

Policy

ALLIANZ TRAVEL CARE (DOMESTIC)

SCHEDULE OF BENEFITS – DOMESTIC

		Plan	Adult	Senior Citizen	Child	Family
			Adult Annual		Child Annual	
Benefits		(RM)				
(A) Personal Accident Benefits						
Section 1	1	Death due to Accident (Principal Sum Insured)	250,000	125,000	750,000	750,000
	2	Permanent Disablement due to Accident (up to)				
	3	Funeral Expenses (up to)	5,000	5,000	9,000	
(B) Medical Related Benefits (Due to Accidental causes only)						
Section 2	1	Medical Expenses (up to)	25,000	12,500	75,000	
			Alternative Medicine subject to a sub-limit of RM500			
Section 3	1	Emergency Medical Evacuation (up to)	10,000,000	10,000,000	10,000,000	10,000,000
	2	Emergency Medical Repatriation (up to)				
	3	Mortal Remains Repatriation (up to)				
	4	Follow up Treatment (up to) (max. 45 days)	6,000	3,000	20,000	
			Alternative Medicine subject to a sub-limit of RM500			
	5	Hospital Income (up to)	100 per day up to 3,000	50 per day up to 1,500	260 per day up to 8,000	
	6	Compassionate Visitation (due to Injury or Death of Insured Person) (up to)	2,000	2,000	4,000	
7	Despatch of Medicine (up to)	2,000	2,000	2,000		
(C) Travel Inconvenience Benefits						
Section 4	1	Deposit or Trip Cancellation (up to)	1,000	1,000	2,000	
Section 5	1	Travel Curtailment (up to)	1,000	1,000	2,000	
Section 6	1	Luggage Delay (up to)	100	100	200	
			(Min 6 hours)			
Section 7	1	Travel Delay	100 per 6 hours up to 1,500	100 per 6 hours up to 1,500	200 per 6 hours up to 2,500	
Section 8	1	Terrorism	Covered			
(D) Additional Sports – Optional Rider (With Additional Premium)						
Section 9 (A)	1	Sports Activity	Available	Not Available	Available	Available
Section 9 (B)	1	Damage to Sports Equipment (up to)	300		300	500
(E) 24/7 Domestic Travel Assistance			Included			

Note: Under family plan, the payment per individual will be based on the limit under an adult plan and/or child plan, as the case may be subject to the maximum limit as stated in the Schedule of Benefits.

ALLIANZ TRAVEL CARE (DOMESTIC)

In consideration of the premium received, **Allianz General Insurance Company (Malaysia) Berhad (Company No. 200601015674 (735426-V))** ("**Company**") will indemnify **You** for any covered events happening during the **Period of Insurance** as specified in the Schedule of Benefits, subject to the terms and conditions herein or endorsed hereon.

PART 1 – BENEFITS

The following benefits are payable up to the maximum applicable Principal Sum Insured/relevant benefits amount specified in the Schedule of Benefits according to **Your** plan type, subject to the terms and conditions of this policy.

For the avoidance of doubt, the maximum limit per individual under a family plan shall be based on the limit under the adult plan and/or child plan, as the case may be, subject to the maximum aggregate limit for the relevant benefit under the family plan as stated in the Schedule of Benefits.

(A) PERSONAL ACCIDENT BENEFITS

In respect of the Benefits payable under this Section 1.1 and 1.2, if there is more than one (1) **Insured Person** covered, **Our** maximum aggregate liability in respect of all **Insured Persons** travelling in a **Common Carrier** or public transport service shall not exceed the limit of RM50 million or the aggregate amount of compensation payable in respect of such **Insured Persons**, whichever is the lesser.

SECTION 1.1 – DEATH DUE TO ACCIDENT

(a) In the event of an **Accident** while on a **Journey/Trip** during the **Period of Insurance** causing an **Injury** resulting in **Your** death within three hundred sixty-five (365) days from the date of such **Accident**, **We** will pay the death benefit according to the percentage of the Principal Sum Insured as stated in the Scale of Benefits.

SECTION 1.2 – PERMANENT DISABLEMENT DUE TO ACCIDENT

(a) In the event of an **Accident** while on a **Journey/Trip** during the **Period of Insurance** causing **Injury** resulting in Permanent Disablement (verified by a **Medical Practitioner**) set out in the Scale of Benefits within three hundred sixty five (365) days from the date of such **Accident**, **We** will pay the Permanent Disablement benefit according to the percentage of the Principal Sum Insured for the relevant type of Permanent Disablement as stated in the Scale of Benefits.

