Special Exclusion (COVID-19)
有關 2019 冠狀病毒(COVID-19)之不受保事項

CHUBB®

This Policy does not cover and we will not (under any sections) pay for claims of any kind directly or indirectly arising from, relating to or in any way connected with:

a) the Coronavirus Disease 19 (COVID-19) (or any mutation or variation thereof) and/or

b) its outbreak.

To the extent that any term or covered peril in the Policy may be inconsistent with this exclusion, this exclusion shall prevail.

本保單之所有章節不保障任何由下列原因直接或間接引起或相關的損失, 及不會支付任何與其相關之賠償。

a) 2019 冠狀病毒病(COVID-19)（或其任何突變或變異）及/或
b) 其爆發。

倘任何保單條文內的條文或受保事項與此不受保事項有抵觸，概以本不受保事項為準。

TravelEase
Single Trip Travel Insurance
安達旅無憂單次旅遊保險
Policy Wording
保單條款

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Travel
Insurance

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24-Hour Emergency Assistance Hotline
24小時緊急支援熱線
(852) 3723 3030
Claim submission 提交索償申請
Chubb Claim Centre 安達索償中心
www.chubbclaims.com.hk
CHUBB

TravelEase Single Trip Travel Insurance Policy Wording, Hong Kong. 安達旅無憂單次旅遊保險保單條款，香港. Published 03/2020.

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Part I – Schedule of Benefits

In consideration of the payment of a premium to **The Company** and subject to the terms and conditions of this policy, **The Company** agrees to provide cover in the manner and to the extent set out in this policy.

Please Read this Policy

If this policy contains incorrect information, please **return it to The Company immediately for correction.**

		Executive		Standard	
		Basic	Comprehensive	Basic	Comprehensive
		(HK$)	(HK$)	(HK$)	(HK$)
A. Personal Accident					
(a) Accident whilst travelling on a Public Conveyance (18 to 75 years of age)	Sum Insured	1,200,000	1,200,000	600,000	600,000
(b) Other Accident (18 to 75 years of age)	Sum Insured	600,000	600,000	300,000	300,000
(c) Accident (under 18 years of age)	Sum Insured	250,000	250,000	250,000	250,000
B. Medical Expenses					
(a) Medical Expenses	Sum Insured	1,000,000	1,000,000	300,000	300,000
(b) Follow-up Medical Expenses	Sum Insured	100,000	100,000	30,000	30,000
(1) Maximum amount for Chinese Medicine Practitioner	Sum Insured	3,000	3,000	1,500	1,500
(2) Daily maximum amount for Chinese Medicine Practitioner		150	150	150	150
(3) Maximum amount for Medical Equipment	Sum Insured	20,000	20,000	10,000	10,000
(c) Trauma Counselling	Sum Insured	20,000	20,000	20,000	20,000
(1) Daily maximum amount for Trauma Counselling		2,000	2,000	2,000	2,000
C. Chubb Assistance – 24-Hour Worldwide Assistance Services					
(a) Emergency Medical Evacuation and/or Repatriation		Unlimited	Unlimited	Unlimited	Unlimited
(b) Return of Mortal Remains		Unlimited	Unlimited	Unlimited	Unlimited
(c) Compassionate Visit	Sum Insured	30,000	30,000	10,000	10,000
(d) Child Escort	Sum Insured	30,000	30,000	10,000	10,000
(e) Chubb Assistance – Twenty Four (24) Hour Telephone Hotline And Referral Services		Applicable	Applicable	Applicable	Applicable

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D. Hospital Cash					
(a) Maximum amount	Sum Insured	Nil	10,000	Nil	3,000
(b) Maximum daily benefit		Nil	500	Nil	300
E. Burns Benefit	Sum Insured	300,000	300,000	150,000	150,000
F. Personal Property					
(a) Maximum amount	Sum Insured	Nil	20,000	Nil	15,000
(b) Maximum amount for each item/set/pair		Nil	2,000	Nil	1,000
G. Personal Money	Sum Insured	Nil	3,000	Nil	2,000
H. Loss of Travel Documents	Sum Insured	Nil	20,000	Nil	10,000
I. Trip Cancellation	Sum Insured	Nil	50,000	Nil	20,000
J. Trip Interruption					
Maximum amount under Section J	Sum Insured	Nil	50,000	Nil	20,000
(a) Special Occasion Interruption	Sum Insured	Nil	1,000	Nil	1,000
(b) Trip Curtailment	Sum Insured	Nil	50,000	Nil	20,000
(c) Travel Interruption due to compulsory quarantine	Sum Insured	Nil	50,000	Nil	20,000
K. Travel Delay					
Maximum amount under Section K	Sum Insured	Nil	3,000	Nil	2,000
Cover for any one (1) item under Section K (a) to (d) only:					
(a) Cash Benefit for each period of delay	Each 6 hour period of delay	Nil	300	Nil	200
(b) Forfeited transport and accommodation expenses (trip eventually cancelled after 24 hour period of delay)	After 24 hour period of delay	Nil	3,000	Nil	2,000
(c) Forfeited hotel accommodation expenses (after 12 hour period of delay)	After 12 hour period of delay	Nil	3,000	Nil	2,000
(d) Additional hotel accommodation and/or transport expenses (after 6 hour period of delay)	Each 6 hour period of delay	Nil	3,000	Nil	2,000
L. Baggage Delay	Sum Insured	Nil	2,000	Nil	2,000
M. Personal Liability	Sum Insured	Nil	2,000,000	Nil	2,000,000

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N. Home Contents Protection					
(a) Maximum amount	Sum Insured	Nil	25,000	Nil	10,000
(b) Maximum amount for each item/set/pair		Nil	5,000	Nil	5,000
O. Rental Vehicle Excess	Sum Insured	Nil	5,000	Nil	3,000
P. Credit Card Protection	Sum Insured	Nil	30,000	Nil	20,000
Q. Golfer Hole-In-One	Sum Insured	Nil	3,000	Nil	1,000
R. Amateur Sport Optional Benefit **Section R Is Subject To The Payment Of Additional Premium:**					
Maximum amount under Section R	Sum Insured	Nil	10,000	Nil	Nil
Maximum amount under Section R for each item/set/pair	Sum Insured	Nil	3,000	Nil	Nil
Cover for either Benefit R(I) or Benefit R(II):					
R(I) Golf Benefit					
(a) Loss or Damage of Golf Equipment	Sum Insured	Nil	10,000	Nil	Nil
(b) Hiring cost of Golf Equipment	Sum Insured	Nil	3,000	Nil	Nil
(c) Golf Interruption	Sum Insured	Nil	5,000	Nil	Nil
R(II) Skiing or Diving Benefit				Nil	Nil
(a) Loss or Damage of Skiing or Diving Equipment	Sum Insured	Nil	10,000	Nil	Nil
(b) Hiring cost of Skiing Equipment or Diving Equipment	Sum Insured	Nil	3,000	Nil	Nil
(c) Skiing or Diving Interruption	Sum Insured	Nil	5,000	Nil	Nil

Customer Services Hotline: +852 3191 6611
24-Hour Assistance Hotline: +852 3723 3030

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Part II – Definition of Words

The following defined terms shall have the meaning set out as follows in this policy:

1. **A Second Degree Burn** means **Bodily Injury** sustained as a result of burn and diagnosed by a **Physician** in which both the epidermis and the underlying dermis are damaged.

2. **A Third Degree Burn** means **Bodily Injury** sustained as a result of burn and diagnosed by a **Physician** in which the skin has been damaged or destroyed to its full depth and there is damage to the tissue beneath.

3. **Accident** or **Accidental** means a sudden, unforeseen and unexpected event happening by chance.

4. **Chubb Assistance** or **Authorised Assistance Service Provider** means the independent service provider appointed by **The Company** to provide outside **Hong Kong** assistance services to **Insured Persons**.

5. **Black Alert** means the travel black alert issued by the Security Bureau of the **Hong Kong** Government under the Outbound Travel Alert (OTA) System. This definition may be changed by **The Company** from time to time based on changes to the OTA System communicated by the Security Bureau of the **Hong Kong** Government.

