heights on scaffolds and/or stagings, occupation as offshore rig personnel, timber camp personnel, divers, jockeys, trucks and/or taxi drivers, air / sea crew other than for injury sustained whilst as a fare-paying passenger in an air/waterborne craft duly licensed for regular transportation of fare-paying passengers.
4. injury sustained whilst engaging in motorcycling or pillion riding.
5. injury directly or indirectly arising of high risk activities including but not limited to engaging in or taking part in:
 - a) mountaineering, potholing, parachuting, parasailing, bungee jumping, canyoning, hang-gliding, aviation, daring feats or stunts, driving or riding in any kind of race, scuba diving, skiing, tobogganing, sledging and ice skating, including ice hockey and any other sports requiring snow or ice for play;
 - b) a sport in a professional capacity or where an Insured Person would or could earn income or remuneration from engaging in such sports.
6. suicide, attempted suicide or intentional self-inflicted injury or participating in an illegal activity, violation or attempted violation of the law or resistance to arrest.
7. any venereal disease or Acquired Immuno-deficiency Syndrome ("AIDS"), AIDS related complex or infection by Human Immuno-deficiency Virus ("HIV").

8. pregnancy (including childbirth, miscarriage or abortion) and complications arising notwithstanding that such injury may have been accelerated or induced by Accident. However, this exclusion shall not apply to the cover provided for Pregnancy Related Sickness under Section 2.2.
9. Pre-existing Medical Condition.
10. Injury directly or indirectly resulting from or consequent upon:
 - a. drug addiction, influence of alcohol or wilful misuse of drugs or alcohol;
 - b. work or activities involving the handling of exposure to industrial disease, dangerous or contaminable substances bacteria or viruses.
11. illegal acts of an Insured Person or an Insured Person's executors or administrators, legal heirs or personal representatives.
12. ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel or nuclear weapons material.
13. Nuclear, Chemical and Biological Terrorism.
14. in respect of any property more specifically insured against any claim which but for the existence of this insurance would be recoverable under any other insurance.

GENERAL CONDITIONS

1. **Consideration**

This Policy is issued in consideration of the statements contained in the application form and the Policy Schedule and the Insured's payment of premium when due.

The Insured shall give immediate notice to the Company of any change in name, residence, occupation or essential particulars relating to this insurance in respect of the Insured and /or the Insured Person(s).

2. **Terms and Conditions**

Payment of any Benefit under this Policy is subject to the Definitions, Exclusions and all other Terms and Conditions pertinent to the Benefit.

3. **Other Insurance**

If there shall be in existence any other insurance, The Company will only be liable for the excess of the amount recoverable from such other insurance. This only applies to the indemnity sections of the Policy.

4. **Entire Contract - Changes**

The Policy, including the application form, the Policy Schedule, the endorsements and amendments, if any, will constitute the entire contract between the parties. No change in the Policy will be valid unless approved by the Company and evidenced by endorsements or amendments.

5. **Interpretation**

This Policy together with any Application Form and the endorsements and amendments, if any, shall be read together as one contract and word or expression to which a specific meaning has been attached shall bear that specific meaning wherever it may appear.

6. **Duties of the Insured / Insured Person**

The due observance and fulfilment of the Terms and Conditions of this Policy in so far as they relate to anything to be done or complied with by the Insured / Insured Person shall be conditions precedent to any liability of The Company to make any payment under this Policy.

7. **Reasonable Care**

The Insured / Insured Person must exercise reasonable care to prevent accidents, injury, illness, loss or damage.

8. **Misstatement or Fraud**

Any false statement made by the Insured in the Proposal or concerning any claim shall result in the Company's right to repudiate liability under the Policy.

9. **Age Limits**

The insurance afforded under this Policy shall only apply to persons above 6 months old.

Child(ren) below 12 years old must be accompanied by a parent/guardian. Child(ren) who is/are travelling without their parent/guardian can insure under this Policy provided that they are above twelve(12) years of age. In this event, they would be charged premium at Adult Insured Person's rate but remain covered for Child's benefits. When an Insured Person is above eighteen (18) years but below 23 years old, is a dependant and in full-time study and is insured under "Insured and Child(ren)" or "Family" Plan, the person would be considered a Child and be insured for Child's benefits.

The age limit shall apply on the effective date of insurance of the Policy and throughout the Period of Insurance. If the age of any Insured Person has been misstated all amounts payable under this Policy shall be such as the premium paid would have been purchased at the correct age. In the event the age of the Insured Person has been misstated, and if according to the correct age of the Insured Person, the coverage provided by the Policy would not have become effective, or would have ceased prior to the acceptance of such premium or premiums then the liability of The Company during the period the person insured is not eligible for coverage shall not attach.