Scale of Benefit

(i)	Death due to Accident	100% of the Principal Sum Insured
(ii)	Permanent Disablement due to Accident	100% of the Principal Sum Insured
	Total Paralysis from neck down	
	Loss of two limbs (from ankle or wrist down)	
	Permanent loss of sight of both (eyes or hearing)	50% of the Principal Sum
	Loss of sight of one eye/hearing in one ear and one limb	
	Loss of sight of one eye or hearing in one ear	
Loss of one limb (from ankle or wrist down)	50% of the Principal Sum	
Loss of speech		

- (i) **We** will not pay more than one (1) of the benefits in the event the **Injury** suffered by **You** in a single **Accident** resulting in more than one (1) loss described in the Scale of Benefits and only the greatest percentage of the Principal Sum Insured will be payable.
- (ii) The aggregate of all percentages payable under the Scale of Benefits in respect of all **Accidents** during the **Period of Insurance** shall not exceed one hundred per cent (100%) of the Principal Sum Insured.
- (iii) In the event one hundred per cent (100%) of the Principal Sum Insured is paid during the **Period of Insurance**, all coverage for the relevant **Insured Person** under this policy shall immediately cease to be in force and upon such payment, the **Company's** obligation under this policy shall be fully discharged. Notwithstanding this, coverage for the remaining **Insured Person(s)** named in the schedule/eSchedule, where applicable, shall remain intact.

SECTION 1.3 – FUNERAL EXPENSES

If **You** suffer death due to an **Accident** during the **Journey/Trip**, **We** will pay for expenses incurred for funeral related matters.

(B) MEDICAL RELATED BENEFITS

SECTION 2 – MEDICAL EXPENSES

If **You** suffer death or **Injury** during the **Journey/Trip**, **We** will reimburse the reasonable fees or charges or expenses incurred for:-

- (a) Medical, surgical, hospital or nursing home charges;
- (b) Emergency dental treatment or surgery when required due to an **Injury** sustained in an **Accident** which the treating dentist certifies in writing;
- (c) Ambulance fees;
- (d) Any charges for **Alternative Medicine** treatment, subject to a sublimit of RM500; and
- (e) Either the additional cost to change **Your** return ticket to a different date or the cost to purchase a new return ticket if the **Common Carrier** is unable to accommodate a change in the initial return ticket, provided that:-
 - (i) **You** are confined to a hospital on the scheduled return date;
 - (ii) the treating **Medical Practitioner** certifies in writing that **You** are unfit to travel on the scheduled return date; and
 - (iii) the travel class of the new return ticket purchased is no superior the travel class of the original return ticket.

SECTION 3 – OTHER MEDICAL EXPENSES

Provisions applicable to Section 3.1, 3.2 and 3.3

- (a) **We** have arranged for services to be provided through the **Our Authorised Representative** to assist **You** in an emergency while **You** are on **Your Journey/Trip**. To activate the services, **You** may contact **Our Authorised Representative's** twenty-four (24) Hour Emergency Telephone Number by reverse charge call.
- (b) All decisions as to the means of transportation and the final destination will be made by **Us** or **Our Authorised Representative**, in consultation with **Us**, and will be based solely upon medical necessity after having assessed all facts and circumstances which **We** are aware of at the relevant time.
- (c) The maximum limit payable under Section 3.1 Emergency Medical Evacuation, 3.2 Emergency Medical Repatriation and 3.3 Mortal Remains Repatriation shall be aggregated and shall not exceed the maximum stated in the Schedule of Benefits.

SECTION 3.1 – EMERGENCY MEDICAL EVACUATION

- (a) In the event **You** are admitted to a hospital for a **Serious Medical Condition** due to an **Accident** but the local medical facility is inadequate, **Our Authorised Representative** will arrange for medical evacuation under constant medical supervision to the nearest adequate medical facility.

SECTION 3.2 – EMERGENCY MEDICAL REPATRIATION

- (a) In the event **You** are injured, and **Our Authorised Representative**, in consultation with the local attending **Medical Practitioner**, determines that treatment of **Your Serious Medical Condition** should continue at a medical facility nearer to **Home**, upon the stabilization of **Your** condition, **Our Authorised Representative** will arrange for the repatriation under constant medical supervision.

SECTION 3.3 – MORTAL REMAINS REPATRIATION

- (a) In the event of **Your** death due to **Accident** during the **Journey/Trip**, **Our Authorised Representative** will arrange for burial or cremation in the locality where the death occurs including the reasonable cost of transportation of the body or ashes back **Home**.

SECTION 3.4 – FOLLOW UP TREATMENT

- (a) In the event **You** require necessary medical follow-up and incur medical and hospital expenses within forty-five (45) days after **Your** return **Home**, such expenses having resulted from an **Accident** sustained during **Your Journey/Trip**, **We** will pay the reimbursement for follow-up medical expenses incurred (including ambulance fees and nursing home charges. **Alternative Medicine** treatment, subject to a sublimit of RM500) following the **Insured Person's** return **Home** from the **Journey/Trip**.

SECTION 3.5 – HOSPITAL INCOME

- (a) In the event **You** are confined to hospital as an inpatient due to an **Accident** during the **Journey/Trip**, **We** will pay for each complete twenty four (24) hours of hospitalisation during the period of the **Journey/Trip**.

SECTION 3.6 – COMPASSIONATE VISITATION (DUE TO INJURY OR DEATH OF INSURED PERSON)

- (a) In the event **You** are hospitalized due to an **Accident** whilst on the **Journey/Trip**, **We** will pay for reasonable additional accommodation and travelling expenses incurred for one (1) family member or friend to travel to or travel with **You** and to remain with **You** at the medical advice of the treating **Medical Practitioner**;
- (b) In the event of **Your** death due to an **Accident** whilst on the **Journey/Trip** and no adult member of **Your** family is with **You**, **We** will pay the reimbursement for reasonable additional accommodation and travelling expenses incurred for one (1) family member or friend to assist in the burial or cremation arrangements in the locality where death occurs.