6. **Bodily Injury** means physical injury caused solely and independently by an **Accident** and sustained during the **Period of Insurance**.

7. **Business Partner** means one or more persons engaged in, and sharing the profits and risks of the same business enterprise as an **Insured Person**.

8. **Cash** means cash, banknotes or travelers cheques belonging to an **Insured Person** taken by an **Insured Person** on the **Journey**.

9. **Chinese Medicine Practitioner** means a person other than an **Insured Person** or an **Immediate Family Member** who is duly registered as a Chinese medicine practitioner according to the Chinese Medicine Ordinance (Cap. 549).

10. **Confinement** or **Confined** means a continuous period of necessary confinement in a **Hospital** as a **Resident Inpatient** for which the **Hospital** makes a charge for room and board.

11. **Diving Equipment** means the following specialist equipment used for scuba diving: buoyancy control device (BCD), regulator, cylinder, dive computer, dive mask, snorkel, fins, scuba booties, scuba gloves and wet suit.

12. **Golf Equipment** means the following specialist equipment used for golf: golf clubs, golf bag, clubhead cover, golf gloves and golf shoes.

13. **Hospital** means a legally constituted establishment operated and licensed pursuant to the laws of the country in which it is located and which meets all of the following requirements:

    (a) Operates primarily for the reception and medical care and treatment of sick, ailing or injured persons on a **Resident Inpatient** basis; and

    (b) Admits a **Resident Inpatient** only under the supervision of one or more **Physicians**, at least one of whom is available for consultation at all times; and

    (c) Maintains organized facilities for medical diagnosis and treatment of **Resident Inpatients** and provides (where appropriate) facilities for major surgery within the confines of the establishment or in facilities controlled by the establishment; and

    (d) Provides full-time nursing service by and under the supervision of a staff or nurses; and

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(e) Has an on-duty staff of at least one **Physician** and one qualified nurse at all times; and

(f) **"Hospital"** shall not include the following:

- a mental institution, an institution operating primarily for the treatment of psychiatric or psychological disease including sub-normality or the psychiatric department of a hospital;
- a place for the aged, a rest home or 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.

14. **Hong Kong** means the Hong Kong Special Administrative Region.

15. **Household Contents** means property owned by an **Insured Person** and located at their **Principal Home** at the time of burglary but does not include diamonds, gems, antiques, valuable paintings or art, jewellery and accessories (including but not limited to, for example crystals, earrings, necklaces, rings or brooches etc.) or cash.

16. **Immediate Family Member** means an **Insured Person**'s spouse, parents, parents-in-law, grandparents, children, siblings, grandchildren or legal guardians.

17. **Insured Person** means the person or persons named in the **Policy Schedule** or subsequent endorsement(s) (if any).

18. **Journey** means the trip outside **Hong Kong** described in the **Policy Schedule**.

19. **Medical Equipment** means the following medical equipment or medical appliances: wheel-chairs, prostheses, spectacles, crutches, walking frames, orthopedic braces and supports, cervical collars and hearing aids, which are certified by a **Physician** as being medically necessary to improve an **Insured Person's** condition resulting from a **Bodily Injury** or **Sickness**.

20. **Medical Expenses** means all **Usual**, **Reasonable and Customary Medical Expenses** necessarily incurred by an **Insured Person** as a result of **Bodily Injury** sustained or **Sickness** contracted, for **Confinement**, surgical, medical, or other diagnostic or remedial treatment given or prescribed by a **Physician**, including employment of a nurse, x-ray examination or the use of an ambulance as the result of an emergency.

21. **Period of Insurance** means:

(a) In relation to Section I (Trip Cancellation) of this policy only, the period beginning on the date this policy is purchased as specified in the **Policy Schedule**; or

(b) In relation to all other Sections of this policy, the period beginning at the latest of either (i) three (3) hours before the **Insured Person**'s scheduled departure from **Hong Kong** to embark on a **Journey**, or (ii) the time at which an **Insured Person** commences his or her travel from anywhere in **Hong Kong** directly to the **Hong Kong** immigration control point to embark on a **Journey**; and

(c) In relation to all Sections of this policy, the period ending at the earliest of either (i) one-hundred-eighty (180) days after an **Insured Person**'s departure from **Hong Kong** to embark on a **Journey** (inclusive of the date of departure); or (ii) three (3) hours after an **Insured Person** has passed through **Hong Kong** immigration control point on their return to **Hong Kong**, or (iii) the date on which the policy is terminated.

22. **Permanent** means:

(a) In relation to one or both limbs, loss of use lasting twelve (12) consecutive months from the date of **Accident** and being beyond hope of improvement or remedy by surgical or other treatment at the

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expiry of that period, or loss by physical separation at or above the wrist or ankle joint during the same period; or

(b) In relation to any other type of loss, being beyond hope of improvement or remedy by surgical or other treatment at the end of twelve (12) consecutive months from the date of **Accident**.

23. **Permanent Total Disability** means disablement that results solely, directly or independently of all other causes from **Bodily Injury** and which occurs within one hundred eighty (180) days of the **Accident** in which such **Bodily Injury** was sustained, which, having lasted for a continuous and uninterrupted period of at least twelve (12) consecutive months, will, in all probability, entirely prevent the **Insured Person** from engaging in gainful employment of any and every kind for the remainder of his/her life and from which there is no hope of improvement.

24. **Personal Property** means personal goods belonging to an **Insured Person** taken on the **Journey** or acquired by an **Insured Person** during the **Journey**, other than any form of money, any kind of document, any kind of food or beverage, antiques, contracts, bonds, securities, animals, software, mobile telecommunications devices and accessories, means of transport and accessories, and jewellery (including but not limited to, for example crystals, earrings, necklaces, rings or brooches etc.) that is not being worn or carried by the **Insured Person** at the time of loss or damage.

25. **Physician** means a person other than an **Insured Person** or an **Immediate Family Member** who is a qualified medical practitioner licensed by the competent medical authorities of the jurisdiction in which treatment is provided and who, in providing treatment, practices within the scope of his or her licensing and training.

26. **Policy Schedule** means the document(s) which (i) allow each **Insured Person** to be identified by name and identity card number or passport, (ii) sets out an **Insured Person**'s itinerary, and (iii) indicates which plan (any Executive Plan or Standard Plan) has been selected.

27. **Pre-existing Medical Condition** means any sickness or injury of which, in the six (6) consecutive months before the first day of the **Period of Insurance**, an **Insured Person**, **Immediate Family Member**, **Travel Companion** or **Business Partner** presented signs or symptoms, or for which, in the same period, an **Insured Person**, **Immediate Family Member**, **Travel Companion** or **Business Partner** sought or received (or ought reasonably to have sought or received) medical treatment, consultation, prescribed drugs, advice or diagnosis by a **Physician**.

28. **Principal Home** means an **Insured Person**'s primary place of residence in **Hong Kong**.

29. **Professional Golfer** means an **Insured Person's** livelihood is substantially dependent on income received as a result of that **Insured Person** playing golf.

30. **Public Conveyance** means any mechanically propelled carrier operated by a company or an individual licensed to carry passengers for hire.

31. **Red Alert** means the travel red alert issued by the Security Bureau of the **Hong Kong** Government under the Outbound Travel Alert (OTA) System. This definition may be changed by **The Company** from time to time based on changes to the OTA System communicated by the Security Bureau of the **Hong Kong** Government.

32. **Resident Inpatient** means an **Insured Person** whose **Confinement** as a resident bed patient is necessary for the medical care, diagnosis and treatment of **Bodily Injury** or **Sickness** and not merely for any form of nursing, convalescence, rehabilitation, rest or extended-care.

33. **Rental Vehicle** shall mean a non-commercial inland vehicle (except motorcycle) rented or hired from a licensed motor vehicle rental/hire company for the sole purpose of carrying an **Insured Person** on public roadways.