10. **Notice of Claim**

Written notice of claim must be given to the Company immediately or within thirty (30) days after the occurrence of any event likely to give rise to a claim.

Failure to give notice in the time prescribed shall not invalidate a claim if it can be shown to The Company's satisfaction that notice had been provided as soon as was reasonably practicable, and in any event within sixty (60) days from the date of such incident.

Notice is deemed given by or on behalf of the claimant to the Company with information sufficient to identify the Insured Person.

11. **Claim Forms**

The Company, upon receiving a notice of claim, will furnish to the claimant such form as it usually provides for filing proof of claim.

Medical reports, and all proof of loss as required by the Company shall be furnished at the expenses of the claimant and shall be in such form and of such nature as the Company may prescribe.

The Company shall in the event of the death of the Insured Person be entitled to have a post-mortem examination carried out at its own expense except when such examination is prohibited by law.

12. **Proof of Claim**

Written proof in support of a claim must be furnished to the Company within thirty (30) days from the receipt of the claim form provided by the Company as above. Failure to furnish such proof within the time required shall not invalidate any claim if it was not reasonably possible to give proof within such time, provided such proof is furnished as soon as is reasonably possible, and in no event later than one hundred and eighty (180) days from the time such proof is otherwise required.

All claims must be submitted with comprehensive supporting information including:

- a. ***In the case of Personal Accident***
Hospital and Medical Practitioner reports giving details of the nature of the loss and extent and period of disability, police reports where relevant and if death shall have resulted, a copy of the death certificate and the relevant coroner's report.
 - b. ***In the case of Medical and Other Expenses and Trip Cancellations or Trip Curtailment.***
All receipts, tickets coupons, contracts or agreements relevant to the claim and if the claim be in respect of medical treatments, a full physician's report stipulating (a) the diagnosis of the condition treated (b) the date the disability commenced in the Medical Practitioner's opinion and (c) the Medical Practitioner's summary of the course of treatment including medicines prescribed and services rendered.
 - c. ***In the case of Loss of or Damage to Baggage, Baggage Delay and Travel Delay***
All details including receipts as to date of purchase, price, model and type of items lost or damaged, a copy of immediate notification to the Common Carrier and his acknowledgement when loss or damage has occurred in transit and certified copy of immediate police report when loss or damage has occurred in other circumstances. Reports to these authorities must be made within twenty-four (24) hours of the occurrence.
 - d. In the case of Travel Delay, Overbooked Travel or Missed Connection. Documentation satisfactory to the Company that the cause of delay, overbooking or missed connection was officially recognised together with a clear statement of its nature.
13. ***Physical Examination***
The Company at its own expenses shall have the right and opportunity to examine the Insured Person when and so often as it may reasonably require pending the outcome of a claim under this Policy.
 14. ***Payment of Benefit***
All benefits of this Policy are payable to the Insured Person entitled to the same under the terms of this Policy or to the Estate of such person on his/her death.
 15. ***Subrogation***
The Company has the right to proceed at its own expense in the name of the Insured Person against third parties who may be responsible for an occurrence giving rise to a claim under this Policy.
 16. ***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 requirements of this Policy, nor shall such action be brought at all unless commenced within one hundred and eighty (180) days from the expiration of thirty (30) days within which filing of proof of claim is required.

17. ***Arbitration***
Any difference arising out of this Policy, shall be referred to the decision of an arbitrator to be appointed by both parties or if they cannot agree upon a single arbitrator, to the decision of two arbitrators, one to be appointed in writing by each party, and in case of disagreement between the arbitrators, to the decision of an umpire who shall have been appointed in writing by the arbitrators before entering on the reference and an award shall be a condition precedent to any liability of the Company or right of action against the Company. If the Company shall disclaim liability to an Insured Person for any claim hereunder and such claim shall not within twelve (12) months from the date of such disclaimer have been referred to arbitration under the provisions herein contained, then the claim shall for all purposes be deemed to have been abandoned and shall not thereafter be recoverable hereunder.
18. ***Currency***
Premiums and benefits payable under this Policy shall be in Singapore currency (S\$).
19. ***Interest***
No benefit payable under this Policy shall carry interest.
20. ***Prohibition on Trust or Assignment***
This Policy is not assignable and the Insured warrants that the Policy is not subject to a trust and will not be made subject to a lien or charge and that the Policy will be kept in the Insured's possession throughout the currency of the Policy.
21. ***Refund of Premium***
If the Insured cancels this insurance before the commencement date of the Period of Insurance, The Company will refund the premium less an administrative charge of S\$25, provided a claim has not arisen. No refund of premium is allowed once the Insured Person commences on the insured Trip.
22. ***Jurisdiction***
The indemnity provided under this Policy shall apply in respect of judgments which are in the first instance delivered by or obtained from a court of competent jurisdiction within the territory of Singapore only.
23. ***Automatic Extension***
This insurance will be automatically extended for a maximum period of ten (10) days in the event that the Insured Persons are unavoidably delayed in the course of their scheduled itinerary which was stipulated prior to departure.
24. ***Contracts (Rights of Third Parties) Act Cap. 53B***
It is hereby noted that a person who is not a party to this policy contract shall have no right under the Contracts (Rights of Third Parties) Act Cap. 53B to enforce any of its terms.