This benefit under this Section is only payable for one claim made in the event of death or **Injury** to **You**, but not both, for any one event.

SECTION 3.7 – DESPATCH OF MEDICATION

- (a) In the event that despatch of the necessary medication is not available locally in cases of emergency and when local laws, rules and regulations allow such a despatch, **We** will pay the cost of despatching by **Our Authorised Representative** per **Journey/Trip**.
- (b) **We** will not pay for the cost of the medicine.

(C) TRAVEL INCONVENIENCE BENEFITS

SECTION 4 – DEPOSIT OR TRIP CANCELLATION

- (a) **We** will pay for expenditure paid which are non-recoverable and/or the expenditure contracted to be paid which **You** are accountable/liable for in relation to **Your** accommodation, public transport charges and excursion charges if the **Journey/Trip** is cancelled in the event of the following:-
- Your** death or death of any of **Your Immediate Family Member** provided such death occurs within sixty (60) days prior to **Your** original scheduled departure date;
 - Your** confinement or confinement of any of **Your Immediate Family Member** in a hospital on the scheduled departure date arising from **Injury** or **Serious Illness**;
 - Injury** or **Illness** sustained by **You** or **Your Immediate Family Member**, resulting in the treating **Medical Practitioner** certifying in writing that **You** or **Your Immediate Family Member** is unfit to travel on the scheduled departure date;
 - Serious damage to **Your Home** caused by fire, flood or similar **Natural Disaster** which requires **Your** presence on the scheduled departure date;
 - Natural Disaster** at the scheduled destination which prevents **You** from commencing the **Journey/Trip**, provided that the **Natural Disaster** occurred not more than one (1) month prior to **Your** scheduled departure date.
- (b) **We** will not pay:-
- The benefit under this Section if this Policy is purchased and payment of premium is made less than two (2) weeks prior to **Your** departure for **Your Journey/Trip**; or
 - The benefit under this Section if **You** purchased this Policy and made the payment of the premium after the commencement or announcement of the **Natural Disaster** or after the occurrence of any of the other incidents under Section 4(a).

SECTION 5 – TRAVEL CURTAILMENT

- (a) In the event of travel curtailment by **You** during the **Journey/Trip** due to the events set out in Section 5(b) below, thereby requiring **You** to return to the **Home** before the completion of **Your Journey/Trip**, **We** will pay:-
- The unrecoverable paid charges or expenses of the unused and non-recoverable part of **Your Journey/Trip**, which shall be computed in proportion to the unused days paid or contracted to be paid by **You**;
 - Either the additional cost to change **Your** return ticket to a different date or the cost to purchase a new return ticket which is no superior than the original class if the **Common Carrier** is unable to accommodate a change in the initial return ticket.
- (b) The above benefit is payable in the event of:-
- Your** death or confinement to a hospital during the **Journey/Trip** as a result of **Injury** or **Serious Illness**, notwithstanding that **You** were unable to return **Home** before completion of the **Journey/Trip** due to **Your** hospitalization up until or beyond the scheduled completion of the **Journey/Trip**;
 - Unexpected death of any of **Your Immediate Family Member**;
 - Illness** or **Accident** suffered by **Your Immediate Family Member** which requires admittance into hospital for more than forty-eight (48) hours;
 - Serious damage to **Your Home** caused by fire, flood or similar **Natural Disaster** which requires **Your** presence;
 - Natural Disaster** at **Your** scheduled destination which prevents **You** from continuing **Your** scheduled **Journey/Trip**.
- (c) **We** will not pay:-
- The paid charges or expenses of the unused return ticket if **We** pay the cost of change of **Your** return ticket to a different date or the cost to purchase a new return ticket;

- (ii) For any losses under this Section if the **Journey/Trip** commences after the commencement or announcement of the **Natural Disaster** or after the occurrence of any of the other incidents under Section 5(b).

SECTION 6 – LUGGAGE DELAY

- (a) In the event that **Your** checked-in luggage is delayed, mishandled, misdirected or misplaced for at least six (6) hours from the time of arrival at a scheduled destination, **We** will pay for the purchase of necessary and reasonable essential items.
- (b) **We** will not pay:-
 - (i) If **You** do not report to the **Common Carrier** within twenty-four (24) hours of discovery that **Your** luggage is late or lost;
 - (ii) for any purchases made after **You** have received **Your** luggage the **Common Carrier**.

SECTION 7 – TRAVEL DELAY

- (a) In the event that **Your Common Carrier(s)** is delayed/rescheduled/cancelled for at least six (6) hours based on the time specified in the confirmed booking of the **Common Carrier**, **We** will pay for each full consecutive six (6) hour delay.
- (b) The delay must be verified in writing from the **Common Carrier** or their handling agents showing the scheduled departure time and the actual departure time of the **Common Carrier**.
- (c) **We** will not pay:-
 - (i) For any delay, rescheduling or **cancellation** arising from a strike or industrial action which began or was announced before the issue date of the **Insured Person's** policy or began or was announced on the date the **Insured Person's** travel tickets or confirmation of booking was issued.