34. **Riot** means the act of a group of people that disturb the public peace (whether in connection with a **Strike** or lock-out or not) and the action of any lawfully constituted governmental authority in

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suppressing or attempting to suppress any such disturbance or in minimizing the consequences of such disturbance.

35. **Schedule of Benefits** means the schedule of benefits in Part I of this policy.

36. **Sickness** means illness or disease commencing during the **Period of Insurance**.

37. **Skiing Equipment** means the following specialist equipment used for skiing: skis, poles, ski boots, ski gloves, snowboard, snowboard boots and helmet.

38. **Special Occasion** means visiting or attending as a spectator a theme park, museum, musical or sporting event or competition which is open to the general public, opera, theatre, musical performance or concert.

39. **Sports Equipment** means **Golf Equipment**, **Skiing Equipment** and **Diving Equipment**.

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

41. **Sum Insured** means, in relation to each benefit available to an **Insured Person** under this policy, the maximum amount listed in the **Schedule of Benefits** or any endorsement(s) corresponding to that benefit.

42. **The Company** means Chubb Insurance Hong Kong Limited.

43. **Travel Companion** means a person who accompanies an **Insured Person** for the entire **Journey**.

44. **Usual, Reasonable and Customary Medical Expenses** means charges for treatment, supplies or medical services medically necessary to treat an **Insured Person**'s condition and which do not exceed the usual level of charges for similar treatment, supplies or medical services in the locality where the charges are incurred. Charges that would not have been made if no insurance existed are excluded from this definition.

Part III – Description of Cover

Section A – Personal Accident

(a) **Accident whilst travelling on a Public Conveyance (18 up to and including 75 years of age on the first day of the Period of Insurance)**:

If an **Insured Person** who is eighteen (18) up to and including seventy-five (75) years of age on the first day of the **Period of Insurance** sustains **Bodily Injury** while travelling as a fare-paying passenger on board a **Public Conveyance** or a carrier arranged by a travel agent and, as a direct and unavoidable result, suffers within twelve (12) consecutive months a loss of the type listed in the Loss Table in this Section A, **The Company** will pay the percentage stated for that type of loss in the Loss Table in this Section A of the **Sum Insured** stated in Section A(a) of the **Schedule of Benefits**.

(b) **Other Accident (18 up to and including 75 years of age on the first day of the Period of Insurance)**:

If an **Insured Person** who is eighteen (18) up to and including seventy-five (75) years of age on the first day of the **Period of Insurance** sustains **Bodily Injury** other than as set out at Section A(a) above, and, as a direct and unavoidable result, suffers within twelve (12) consecutive months a loss of the type listed in the Loss Table in this Section A, **The Company** will pay the percentage stated for that type of loss in the Loss Table in this Section A of the **Sum Insured** stated in Section A(b) of the **Schedule of Benefits**.

(c) **Accident (under 18 years of age on the first day of the Period of Insurance):**

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If an **Insured Person** under eighteen (18) years of age on the first day of the **Period of Insurance** sustains **Bodily Injury** and, as a direct and unavoidable result, suffers within twelve (12) consecutive months a loss of the type listed in the Loss Table in this Section A, **The Company** will pay the percentage stated for that type of loss in the Loss Table in this Section A of the **Sum Insured** stated in Section A(c) of the **Schedule of Benefits**.

Section A Loss Table:

Type of Loss		Percentage of the Sum Insured
1.	**Accidental** death	100%
2.	**Permanent Total Disability**	100%
3.	**Permanent** and total loss or incurable paralysis of all limbs	100%
4.	**Permanent** and total loss of sight in both eyes	100%
5.	**Permanent** and total loss of sight in one eye	100%
6.	**Permanent** and total loss of two limbs	100%
7.	**Permanent** and total loss of one limb	100%
8.	**Permanent** and total loss of speech and hearing	100%
9.	**Permanent** and total loss of hearing in both ears	75%
10.	**Permanent** and total loss of hearing in one ear	15%
11.	**Permanent** and total loss of speech	50%

Special Conditions to Section A:

1. Where an **Insured Person** suffers more than one type of loss listed in the Loss Table in this Section A in the same **Accident**, **The Company**'s liability under this Section A shall be limited to one payment for the type of loss which, of all the types of loss actually suffered, attracts the largest percentage stated in the Loss Table in this Section A of the relevant **Sum Insured** stated in Section A of the **Schedule of Benefits**.

2. **The Company**'s total liability under this Section A for all **Accidents** involving the same **Insured Person** occurring during the **Period of Insurance** shall not exceed the relevant **Sum Insured**.

3. **(Applicable to Family Plan Only)** Where this policy covers more than one **Insured Person** from the same family and more than one member of that family is involved in the same **Accident**, **The Company**'s total liability under this Section A for all **Insured Persons** involved in that **Accident** shall not exceed 300% of the largest **Sum Insured** which applies to any member of that family.

4. Where the use or enjoyment of an **Insured Person**'s limb or organ was partially impaired before an **Accident** occurred, **The Company** may, in its sole discretion and after considering a medical assessment by **The Company**'s appointed medical adviser of the extent to which any **Bodily Injury** was, in the medical adviser's opinion, caused solely and independently by that **Accident**, pay such percentage of the relevant **Sum Insured** as it considers reasonable. No payment shall be made for a limb or organ which was totally unusable before an **Accident** occurred.

5. Exposure: If an **Insured Person** is unavoidably exposed to the elements by reason of sustaining **Bodily Injury** and, as a direct and unavoidable result, suffers death within twelve (12) consecutive months, **The Company** will pay the percentage stated for **Accidental** death in the Loss Table in this Section A of the relevant **Sum Insured** stated in Section A of the **Schedule of Benefits**.

6. Disappearance: Where an **Insured Person**'s body has not been found within one (1) year of the date of the disappearance, sinking or wrecking of the means of transport being used by the **Insured Person** on the date of the disappearance, sinking or wrecking:

   (a) It will be presumed that the **Insured Person** suffered **Accidental** death resulting from **Bodily Injury** at the time of such disappearance, sinking or wrecking; and

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(b) Subject to receiving an undertaking, signed by the legal representatives of the **Insured Person**'s estate, that if the presumption of **Accidental** death resulting from **Bodily Injury** is subsequently found to be wrong, any amount paid by **The Company** under this Section A will be immediately refunded to **The Company.**

The Company will pay to the legal representatives of the **Insured Person**'s estate the percentage stated for **Accidental** death in the Loss Table in this Section A of the relevant **Sum Insured** stated in Section A of the **Schedule of Benefits**.

Exclusions to Section A:

This Section A does not cover:

1. **Sickness**, disease or bacterial infection.

Section B – Medical Expenses

(a) **Medical Expenses:**

If an **Insured Person** incurs **Medical Expenses** during the **Period of Insurance** arising from **Bodily Injury** or **Sickness**, **The Company** will reimburse the **Insured Person** for those **Medical Expenses** up to the **Sum Insured** stated in Section B(a) of the **Schedule of Benefits**.

(b) **Follow-up Medical Expenses:**

If an **Insured Person** incurs **Medical Expenses** outside **Hong Kong** during a **Journey** arising from **Bodily Injury** or **Sickness** and, after returning to **Hong Kong**, that **Insured Person** still requires treatment in **Hong Kong** for the same **Bodily Injury** or **Sickness** as given or prescribed by a **Physician** and/or **Chinese Medicine Practitioner, the Company** will continue to reimburse the **Insured Person** for:

1. reasonable medical expenses incurred for the purpose of Chinese medical treatment and charged by a **Chinese Medicine Practitioner;** and/or

2. Any **Medical Expenses** other than as set out at Section B (b)(1) above; and/or

3. The actual purchasing cost of Medical Equipment,

incurred in **Hong Kong** up to ninety (90) days after the **Insured Person**'s return to **Hong Kong** or until the **Sum Insured** stated in Section B(b) of the **Schedule of Benefits** has been exhausted, whichever comes first.