**TravelSurance Plus
Table of Benefits**

SECTION 1 - PERSONAL ACCIDENT BENEFITS	Classic	Superior
Personal Accident Adult (70 years old or below) Adult (above 70 years old) Child	S\$150,000 S\$50,000 S\$30,000	S\$250,000 S\$125,000 S\$50,000
Double Indemnity for public conveyance Adult (70 years old or below) Adult (above 70 years old) Child	No double indemnity	S\$500,000 S\$250,000 S\$100,000
SECTION 2 - MEDICAL & RELATED EXPENSES BENEFITS	Classic	Superior
Overseas Medical Expenses Adult (70 years old or below) Adult (above 70 years old) Child	up to S\$250,000 plus up to S\$10,000 pregnancy-related sickness plus up to S\$100 TCM treatment S\$100,000 S\$200,000	S\$500,000 plus up to S\$10,000 pregnancy-related sickness plus S\$300 TCM treatment S\$250,000 S\$250,000
Overseas Hospital Confinement	S\$100 per day Up to S\$10,000	S\$200 per day Up to S\$30,000
Post-Travel Medical Expenses Adult (70 years old or below) Adult (above 70 years old) Child	Up to S\$12,500 S\$10,000 S\$10,000	Up to S\$25,000 S\$10,000 S\$10,000
Compassionate Overseas Visit	Up to S\$3,000	Up to S\$5,000
Return of Child / Children	Up to S\$3,000	Up to S\$5,000
Emergency Medical Evacuation & Repatriation	Actual Cost	Actual Cost
Repatriation of Mortal Remains or Funeral Expenses	Up to S\$30,000 (to S'pore) OR S\$15,000 (to Home Country)	Up to Actual Cost (to S'pore) OR up to S\$30,000 (to Home Country)
SECTION 3 - TRAVEL INCONVENIENCE BENEFITS	Classic	Superior
Trip Cancellation	Up to S\$5,000	Up to S\$10,000
Trip Postponement	Up to S\$500	Up to S\$1,000
Trip Curtailment (due to hospitalisation)	Up to S\$5,000	Up to S\$10,000
Travel Delay	S\$100 per 8-hour delay Up to S\$1,000	S\$100 per 8-hour delay Up to S\$1,000
Missed Travel Connection	S\$200	S\$200
Overbooked Flight	S\$200	S\$200
Baggage and Personal Effects	Up to S\$3,000 Limit of S\$1,000 for laptop, S\$500 per article	Up to S\$5,000 Limit of S\$1,000 for laptop, S\$500 per article
Baggage delay (whilst overseas)	S\$200 per 8-hour delay Up to S\$1,000	S\$200 per 8-hour delay Up to S\$1,000
Personal Money & Travel Documents	Up to S\$3,000 Limit S\$300 for personal money	Up to S\$5,000 Limit S\$300 for personal money
Aircraft Hijack	S\$250 for each full 24 hours Up to S\$3,000	S\$250 for each full 24 hours Up to S\$5,000
Personal Liability	S\$500,000	S\$1,000,000
SECTION 4 - LIFESTYLE BENEFITS	Classic	Superior
Rental Vehicle Excess	S\$250	S\$500
24-hr Worldwide Medical Emergency and Travel Assistance Hotline	Available	Available
Optional Benefits (applies to Annual Plan only)	Classic	Superior
SECTION 5 - Home Contents Coverage	up to S\$5,000	up to S\$7,500
SECTION 6 - Pet's Care Coverage	up to S\$250	up to S\$250
SECTION 7 - Golf Equipment Coverage	up to S\$500	up to S\$500

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