SECTION 8 – TERRORISM COVER

This policy is extended to cover **You** in respect of **Injury**, death and permanent disablement which may be sustained through **Terrorism** provided that there is no liability when such act and/or **Acts of Terrorism** involve utilisation of nuclear, chemical or biological weapons of mass destruction howsoever these may be distributed or combined.

For the purpose of this Section:

- (a) **Terrorism/Act of Terrorism** means an act or acts, of any person, or group(s) of person, committed for political, religious, ideological or similar purposes with the intention to influence any government and/or to put the public, or any section of the public, in fear. **Terrorism** can include, but not be limited to, the actual use of force or violence and/or the threat of such use. Furthermore the perpetrators of **Terrorism** can either be acting alone or on behalf of or in connection with any organisation(s) or governments(s).
- (b) Utilisation of nuclear weapons of mass destruction means the use of any explosive nuclear weapon or device or the emission, discharge, dispersal, release or escape of fissile material emitting a level of radioactivity capable of causing incapacitating disablement or death amongst people or animals.
- (c) Utilisation of chemical weapons of mass destruction means the emission, discharge, dispersal, release or escape of any solid, liquid or gaseous chemical compound which, when suitably distributed, is capable of causing incapacitating disablement or death amongst people or animals.
- (d) Utilisation of biological weapons of mass destruction means the emission, discharge, dispersal, release or escape of any pathogenic (disease producing) micro-organism(s) and/or biologically produced toxin(s) (including genetically modified organisms and chemically synthesised toxins) which are capable of causing incapacitating disablement or death amongst people or animals.

(D) ADDITIONAL SPORTS (OPTIONAL RIDER)

This policy is extended to cover **You** in respect of all benefits stated in the Schedule of Benefits in the event **You** suffer loss which can be claimed during the activities listed below if additional premium is paid.

SECTION 9 (A) – SPORT ACTIVITY (OPTIONAL RIDER 1)

Sport Activity

- (a) **We** will pay compensation under the relevant benefit(s) of this policy if the loss suffered by **You** is due directly to the following sports activities undertaken during a **Journey/Trip**:-
 - (i) Water Sports – rafting, canoeing and kayaking involving white water (class 4 and below), rowing, yachting, parasailing, surfing, windsurfing (boardsailing), jet skiing, scuba diving and underwater activities involving the use of any artificial breathing apparatus (up to fifty (50) meters' water depth).
 - (ii) Others – mountaineering (not involving the use of ropes and other climbing equipments) up to 4,500 metres or the base camp whichever is lower, sky diving, hang gliding, bungee jumping, zorb ball riding, sphereing, orbiting, hot air balloon and all-terrain vehicle (ATV) .
- (b) **We** will not pay if **You** do not exercise reasonable care and fail to comply with all the safety requirements when undertaking the relevant sports activity.

SECTION 9 (B) – DAMAGE TO SPORTS EQUIPMENT

- (a) In the event of any damage to **Your** Sports Equipment utilised for the Sports Activity listed under Section 7 (A), **We** will reimburse **You** for any reasonable costs incurred for the replacement or repair of the Sports Equipment, per incident per **Journey/Trip**.
- (b) **We** will not pay for:-
 - (i) Loss or damage due to wear and tear, or inherent defects;
 - (ii) Loss or damage arising from theft from an unattended vehicle unless it was completely out of sight in the trunk of the vehicle which was fully locked and its windows closed and there was visible evidence of forced entry;
 - (iii) Damage that is covered by a manufacturer's guarantee;
 - (iv) Loss or damage in respect of which **You** would have received replacement or compensation either from the **Common Carrier** or others.

PART 2 – GENERAL CONDITIONS

1. Condition Precedent to Liability

The due observance and fulfillment of the terms and conditions of this policy insofar as they relate to anything to be done or not to be done by **You** or **Your** legal personal representative shall be conditions precedent to any of **Our** liability to make any payment under this policy.

2. Interpretation

This policy, including the application, certificate, schedule/eSchedule, Endorsement, and amendments, if any shall be read together as one contract and any word or expression to which a specific meaning has been attached shall, unless the contract otherwise requires, bear that specific meaning where it may appear.

3. The payment of claims is subject to and conditional upon **You** observing the following:

- (a) Taking ordinary and proper care to safeguard against **Accident, Injury**, loss or damage, as if the insurance was not in force;

- (b) Reporting in writing to **Us** within thirty (30) days upon return to **Your Home**, full details of any **Accident, Injury**, loss or damage which may result in a claim under this policy. All certificates, information and evidence required by **Us** shall be provided at **Your** or **Your** legal representative's expense;
- (c) Not admitting liability or making an offer or promise of payment due to alleged liability without **Our** written consent.

4. Alterations

The **Company** reserves the right to amend the terms and conditions of this policy and such alteration to this policy shall only be valid if authorised in writing by the **Company** and endorsed hereon. Any alteration shall take effect from the next renewal of this policy.