(c) **Trauma Counselling Benefit:**

If during the **Period of Insurance**, an **Insured Person** is the victim of a traumatic event such as, but not limited to, rape, armed hold up, assault, natural disaster, hijack or acts of terrorism and sustains **Bodily Injury** due to that traumatic event**,** upon the production of the **Physician's** advice on the need of trauma counselling service as a result of such **Bodily Injury**, **The Company** will reimburse the **Insured Person** for reasonable and necessary expenses for trauma counselling incurred within ninety (90) days from the occurrence of the traumatic event**,** up to the **Sum Insured** stated in Section B(c) of the **Schedule of Benefits**.

Special Conditions to Section B:

1. The **Authorised Assistance Service Provider** must be notified promptly if the **Insured Person** is admitted or anticipates admission to **Hospital** as a **Resident Inpatient** during the **Period of Insurance** outside **Hong Kong**. Failure to give the notice required by this condition precedent will result in **The Company** having no liability under this policy for those **Medical Expenses**.

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2. **The Company**'s liability under Section B(a) for all **Medical Expenses** incurred shall not exceed the **Sum Insured** stated in Section B(a) of the **Schedule of Benefits**.

3. **The Company**'s liability under Section B(b) for each and every expense incurred shall not exceed the amount stated in Section B(b) of the **Schedule of Benefits**.

4. **The Company**'s liability under Section B(b)(1) for all expenses charged by **Chinese Medicine Practitioners** shall not exceed the amount stated in Section B(b)(1) of the **Schedule of Benefits**. The maximum daily amount incurred by **Chinese Medicine Practitioners** shall be the amount stated in Section B(b)(2) of the **Schedule of Benefits**.

5. **The Company's** liability under Section B(b)(3) for all costs incurred for purchasing **Medical Equipment** shall not exceed the amount stated in Section B(b)(3) of the **Schedule of Benefits**.

6. **The Company**'s liability of **Medical Expense** (including medical expenses charged by **Chinese Medical Practitioners**) incurred in **Hong Kong** shall not exceed the amount stated in Section B (b) of the **Schedule of Benefits**.

7. The maximum daily amount incurred for trauma counselling benefit shall be the amount stated in Section B(c)(1) of the **Schedule of Benefits**.

8. **The Company**'s total liability under Section B(c) for Trauma Counselling benefit incurred during the **Period of Insurance** shall not exceed the **Sum Insured** stated in Section B(c) of the **Schedule of Benefits**.

9. **The Company**'s total liability under this Section B for all **Medical Expenses,** all medical expenses charged by **Chinese Medical Practitioners,** and all expenses for trauma counselling shall not exceed the **Sum Insured** stated in Section B(a) of the **Schedule of Benefits**.

Exclusions to Section B:

This Section B does not cover:

1. Any expenses included or contemplated in the cost of a **Journey** at the time it was paid for.

2. Surgery or medical treatment which, in the opinion of the **Physician** attending the **Insured Person**, can reasonably be delayed until the **Insured Person** returns to **Hong Kong**.

3. Any expenses incurred after an **Insured Person** has failed, within a reasonable period, to follow a **Physician**'s advice to return to **Hong Kong** to continue treatment for **Bodily Injury** suffered or **Sickness** contracted outside **Hong Kong**.

4. Any expenses incurred during a **Journey** after an **Insured Person** has been advised by a **Physician** prior to the departure of the **Journey** that he or she is unfit to travel.

5. Any follow-up expenses incurred more than ninety (90) days after the end of the **Period of Insurance** during which the **Bodily Injury** or **Sickness** occurred.

6. Any expenses incurred under Section B(a) and B(c) after twelve (12) months from the date the first expenses were incurred.

7. Health check-ups or any investigation(s) not directly related to admission diagnosis, **Bodily Injury** or **Sickness** or any treatment or investigation which is not medically necessary.

8. The cost of prostheses, contact lenses, spectacles, hearing aids, dentures and other medical equipment or optical treatment, unless it is claimable **Medical Equipment** under Section B(b)(3) **Follow-up Medical Expenses**.

Section C – Chubb Assistance – 24-Hour Worldwide Assistance Services

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(a) **Emergency Medical Evacuation and/or Repatriation**:

Where a **Physician**, designated by an **Authorised Assistance Service Provider**, certifies that **Bodily Injury** or **Sickness** renders an **Insured Person** unfit to travel or continue with their **Journey** or is a danger to their life or health; and the necessary medical treatment is not available, either at the nearest **Hospital** where the **Insured Person** was transported to or in the immediate vicinity thereof, after suffering the **Bodily Injury** or **Sickness**, **The Company** may, based on the advice of that **Physician** that the **Insured Person** is medically fit to be evacuated, determine in its sole discretion, that the **Insured Person**, should be evacuated to another location for the necessary medical treatment.

The **Authorised Assistance Service Provider**, shall arrange for the evacuation within a reasonable timeframe and utilise the best suited means, based on the medical severity of the **Insured Person**'s condition for the transport of the **Insured Person**, including but not limited to, air ambulance, surface ambulance, regular air transport, railroad or any other appropriate means. All decisions as to the means of transportation and the final destination will be made by **Authorised Assistance Service Provider**, and will be based solely upon medical necessity. The **Insured Person** may, in appropriate circumstances, be returned to **Hong Kong**.

The Company will pay the actual cost of the **Insured Person**'s emergency medical evacuation and/or repatriation and associated medical services and medical supplies directly to **Authorised Assistance Service Provider**.

(b) **Return of Mortal Remains**:

Upon the death of an **Insured Person** as a direct and unavoidable result of **Bodily Injury** or **Sickness**, **The Company** will pay the actual cost for transporting the **Insured Person**'s mortal remains from the place of death to **Hong Kong**, or the cost of local burial at the place of death as approved by the **Authorised Assistance Service Provider**.

(c) **Compassionate Visit**:

If a **Physician** certifies that **Bodily Injury** or **Sickness** renders an **Insured Person** unfit to travel or continue with their **Journey** or is a danger to their life or health or suffers death during **Journey**, **The Company** will pay, up to the **Sum Insured** stated in Section C(c) of the **Schedule of Benefits** (i) the cost of one (1) economy class round trip ticket for one (1) person to visit the **Insured Person** outside **Hong Kong**, and (ii) the cost of one (1) ordinary room accommodation in any reasonable hotel outside **Hong Kong** for a maximum period of five (5) consecutive nights, but not the cost of drinks, meals and other room services.

(d) **Child Escort**:

Where:

1. An **Insured Person** is **Confined** as a direct and unavoidable result of **Bodily Injury** or **Sickness** which a **Physician** certifies as either rendering that **Insured Person** unfit to travel or continue with their **Journey** or as being a danger to their life or health or suffers death during **Journey**; and

2. That **Insured Person** is accompanied by a child who is an **Insured Person** and was under eighteen (18) years old on the first day of the **Period of Insurance**; and

3. That child is at risk of being left unattended as a result of the **Insured Person**'s **Confinement or Insured Person's** death.

The Company will arrange and pay up to the **Sum Insured** stated in Section C(d) of the **Schedule of Benefits**, for an economy class one-way ticket, together with escort services, for that child to be escorted back to **Hong Kong**.

(e) **Chubb Assistance – Twenty Four (24) Hour Telephone Hotline And Referral Services**:

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The services are provided by way of referral and arrangement only and all expenses incurred are to be borne by the **Insured Person**:

1. Inoculation and Visa Requirement Information services
2. Embassy Referral
3. Interpreter Referral
4. Loss of Luggage Assistance
5. Loss of Travel Document Assistance
6. Telephone Medical Advice
7. Medical Service Provider Referral
8. Monitoring of Medical Condition when Hospitalized
9. Arrangement of Appointments with Doctors
10. Arrangement of **Hospital** Admission

For full details on this service, please refer to the telephone hotline and referral service information provided by **Chubb Assistance**. If you have any queries on this telephone hotline and referral service, please telephone **Chubb Assistance** on (852) 3723 3030.

Special Conditions to Section C:

1. Services under Section C are provided by the **Authorised Assistance Service Provider**. **The Company** or the **Authorised Assistance Service Provider** must be promptly notified of the occurrence of any event which may give rise to a potential claim under Section C(a)–(d) – Chubb Assistance – 24 Hour Worldwide Assistance Services. Failure to give the notice required by this condition could result in **The Company** having no liability under this Section of the policy.
2. The arrangements for, means and final destination of emergency medical evacuation and/or repatriation will be decided by the **Authorised Assistance Service Provider** and will be based entirely upon medical necessity.
3. Upon payment being made under this Section C, **The Company** shall be entitled to any monies refundable from an original return airfare.

Exclusions to Section C:

This Section C does not cover any:

1. expenses included or contemplated in the cost of a **Journey** at the time it was paid for.
2. expenses incurred during a **Journey** after an **Insured Person** has been advised by a **Physician** prior to the departure of the **Journey** that he or she is unfit to travel.
3. expenses incurred for services provided by another party for which the **Insured Person** is not liable to pay.
4. expenses for a service not approved and arranged by an **Authorised Assistance Service Provider**.
5. treatment performed or ordered by a person who is not a **Physician**.

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6. expenses incurred in relation to treatment that can be reasonably delayed until the **Insured Person** returns to **Hong Kong**.

Section D – Hospital Cash (Applicable to Executive Comprehensive Plan & Standard Comprehensive Plan only)

Upon the **Confinement** in a **Hospital** outside **Hong Kong** of an **Insured Person** as a direct and unavoidable result of **Bodily Injury** or **Sickness**, **The Company** will pay an **Insured Person** a daily benefit of the amount stated in Section D(b) of the **Schedule of Benefits** for each day of **Confinement**, up to the **Sum Insured** stated in Section D(a) of the **Schedule of Benefits**.

Extension to Section D:

If, upon the completion of the **Confinement** of an **Insured Person** outside **Hong Kong** that arises from **Bodily Injury** or **Sickness,** the **Insured Person** requires further **Confinement** for the same **Bodily Injury** or **Sickness** after the **Insured Person's** return to **Hong Kong**, **The Company** will pay the **Insured Person** a daily benefit in the amount stated in Section D(b) of the **Schedule of Benefits** for each day of further **Confinement** in **Hong Kong**, up to ninety (90) days after the **Insured Person's** return to **Hong Kong** or until the **Sum Insured** stated in Section D(a) of the **Schedule of Benefits** has been exhausted, whichever comes first.

Special Condition to Section D:

1. Payment of benefits under this Section D shall only be made after the **Confinement** ends.

2. **The Company's** liability under Section D for all **Confinement** of an **Insured Person** shall not exceed the amount stated in Section D(a) of the **Schedule of Benefits**.

3. Payment of benefits under this Section D shall be in addition to those payable under Section B – Medical Expenses.

Exclusions to Section D:

This Section D does not cover:

1. Any **Confinement** which occurs after ninety (90) days from the **Insured Person's** return to **Hong Kong**.

Section E – Burns Benefit

If an **Insured Person** sustains **Bodily Injury** and diagnosed by a **Physican** to have suffered from consisting of **A Second Degree Burn** or **A Third Degree Burn**, **The Company** will pay the percentage stated for the degree of burn in the Burns Table in this Section E of the **Sum Insured** stated in Section E of the **Schedule of Benefits**.

Burns Table	Percentage of Compensation
A Second Degree Burn or A Third Degree Burn on	
Head:	
Equal to or greater than 8%	100%
Equal to or greater than 5% but less than 8%	75%
Equal to or greater than 2% but less than 5%	50%
Body:	
Equal to or greater than 20%	100%
Equal to or greater than 15% but less than 20%	75%
Equal to or greater than 10% but less than 15%	50%

Special Conditions to Section E:

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1. Where an **Insured Person** suffers more than one type of burn listed in the Burns Table in this Section E in the same **Accident**, **The Company**'s liability under this Section E shall be limited to a single payment for the type of burn which, of all the types of burn actually suffered, attracts the largest percentage stated in the Burns Table in this Section E of the **Sum Insured** stated in Section E of the **Schedule of Benefits**.

2. Payment of benefits under this Section E shall be in addition to those payable under Section A – Personal Accident.

Section F – Personal Property (Applicable To Executive Comprehensive Plan & Standard Comprehensive Plan Only)

Subject to a reduction or allowance for physical deterioration, depreciation or obsolescence, **The Company** will indemnify, at its absolute discretion**,** reinstate, repair or replace **Personal Property** lost, stolen or damaged during the **Period of Insurance**, up to the **Sum Insured** stated in Section F(a) of the **Schedule of Benefits**.

Special Conditions to Section F:

1. The local police or equivalent local law enforcement officials must be notified within twenty-four (24) hours of the occurrence of any **Personal Property** lost, stolen or damaged by the wilful act of a third party and which may give rise to a claim under this Section F. The written policy report of such notification must also be provided to **The Company**. Failure to give the notice required or failure to provide the report required by this condition precedent will result in **The Company** having no liability under this Section F.

2. If loss, theft or damage occurs in transit, the **Public Conveyance** carrier must be promptly notified of the loss or damage within twenty-four (24) hours of the discovery of the loss or damage. The written report by the **Public Conveyance** carrier of such notification must also be provided to **The Company**. Failure to give the notice required or failure to provide the report required by this condition precedent will result in **The Company** having no liability under this Section F of the policy.

3. **The Company**'s maximum liability for loss or theft of, or damage to, each item of **Personal Property** during the **Period of Insurance** will be restricted to the amount stated in Section F(b) of the **Schedule of Benefits**.

4. Where any item of lost, stolen or damaged **Personal Property** forms part of a pair or set, **The Company**'s maximum liability for that item and that pair or set will be restricted to the amount stated in Section F(b) of the **Schedule of Benefits**.

5. **The Company**'s total liability under this Section F for all loss, theft or damage in connection with **Personal Property** during the **Period of Insurance** shall not exceed the **Sum Insured** stated in Section F(a) of the **Schedule of Benefits**.

6. Upon any payment being made under this Section F, **The Company** shall be entitled to take and retain the benefit and value of any recovered or damaged **Personal Property** and to deal with salvage at its absolute discretion.

Exclusions to Section F:

This Section F does not cover:

1. Loss, theft or damage arising from an **Insured Person**'s negligence including, but not limited to, leaving **Personal Property** unattended.

2. Any unexplained loss.

3. Any loss or damage to **Personal Property** which was left unattended in a vehicle (except locked in the trunk) or **Public Conveyance** or in other public places.

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4. Loss of, or damage to, any **Personal Property** due to moth, vermin, wear and tear, atmospheric or climatic conditions, gradual deterioration, mechanical or electrical failure, any process of cleaning, restoring, repairing, alteration, confiscation or detention or destruction by customs or any other authority.

5. Any hired or leased equipment;

6. Any loss or damage to, or any **Personal Property** forwarded in advance of a **Journey** or separately mailed or shipped in a **Public Conveyance** other than a **Public Conveyance** carrying the **Insured Person** at the same time.

7. Breakage and damage of fragile article;

8. Any amount/loss which is payable to, refundable to, or recoverable by, an Insured Person from any other source of indemnity, reimbursement or compensation.

9. Loss claimed under Section L – Baggage Delay for the same incident.

Section G – Personal Money (Applicable To Executive Comprehensive Plan & Standard Comprehensive Plan Only)

The Company will indemnify the loss of an **Insured Person**'s **Cash** due to **Accident**, theft or robbery occurring during the **Period of Insurance**, up to the **Sum Insured** stated in Section G of the **Schedule of Benefits**.

Special Conditions to Section G:

1. The local police or equivalent local law enforcement officials must be notified within twenty-four (24) hours of the occurrence of any event which may give rise to a claim under this Section G. The written police report of such notification must also be provided to **The Company**. Failure to give the notice required or failure to provide the report required by this condition precedent will result in **The Company** having no liability under this Section G.