The **Company** shall give thirty (30) days prior written notice to the **Insured Person** according to the last recorded address before any alteration is to take effect.

5. Automatic Renewal (For annual policy only)

In the event **You** opt for automatic renewal, subject to the terms and conditions of this policy and payment of premium due, this policy shall be renewed on each policy anniversary upon expiry unless this policy is terminated pursuant to Condition 6 (Termination).

Notwithstanding the renewal of this policy on each policy anniversary, in the event of any change in the particulars provided for underwriting this policy or in the event of any claim arising in the period before this policy is renewed, the **Company** shall have the right to revise the terms of this policy, adjust the premium, decline renewal or terminate this policy.

6. Termination

- (a) Where this is an annual policy, the policy may be terminated in the following manner:

(i) Termination by the Policyholder

If the policyholder has given notice to **Us** to terminate this policy, such termination shall become effective on the date the notice is received or on the date specified in such notice whichever is the later. In the event premium has been paid for any period beyond the date of termination of this policy, **Our** short period rates shall apply provided that no claim has been made during the **Period of Insurance** then subsisting.

The following scale of short period rates shall apply:

Period of Insurance (Not Exceeding)	Percentage of Annual Premium to be Charged
Two (2) Months or less	40%
Three (3) Months	50%
Four (4) Months	60%
Five (5) Months	70%
Six (6) Months	75%
Over Six (6) Months	100%

(ii) Termination by Us

In the event **We** terminate this policy by order of regulatory or government authorities, **We** shall give notice of termination by registered post to the policyholder at the policyholder's last known address. Such termination shall become effective thirty (30) days following the date of such notice. In the event premium has been paid for any period beyond the date of termination of this policy, the prorated premium shall be refunded to the policyholder provided that no claim has been made during the **Period of Insurance** then subsisting and such refund is not prohibited by any law.

- (b) Where this policy is not an annual policy, the policyholder may terminate this policy by giving notice to **Us** to terminate the same provided always that the **Period of Insurance** has not commenced when the date of termination of this policy is effective. Such termination shall become effective on the date the notice is received or on the date specified in such notice whichever is the later. In the event premium has been paid for any period beyond the date of termination, the policyholder shall be entitled to a refund of the premium paid for this policy.
- (c) The following provision on automatic termination of the policy shall apply accordingly to both annual policies and non-annual policies, as the case may be.

(d) Automatic Termination

This policy shall automatically terminate at midnight (standard Malaysian time) on the last day of the **Period of Insurance**. Notwithstanding this, coverage afforded to **You** under this policy shall cease to operate in the following circumstances:

- (i) When **You** are under the child plan and have attained the age of eighteen (18) years, or upon the expiry of the child annual policy; or
- (ii) When **You** are under the adult plan and have attained the age of seventy-one (71) years, or upon the expiry of the adult annual policy; or
- (iii) Upon **Your** death.

7. Duty of Disclosure

- (a) Consumer Insurance Contract
Pursuant to Paragraph 5 of Schedule 9 of the Financial Services Act 2013, if the policyholder had applied for this Insurance wholly for purposes unrelated to the policyholder's trade, business or profession, the policyholder had a duty to take reasonable care not to make a misrepresentation in answering the questions in the Proposal Form and all the questions required by **Us** fully and accurately and also disclose any other matter that the policyholder knows to be relevant to **Our** decision in accepting the risks and determining the rates and terms to be applied, otherwise it may result in avoidance of contract, claim denied or reduced, terms changed or varied, or contract terminated. This duty of disclosure continued until the time the contract was entered into, varied or renewed.
- (b) Non-Consumer Insurance Contract
Pursuant to Paragraph 4(1) of Schedule 9 of the Financial Services Act 2013, if the policyholder had applied for this Insurance for purposes related to the policyholder's trade, business or profession, the policyholder had a duty to disclose any matter that the policyholder knows to be relevant to **Our** decision in accepting the risks and determining the rates and terms to be applied and any matter a reasonable person in the circumstances could be expected to know to be relevant, otherwise it may result in avoidance of contract, claim denied or reduced, terms changed or varied, or contract terminated. This duty of disclosure continued until the time the contract was entered into, varied or renewed.
- (c) The policyholder also has a duty to tell **Us** immediately if at any time, after this policy contract has been entered into, varied or renewed with **Us**, any of the information given for this policy contract is inaccurate or has changed.

8. Applicable Tax

In the event that any sales and services tax, value added tax or any similar tax and any other duties, taxes, levies or imposts (collectively "Applicable Tax") whatsoever are introduced by any authority and are payable under the laws of Malaysia in connection with any supply of goods and/or services made or deemed to be made under this Policy, **We** will be entitled to charge any Applicable Tax as allowed by the laws of Malaysia. Such Applicable Tax payable shall be paid in addition to the applicable premiums and other charges. All provisions in this Policy on payment of premiums and default hereof shall apply equally to the Applicable Tax.

9. Cash Before Cover

- (a) It is a fundamental and absolute special condition of this Policy, that the premium due must be paid and received by **Us** before cover commences. If this condition is not complied with, then the renewed Policy will be deemed cancelled from inception.

10. Payment of Benefits

- (a) Payment of any benefits under this policy is subject to the terms and conditions herein. Benefits payable under this policy shall be paid to **You**. Benefits payable under this policy in respect of any claims by or on behalf of any child/children insured hereunder shall be paid to **You** who had purchased the policy, provided that **You** insurable interest on the life of the child/children.
 - (b) Any benefit payable under this policy in the event of **Your** death shall be paid to the individual as may be instructed by **You** in writing or to **Your** legal personal representative if there is no such written instruction from **You**.
 - (c) Where a benefit is payable to reimburse any expenses or charges incurred by persons other than **You** covered under this policy, claims for such benefit payment shall be made by **You**.
 - (d) If any claim made shall be fraudulent or exaggerated, or if any false declaration or statement shall be made in support of such claim, then **We** reserve the right to deny such claim and terminate this Policy or the **Insured Person's** coverage, as the case may be.
11. **We** shall not be held responsible for failure to provide services under this policy or for delays caused by strikes or conditions beyond **Our** control including but not limited to flight conditions or where local laws or regulatory agencies prohibit **Us** from rendering such services.

12. Extension of Period of Insurance

The **Period of Insurance** of this policy will be automatically extended without any additional premium up to the additional days that are reasonably necessary as follows:-

- (a) Fourteen (14) days if any vehicle, seagoing vessel or aircraft in **You** are travelling as ticket holding passenger(s) is/are delayed/cancelled or re-routed;
 - (b) Thirty (30) days if the intended return **Journey/Trip** is prevented due to **Injury** to **You** arising from a cause covered under this policy;
 - (c) Fourteen (14) days for one (1) **Travelling Companion** (who is also named as an **Insured Person** under the schedule/eSchedule) accompanying **You** if **Your** return **Journey/Trip** is prevented due to **Injury**;
 - (d) Fourteen (14) days for all **Insured Persons** under the same family plan accompanying **You** if **Your** return **Journey/Trip** is prevented due to **Injury**.
13. **We** shall be entitled to all rights of subrogation (in respect of the compensation paid to **You** under this policy) whether by way of indemnity or otherwise and the **You** shall give all information and render all assistance in **Your** power to **Us** in connection therewith and execute such assignments thereof as **We** may reasonably require.
14. **PA-CL090 Sanction Limitation and Exclusion Clause**
No insurer/co-insurer shall be deemed to provide cover and no insurer/co-insurer shall be liable to pay any claim or provide any benefit hereunder to the extent that the provision of such cover, payment of such claim or provision of such benefit would expose that insurer/co-insurer to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, United Kingdom or United States of America.

PART 3 – GENERAL EXCLUSIONS

1. **We** will not pay for claims caused by or resulting from:-
- (a) War, invasion, act of foreign enemy, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection or military or usurped power, martial law or state of siege or any of the events or causes which determine the proclamation or maintenance of martial law or state of siege, riot or civil commotion, lockout or threat of such incident;
 - (b) Delay, confiscation, detention, requisition, damage, destruction or any prohibitive regulations by customs or other government officials or authorities of any country;
 - (c) Ionising radiation or contamination by radioactivity from any nuclear waste from combustion of nuclear fuel;
 - (d) The radioactive toxic explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof;
 - (e) Loss of or damage to hired or leased equipment(s);
 - (f) Offshore activities such as non-recreation diving, mining, oil-rigging, aerial photography or handling of explosives;
 - (g) The **Insured Person** engaging in any naval, military, air force, law enforcement or civil defense service or operation, manual work in connection with any trade, employment or profession during the **Journey/Trip**;
 - (h) The **Insured Person** engaging in aviation, other than as a fare-paying passenger;
 - (i) the **Insured Person's** direct participation in any **Act of Terrorism**.
 - (j) loss due to currency exchanges of any and every description;
 - (k) Services rendered without **Our** authorization and/or **Our** intervention.
 - (l) HIV (Human Immunodeficiency Virus) and/or any HIV-related illness including AIDS (Acquired Immune Deficiency Syndrome) however caused and/or any mutant derivations, variations or treatment thereof however caused;
 - (m) treatment or services provided by a health spa, convalescent or nursing home or any rehabilitation centre;
 - (n) **You** having received a terminal prognosis;
 - (o) **You** travelling against medical advice, or on medical advice where the trip is made solely for the purpose of obtaining treatment;
 - (p) **Your** failure to obtain the required vaccinations before departure;
 - (q) Any **Notifiable Diseases** requiring isolation or quarantine by law, unless otherwise stated herein;
 - (r) **Your** suicide or attempted suicide, self-injury or willful exposure to peril (other than in an attempt to save human life), or the committing of any criminal acts;
 - (s) **You** being under the influence of drugs or other substance abuse unless the drug is taken in accordance with an authorized medical prescription;
 - (t) **Your** alcohol content in the blood and/or urine samples exceeding the limit permitted by law;
 - (u) any costs of treatment in respect of pregnancy, childbirth, miscarriage, abortion and all related complications, except for miscarriage due to bodily **Injury** as a direct result of an **Accident**;
 - (v) **Pre-Existing Conditions**;
 - (w) **Illnesses** or disorders of a psychological nature, mental and nervous disorders, including but not limited to insanity;
 - (x) Riding/driving without a valid driving license (NOTE: this will not apply for expired license but is not disqualified from holding or obtaining such driving license under the regulations of the Malaysian Road Transport Department or any other relevant laws).