2. **The Company**'s total liability under this Section G for all loss during the **Period of Insurance** shall not exceed the **Sum Insured** stated in Section G of the **Schedule of Benefits**.

Exclusions to Section G:

This Section G does not cover:

1. Loss arising from an **Insured Person**'s negligence including, but not limited to, leaving **Cash** unattended.

2. Any unexplained loss or loss due to confiscation or detention by customs or any other authority, devaluation of currency or shortages due to errors or omissions during money exchange transactions.

3. Any loss of **Cash** which was left unattended in a vehicle (except locked in the trunk) or **Public Conveyance** or in other public places.

4. Loss arising from the use or misuse of any form of plastic money including, but not limited to, the credit value held on any card, electronic purse or equivalent store of credit.

5. Any amount/loss which is payable to, refundable to, or recoverable by, an **Insured Person** from any other source of indemnity, reimbursement or compensation.

Section H – Loss of Travel Documents (Applicable To Executive Comprehensive Plan & Standard Comprehensive Plan Only)

The Company will reimburse an **Insured Person** up to the **Sum Insured** stated in Section H of the **Schedule of Benefits** for (i) the replacement cost of travel documents necessary for immigration clearance and/or travel tickets which are lost or stolen during the **Period of Insurance**, the absence of which would

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otherwise lead to delay of the **Journey**; and/or (ii) the reasonable additional cost of transport and/or accommodation expenses necessarily incurred outside **Hong Kong** by an **Insured Person** for the sole purpose of arranging the replacement travel documents and/or travel tickets referred to in (i) above.

Special Conditions to Section H:

1. The local police or equivalent local law enforcement officials must be notified within twenty-four (24) hours of the occurrence of any event which may give rise to a claim under this Section H. The written police report of such notificiation must also be proivded to **The Company**. Failure to give the notice required or failure to provide the report required by this condition precedent will result in **The Company** having no liability under this Section H.

2. **The Company**'s total liability under this Section H for all loss during the **Period of Insurance** shall not exceed the **Sum Insured** stated in Section H of the **Schedule of Benefits**.

Exclusions to Section H:

This Section H does not cover:

1. Loss arising from an **Insured Person**'s negligence including, but not limited to, leaving travel documents necessary for immigration clearance and/or travel tickets unattended.

2. Any unexplained loss.

3. Any loss to travel documents and/or travel tickets which was left unattended in a vehicle (except locked in the trunk) or **Public Conveyance** or in other public places.

Section I – Trip Cancellation (Applicable To Executive Comprehensive Plan & Standard Comprehensive Plan Only)

In the event of:

1. The sudden and unexpected death of an **Insured Person**, an **Immediate Family Member**, intended **Travel Companion** or **Business Partner** occurring after this policy has been purchased and within ninety (90) days prior to the date the **Journey** is scheduled to begin; or

2. The unexpected **Confinement** of an **Insured Person** as a direct and unavoidable result of the **Bodily Injury** or **Sickness** occurring after this policy has been purchased and within ninety (90) days prior to the date the **Journey** is scheduled to begin; or

3. The unexpected **Confinement** of an **Immediate Family Member**, intended **Travel Companion** or **Business Partner** as a direct and unavoidable result of the **Bodily Injury** or **Sickness** occurring after this policy has been purchased and within ninety (90) days prior to the date the **Journey** is scheduled to begin; or

4. The unexpected compulsory quarantine of an **Insured Person** beginning after this policy has been purchased and continuing within ninety (90) days prior to the date the **Journey** is scheduled to begin; or

5. The jury service of an **Insured Person** or an **Insured Person** being the subject of a witness summons, notice of which was received by that **Insured Person** after this policy has been purchased and continuing within ninety (90) days prior to the date the **Journey** is scheduled to begin; or

6. The unexpected occurrence of a **Strike**, **Riot**, civil commotion or acts of terrorism after this policy has been purchased at a destination scheduled in the **Journey** and continuing within seven (7) days prior to the date the **Journey** is scheduled to begin; or

7. Serious damage to the **Insured Person's Principal Home** from fire, flood, earthquake or similar natural disaster occurring after this policy has been purchased and within seven (7) days prior to the date

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the **Journey** is scheduled to begin and which reasonably requires the **Insured Person's** presence in **Hong Kong** on the scheduled departure date of the **Journey**; or

8. The unexpected issuance of a **Black Alert** for a destination scheduled in the **Journey** at least one (1) day after this policy has been purchased and which is in force at any time within seven (7) days prior to the date the **Journey** is scheduled to begin.

resulting in cancellation of the **Journey**, **The Company** will reimburse, up to the **Sum Insured** stated in Section I of the **Schedule of Benefits**, the **Insured Person**'s loss of transport and/or accommodation expenses forfeited by the **Insured Person**.

In the event of any unexpected **Bodily Injury** or **Sickness** of an:

9. **Insured Person** which does not lead to **Confinement**, occurring after this policy has been purchased and within ninety (90) days prior to the date the **Journey** is scheduled to begin; or

10. **Immediate Family Member**, intended **Travel Companion** or **Business Partner** which does not lead to **Confinement**, occurring after this policy has been purchased and within ninety (90) days prior to the date the **Journey** is scheduled to begin; or

11. The unexpected issuance of a **Red Alert** for a destination scheduled in the **Journey** at least one (1) day after this policy has been purchased and which is in force at any time within seven (7) days prior to the date the **Journey** is scheduled to begin,

resulting in cancellation of the **Journey**, **The Company** will reimburse, up to the **Sum Insured** stated in Section I of the **Schedule of Benefits**, fifty per cent (50%) of the **Insured Person**'s loss of transportation and/or accommodation expenses forfeited by the **Insured Person**.

Special Condition to Section I:

1. Where a **Journey** is cancelled as a result of **Bodily Injury** or **Sickness** of an **Insured Person or** , an intended **Travel Companion**, that **Bodily Injury** or **Sickness** must be certified by a **Physician** as rendering that **Insured Person** or intended **Travel Companion** unfit to travel or as being a danger to their life or health.

2. Where a **Journey** is cancelled as a result of **Bodily Injury** or **Sickness** of an **Immediate Family Member** or **Business Partner**, that **Bodily Injury** or **Sickness** must be certified by a **Physician** as being a danger to the life of that **Immediate Family Member** or **Business Partner**.

3. Failure to obtain the certifications required by this condition precedent will result in **The Company** having no liability under this Section I for the **Insured Person's** loss of transport and/or accommodationexpenses forfeited.

4. Where an **Insured Person** is covered under both Section I(2) and Section I(9) and Section I(3) and Section I(10) above, **The Company's** liability under this Section I shall be limited to the one which attracts the largest compensation under Section I in the **Schedule of Benefits**.

5. **The Company**'s total liability under this Section I for all reimbursement under this Section I shall not exceed the **Sum Insured** stated in Section I of the **Schedule of Benefits**.

Exclusions to Section I:

This Section I does not cover:

1. Any amount/loss which is payable to, refundable to, or recoverable by, an **Insured Person** from any other source of indemnity, reimbursement or compensation.

2. Any amount which an **Insured Person** is not legally obligated to pay.

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3. Cancelled as a direct or indirect result of a prohibition or regulation issued by any national, regional or local government.

4. Cancelled due to the negligence, misconduct or insolvency of the travel agent through whom the Journey was booked.

5. Cancelled due to the inability of a tour operator or wholesaler to complete a group tour due to a deficiency in the number of persons.

6. Cancelled as a direct or indirect result of financial hardship experienced by an Insured Person, changes in an **Insured Person**'s circumstances or contractual obligations or an **Insured Person**'s general disinclination to proceed with the Journey.

7. Arising from a condition which, at the time of booking a **Journey**, existed or might reasonably have been anticipated as being likely to result in the **Journey** being cancelled.

8. Where the issuance of **Red Alert** for the destination scheduled in the **Journey** is adjusted from a **Black Alert**

9. Claimed under Section B – Medical Expenses arising from the same cause or event.

Section J – Trip Interruption (Applicable To Executive Comprehensive Plan & Standard Comprehensive Plan Only)

(a) **Special Occasion Interruption:**

In the event of:

1. The sudden and unexpected death of an **Insured Person,** an **Immediate Family Member** or **Travel Companion** or **Business Partner**;

2. The **Bodily Injury** or **Sickness** of an **Insured Person** or **Travel Companion or Business Partner**;

3. The **Journey** being delayed due to adverse weather, natural disaster, **Strike** involving the employees of the operator of a **Public Conveyance**, mechanical fault of a **Public Conveyance,** hijacking or acts of terrorism;

Which directly results in the **Insured Person** missing a **Special Occasion** or being unable to use the ticket for the **Special Occasion**, **The Company** will reimburse, up to the **Sum Insured** stated in Section J(a) of the **Schedule of Benefits**, either the actual cost of the unused ticket for the **Special Occasion** forfeited by the **Insured Person**, or the stated face value of the ticket, whichever is lower.

Special Condition to Section J(a):

1. Any claim under this Section J(a) must be accompanied by documents relating to the occurrence of the incident and the original unused ticket for the **Special Occasion**;

2. Where the **Special Occasion** is missed as a result of **Strike**, mechanical fault, hijacking or acts of terrorism as stated in J(a)(3) above, written confirmation from the carrier associated with the delay stating the actual local arrival time at the stated destination and the reason for the delay in reaching that destination is required.

3. Failure to provide the documents required by this condition precedent will result in **The Company** having no liability under this Section J(a) for the **Insured Person**'s actual cost of the unused ticket forfeited.

Exclusions to Section J(a):

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This Section J(a) does not cover:

1. Any amount/loss which is payable to, refundable to, or recoverable by, an **Insured Person** from any other source of indemnity, reimbursement or compensation.

2. Any amount which an **Insured Person** is not legally obliged to pay.

3. Claims arising from a condition which at the time of booking the **Special Occasion** existed or might reasonably have been anticipated as being likely to result in the **Special Occasion** being missed.

(b) **Trip Curtailment:**

In the event that a **Journey** is curtailed because an **Insured Person** must return directly to **Hong Kong** following:

1. His/her **Bodily Injury** or **Sickness**; or

2. The sudden and unexpected death, **Bodily Injury** or **Sickness** of an **Immediate Family Member**, **Travel Companion** or **Business Partner**; or

3. The unexpected occurrence of a **Strike**, **Riot,** civil commotion, epidemic, hijacking, acts of terrorism or earthquake or similar natural disaster at a destination scheduled in the **Journey** during the **Period of Insurance**, which prevents the **Insured Person** from continuing his/her scheduled **Journey**; or

4. The unexpected issuance during the **Period of Insurance** of a **Black Alert** for a destination scheduled in the **Journey**;

Or in the event that the **Insured Person** dies;

The Company will reimburse any one, and only one, item under (1) to (3) below, whichever is the largest, up to the **Sum Insured** stated in Section J(b) of the **Schedule of Benefits**:

1. The **Insured Person**'s cost of the unused part of the transport and/or accommodation expenses paid in advance and forfeited of **Journey** calculated on a pro rata basis according to the number of unused days of the **Journey** after the **Insured Person** has passed through **Hong Kong** immigration control point on their return to **Hong Kong** or from the date of their death, in event that the receipt does not separate the transport and accommodation expenses; or

2. Additional transport and/or accommodation expenses incurred by the **Insured Person** after the commencement of a **Journey**; or

3. Loss of transport and/or accommodation expenses forfeited by the **Insured Person** after the commencement of a **Journey**.

Red Alert Extension:

In the event that a **Journey** is curtailed because an **Insured Person** must return directly to **Hong Kong** following the unexpected issuance during the **Period of Insurance** of a **Red Alert** for a destination scheduled in the **Journey.**

The Company will reimburse fifty per cent (50%) of any one, and only one, item under (1) to (3) below, whichever is the largest, up to the **Sum Insured** stated in Section J(b) of the **Schedule of Benefits**:

1. The **Insured Person's** cost of the unused part of the transport and/or accommodation expenses paid in advance and forfeited of **Journey** calculated on a pro rata basis according to the number of unused days of the **Journey** after the **Insured Person** has passed through **Hong Kong** immigration control point on their return to **Hong Kong** or from the date of their death, in event that the receipt does not separate the transport and accommodation expenses; or

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2. Additional transport and/or accommodation expenses incurred by the Insured Person after the commencement of a Journey; or

3. Loss of transport and/or accommodation expenses forfeited by the Insured Person after the commencement of a Journey.

(c) **Trip Interruption due to compulsory quarantine:**

In the event that a **Journey** is interrupted due to unexpected compulsory quarantine ordered by national, regional or government or relevant authority, at a destination scheduled in the **Journey** during the **Period of Insurance**, preventing the **Insured Person** from continuing his/her scheduled **Journey**, **The Company** will reimburse, up to the **Sum Insured** stated in Section J(c) of the **Schedule of Benefits**:

1. The **Insured Person's** unused transport and/or accommodation expenses forfeited of the **Journey** calculated on a pro rata basis according to the number of unused days of the **Journey** from the first date of the compulsory quarantine of the **Insured Person**, in the event that the **Insured Person** who is unable to provide the breakdown of the transport and accommodation expenses; and

2. Loss of transport and/or accommodation expenses forfeited by the **Insured Person** after the commencement of a **Journey**.

Special Condition to Section J(c):

1. **The Company**'s total liability under this Section J(c) for all reimbursement under this Section J(c) shall not exceed the **Sum Insured** stated in Section J(c) of the **Schedule of Benefits**.

Special Conditions to Section J:

1. Where a **Journey** is curtailed as a result of **Bodily Injury** or **Sickness** of an **Insured Person** or a **Travel Companion**, that **Bodily Injury** or **Sickness** must be certified by a **Physician** as rendering that **Insured Person** or **Travel Companion** unfit to travel or as being a danger to their life or health.

2. Where a **Journey** is curtailed as a result of **Bodily Injury** or **Sickness** of an **Immediate Family Member** or **Business Partner**, that **Bodily Injury** or **Sickness** must be certified by a **Physician** as being a danger to the life of that **Immediate Family Member** or **Business Partner**.

3. Failure to obtain the certifications required by this condition precedent will result in **The Company** having no liability for the **Insured Person**'s loss which may otherwise have been covered by this Section J.

4. **The Company**'s total liability under this Section J for all loss during the **Period of Insurance** shall not exceed the **Sum Insured** stated in Section J of the **Schedule of Benefits**.

Exclusions to Section J:

This Section J does not cover the whole or any part of the cost of the unused part of a **Journey** or additional transport and/or accommodation expenses incurred by an **Insured Person** to enable him or her to arrive at their scheduled destination, which is:

1. Payable to, refundable to, or recoverable by, an **Insured Person** from any other source of indemnity, reimbursement or compensation.

2. Incurred as a direct or indirect result of a prohibition or regulation issued by any national, regional or local government.

3. Incurred due to the negligence, misconduct or insolvency of the travel agent through whom the **Journey** was booked.

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4. Incurred due to the inability of a tour operator or wholesaler to complete a group tour due to a deficiency in the number of persons.

5. Incurred as a direct or indirect result of financial hardship experienced by an **Insured Person**, changes in an **Insured Person's** circumstances or contractual obligations or an Insured Person's general disinclination to proceed with the **Journey**.

6. Arising from a condition which, at the time of booking a **Journey** or on the date the **Journey** first begins, existed or might reasonably have been anticipated, as being likely to result in the **Journey** being interrupted.

7. Incurred due to failure to follow the advice of a **Physician**.

8. The **Insured Person** fails to obtain and provide a written confirmation/report of the cancellation / interruption with its reason from the **Public Conveyance**.