2. **We** will not pay for claims arising from:-
- You** participating in a **Hazardous Activity(s)**, unless such sport is covered under the Additional Sports (Optional Rider 1) that **You** have purchased;
 - You** engaging in, practicing for, taking part in or training in any speed contest or racing, any professional competitions or sports or any sports in which **You** would or could earn or receive remuneration, sponsorships, donations or any other form of financial rewards.
3. Cyber Risk Clause - The indemnity expressed in this Section 5 shall not apply to liability in respect of any claim or loss arising out of any activities and/or business conducted and/or transacted via the internet, extranet and/or via the **Insured Person's** own website, internet site, web address and/or via the transmission of electronic mail of documents.

PART 4 – CLAIMS

Reasonable Precautions

The **Insured Person** must do everything reasonably possible to prevent a loss from occurring, or when a loss has occurred, ensure that the loss is minimized. If the **Insured Person** does not, **We** shall be entitled to reduce the **Insured Person's** claim by the amount of prejudice **We** have suffered due to the **Insured Person's** failure to mitigate his loss, or reject the **Insured Person's** entire claim.

Checklist on the required Supporting Documents of Claims

Section/Benefits	Action/Document(s) required
Personal Accident Medical related claims	<ol style="list-style-type: none"> Duly completed e-payment form Medical Report or Death Certificate Original Medical Bills/Receipts Hospital Admission/Discharge Note or Summary
Luggage Delay Travel delay	<ol style="list-style-type: none"> Duly completed e-payment form Written confirmation from Carrier/Scheduled Carrier regarding the period of luggage and travel delay (in number of hours), the actual date & time of departure and the reasons for such delay. Original receipts for necessary and reasonable essential items.
Deposit or Trip cancellation Trip curtailment	<ol style="list-style-type: none"> Duly completed e-payment form Tour operator's confirmation of booking Cancellation invoice and refund due Your or Your Immediate Family Member's Medical Report/Death Certificate Proof of relationship between You and Your Immediate Family Member e.g. birth certificate, marriage certificate Original receipts of all amounts claimed
Natural Disaster at Destination	<ol style="list-style-type: none"> Duly completed e-payment form Original receipts for travel and accommodation paid Copy of public transport ticket

In addition to the documents listed in the table above, the **Insured Person** is to provide the **Company** with any other documents as the **Company** may require and shall be in such form and of such nature as the **Company** may prescribe.

PART 5 – DEFINITION

ACCIDENT means a sudden or unexpected event, resulting directly and independently from the action of an external cause, other than any intentionally self-inflicted **Injury**.

ALTERNATIVE MEDICINE means treatment which is carried out by a traditional medical practitioner, other than **You**.

AUTHORISED REPRESENTATIVE means the representative appointed by **Us** from time to time to provide medical decisions and services as may be necessary under this policy.

COMMON CARRIER(S) means any land, sea or air carrier operated under a licence and provides regular scheduled transportation service for individuals who travel as a fare-paying passenger.

COMPANY means Allianz General Insurance Company (Malaysia) Berhad 200601015674 (735426-V).

FAMILY MEMBERS means the policyholder's selected one (1) legal spouse, parents, parents-in-law, grandparents, grandparents-in-law, great grandparents, biological/legally adopted child/children, grandchildren, great grandchildren, siblings, brother-in-law or sister-in-law.

GEOGRAPHICAL AREA means **Your** selected scheduled destination within Malaysia.

HAZARDOUS ACTIVITY(IES) means mountaineering, abseiling or rock climbing, necessitating the use of ropes and other climbing equipment, paintball shooting, indoor climbing, racing (other than on foot), hang-gliding, professional sporting activities and competitions of any kind, any organised sporting holiday and any other activities that require a degree of skill and involve exposure to risk.

HOME means the **Your** usual place of residence in Malaysia.

IMMEDIATE FAMILY MEMBER means **Insured Person's** parent, parent-in-law, spouse, child or sibling.

ILLNESS means any sudden and unexpected deterioration of health certified by any **Medical Practitioner**.

INJURY(S) means bodily **Injury** caused solely and directly by an **Accident**.

INSURED PERSON means each individual person named in the schedule/eSchedule and who must be a Malaysian citizen, Malaysian permanent resident, valid work permit holder, valid student pass holders or a person who is otherwise legally employed in Malaysia and shall include the policyholder where such policyholder is an individual and his/her spouse and child/children who are legally residing in the Home Territory, as named in the schedule/eSchedule.

JOURNEY/TRIP means a trip that commences when the **Insured Person** departs from his or her **Home** or place of business in the Home Territory (whichever is later) to commence travel to the intended destination(s), provided always that such trip does not commence more than twenty-four (24) hours prior to booked or scheduled departure time until the time **You** return to **Your Home** or place of business in the Home Territory and ceases in the following circumstances:

- the **Insured Person's** return to his or her **Home** or place of business in the Home Territory; or
- the expiry of the **Period of Insurance** specified in the schedule/eSchedule;

The duration of each **Journey/Trip** shall not exceed thirty (30) consecutive days from the commencement of the **Journey/Trip**.

For avoidance of doubt, all **Journeys/Trips** to intended destination(s) within Malaysia for leisure or business purpose and shall exclude any daily and regular commute.

MEDICAL PRACTITIONER means a registered doctor, physician, surgeon or specialist qualified and licensed to practice western medicine and who is practicing within the scope of his/her licensing and training in the geographical area of practice, but excluding a **Medical Practitioner** who is the **Insured Person** himself/herself.

NATURAL DISASTER means the effect of a natural event such as flood, tornado, hurricane, wild forest fire, volcanic eruption, earthquake, heat wave, tsunami, sand storm or landslide.

NOTIFIABLE DISEASE means **Illness** or disease sustained by an **Insured Person** resulting from pandemic influenza and any other **Illness** or disease which has been declared as a pandemic or epidemic by order of the relevant government authorities or a recognized public health authority.

PERIOD OF INSURANCE means the period specified in the schedule/eSchedule.

PRE-EXISTING CONDITIONS means any condition for which treatment, medication, advice or diagnosis, consultation and/or prescribed drugs has been sought or received during the twelve (12) months prior to the commencement of the **Journey/Trip**.

SERIOUS ILLNESS means:

- (a) an **Illness** which, if suffered, would result in **You** being certified by a **Medical Practitioner** as unfit to travel or continue with **Your Journey/Trip** and would require **You** to receive treatment in a hospital; or
- (b) in respect of persons other than **You**, an **Injury** or **Illness** certified as being dangerous to life by a **Medical Practitioner**.

SERIOUS MEDICAL CONDITION means a condition which in **Our** opinion or the opinion of **Our Authorised Representatives** or its appointed representative constitutes a serious or life threatening medical emergency requiring immediate evacuation to obtain urgent remedial treatment to avoid death or serious impairment to **Your** immediate or long-term health prospects.

TRAVELLING COMPANION means an individual who is registered to travel on the same **Journey/Trip** with the **Insured Person**.

YOU/YOUR means the **Insured Person(s)**.

WE/US/OUR means the **Company**.

Lodging of Complaints



We are committed to maintaining high levels of service, honesty, integrity and trustworthiness. If you have any reason to be dissatisfied with any of our products or services, we would like to hear from you. Your feedback is very important to us as we are always looking for ways to improve and serve you better.


To provide us with your feedback, you may contact us via the following channels:


Write to:

Customer Feedback Centre, Allianz Arena, Ground Floor Block 2A, Plaza Sentral, Jalan Stesen Sentral 5, Kuala Lumpur Sentral, 50470 Kuala Lumpur.

 1 300 22 5542

  AllianzMalaysia

 customer.service@allianz.com.my

 allianz.com.my

Avenues to Seek Redress

You may submit your complaint to the Ombudsman for Financial Services (OFS) if you are not satisfied with our final response or decision, in the event that your complaint is within the scope of the OFS as well as the following monetary thresholds:

- (1) Insurance claims not exceeding RM250,000.00; and
- (2) Motor third party property damage claims not exceeding RM10,000.00.

The OFS can be contacted at the following address:

Ombudsman for Financial Services, Level 14, Main Block, Menara Takaful Malaysia, No 4, Jalan Sultan Sulaiman, 50000 Kuala Lumpur.

 03 2272 2811

 03 2272 1577

 enquiry@ofs.org.my

 ofs.org.my


If your complaint does not fall within the purview of the OFS, you may refer your complaint to Laman Informasi Nasihat dan Khidmat (LINK) of Bank Negara Malaysia (BNM) at the following address:

Write to (BNMTELELINK):

Pengarah, LINK & Pejabat BNM, Bank Negara Malaysia, P.O. Box 10922, 50929 Kuala Lumpur.


Walk-in (BNMLINK):

Ground Floor, Block D, Bank Negara Malaysia, Jalan Dato' Onn, 50480 Kuala Lumpur.

 1 300 88 5465

 03 2174 1515

 bnmtelelink@bnm.gov.my

 bnm.gov.my

You may check with our Customer Feedback Centre on the types of complaints handled by the OFS or BNM before submitting your complaint.

Authorised Representative's 24-Hour Emergency Hotline

603 7628 3919

603 7965 3919

Allianz General Insurance Company (Malaysia) Berhad 200601015674 (735426-V)

(Licensed under the Financial Services Act 2013 and regulated by Bank Negara Malaysia)

Allianz Customer Service Centre

Allianz Arena, Ground Floor, Block 2A, Plaza Sentral, Jalan Stesen Sentral 5, Kuala Lumpur Sentral, 50470 Kuala Lumpur.

Allianz Contact Centre: 1 300 22 5542 Email: customer.service@allianz.com.my   AllianzMalaysia  allianz.com.my