9. Where the issuance of Red Alert for the destination scheduled in the Journey is adjusted from a Black Alert.

10. Claimed under Section K – Travel Delay arising from the same cause or event.

Section K – Travel Delay (Applicable To Executive Comprehensive Plan & Standard Comprehensive Plan Only)

In the event that a **Public Conveyance** is delayed due to an unanticipated event of adverse weather, natural disaster, **Strike** involving the employees of the operator of a **Public Conveyance**, mechanical fault of a **Public Conveyance**, hijacking or acts of terrorism during the **Period of Insurance**, **The Company** will pay for any one item under Section K (a) to (d) only, whichever is largest, up to the **Sum Insured** stated in Section K of the **Schedule of Benefits**, provided that the **Insured Person** is travelling on a regular route as a fare-paying passenger holding a valid boarding pass/ticket, bearing the scheduled departure time/arrival time and the scheduled route and destination, issued by the operator of the **Public Conveyance** which is legally licenced for such scheduled regular transport.

(a) **Cash benefit**

The Company will pay a cash benefit calculated at the following rate:

The amount stated in Section K(a) of the **Schedule of Benefits** for each and every full six (6) consecutive hour period of delay.

(b) **Forfeited transport and accommodation expenses**

The Company will reimburse the forfeited transport and accommodation expenses up to the amount stated in Section K(b) of the **Schedule of Benefits** if the **Insured Person** eventually decides to cancel the **Journey** after a twenty-four (24) consecutive hour delay of the scheduled **Public Conveyance** which was due to depart from Hong Kong

(c) **Forfeited accommodation expenses**

The Company will reimburse the forfeited accommodation expenses up to the amount stated in Section K(c) of the **Schedule of Benefits** after a twelve (12) consecutive hour period of delay.

(d) **Additional hotel accommodation and Public Conveyance expenses outside Hong Kong** (Only applicable if the departure point is outside **Hong Kong**)

If the period of delay exceeds six (6) consecutive hours, **The Company** will reimburse any reasonable and necessary additional:

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1. Ordinary room accommodation expenses incurred in the place of departure until the first alternative transport is made available to the **Insured Person**; and

2. Economy class ticket of expenses **Public Conveyance** incurred for alternative transport from the place of departure to his/her original planned destination of the **Journey**, up to the amount stated in Section K(d) of the **Schedule of Benefits**.

Special Conditions to Section K:

1. Each period of delay will be calculated by reference to the difference between the scheduled local arrival time stated in the **Insured Person**'s original itinerary for the **Journey** and the **Insured Person**'s actual local arrival time at the same destination. For a **Journey** eventually cancelled after delay, each period of delay will be calculated by reference to the difference between the scheduled local arrival time stated in the **Insured Person**'s original itinerary for the **Journey** and the **Insured Person**'s scheduled local arrival time at the same destination of the first alternative transport arranged by the **Public Conveyance** that the **Insured Person** could have taken if the trip had not been cancelled.

2. Where a **Journey** involves a sequence of connecting transport, the total period of delay will be calculated by reference to the difference between the original scheduled local arrival time at the final destination stated in the **Insured Person**'s original itinerary for the **Journey** and the actual local arrival time at the same destination of the last transport in the sequence. For a **Journey** eventually cancelled after delay, each period of delay will be calculated by reference to the difference between the original scheduled local arrival time at the final destination stated in the **Insured Person**'s original itinerary for the **Journey** and the scheduled local arrival time at the same destination of the last flight in the sequence if the trip had not been cancelled and the **Insured Person** had taken the first available alternative transport arranged by the **Public Conveyance**.

3. An **Insured Person** must take reasonable steps to mitigate any period of delay. Failure to take reasonable steps to mitigate any period of delay as required by this condition precedent will result in **The Company** having no liability under this Section K.

4. Any claim under this Section K must be accompanied by written confirmation from the carrier associated with the delay stating the actual local arrival time at the stated destination and the reason for the delay in reaching that destination. Failure to provide the written confirmation required by this condition precedent will result in **The Company** having no liability under this Section K.

5. Where an **Insured Person** suffers more than one type of loss listed above in this Section K as a result of the same delay, **The Company**'s liability under this Section K shall be limited to payment for one (1) item K(a) to K(d) only. The item shall be the applicable item which attracts the largest **Sum Insured** stated in Section K of the **Schedule of Benefits.**

6. **The Company**'s total liability under this Section K during the **Period of Insurance** shall not exceed the maximum amount under Section K of the **Schedule of Benefits**.

Exclusions to Section K:

This Section K does not cover loss:

1. Arising from the late arrival of an **Insured Person** at any point of departure stated in the **Insured Person**'s original itinerary for the **Journey**, other than late arrival due to **Strike** of the employees of a **Public Conveyance** during the **Period of Insurance**.

2. Arising from an event or occurrence announced on/before the insurance is purchased which might reasonably have been anticipated, at that time, would be likely to result in the **Journey** being delayed.

3. Claimed under Section J – Trip Interruption (except as claimed under **Special Occasion Interruption**) arising from the same cause or event.

4. Any amount which an **Insured Person** is not legally obliged to pay.

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Section L – Baggage Delay (Applicable To Executive Comprehensive Plan & Standard Comprehensive Plan Only)

In the event that, during the **Period of Insurance,** checked-in baggage is delayed, misdirected or temporarily misplaced by a **Public Conveyance** for more than six (6) consecutive hours after an **Insured Person**'s arrival at the transportation terminal of the destination stated in the **Insured Person**'s original itinerary for the **Journey**, **The Company** will reimburse the **Insured Person** for the cost of purchasing essential toiletries and clothing, up to the **Sum Insured** stated in Section L of the **Schedule of Benefits**.

Special Conditions to Section L:

1. Any claim under this Section L must be accompanied by written confirmation from the carrier associated with the delay, misdirection or temporary misplacement of the baggage for more than six (6) consecutive hours after an **Insured Person**'s arrival at the airport of the destination stated in the **Insured Person**'s original itinerary for the **Journey**. Failure to provide the written confirmation required by this condition precedent will result in **The Company** having no liability under this Section L.

Exclusions to Section L:

This Section L does not cover the cost of purchasing essential toiletries and clothing:

1. For which an **Insured Person** has received or is duly compensated from the carrier or operator responsible for the delay, misdirection or temporary misplacement of the baggage.
2. Where the arrival terminal is in **Hong Kong**.
3. Where the delay, misdirection or temporary misplacement of the baggage is unexplained or is due to confiscation or detention by customs or any other authority.
4. For **baggage** forwarded in advance of a **Journey** or separately mailed or shipped in a **Public Conveyance** other than a **Public Conveyance** carrying the **Insured Person** at the same time.
5. Claimed under Section F – Personal Property and arising from the same cause or event.

Section M – Personal Liability (Applicable To Executive Comprehensive Plan & Standard Comprehensive Plan Only)

In the event that an **Insured Person** becomes legally liable to pay compensation for an **Accident** occurring during the **Period of Insurance** which causes **Bodily Injury** to any other person or destruction of the property of others, **The Company** will pay that compensation on behalf of the **Insured Person** up to the **Sum Insured** stated in Section M of the **Schedule of Benefits**.

Exclusions to Section M:

This Section M does not cover compensation:

1. Arising from **Bodily Injury** sustained by an **Immediate Family Member** or by a person in the **Insured Person**'s custody or control.
2. Arising from damage to property which belongs to the **Insured Person** or an **Immediate Family Member** or a **Travel Companion** which is in the Insured Person's custody or control.
3. By way of damages for breach of any liability assumed under a contract.
4. For liability arising from the ownership, possession, lease or rental of any vehicle, aircraft, firearm or animal.
5. For liability arising from the undertaking of any trade or profession.

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6. For any claim of whatever nature directly or indirectly caused by (a) ionizing radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste or from combustion of nuclear fuel, or (b) the radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component of such assembly.

Section N – Home Contents Protection (Applicable To Executive Comprehensive Plan & Standard Comprehensive Plan Only)

In the event of loss of or damage to **Household Contents** as a result of burglary during the **Period of Insurance** involving the use of forcible and violent entry to or exit from the **Principal Home** whilst the **Principal Home** is uninhabited, **The Company** will pay an **Insured Person** the replacement cost of the **Household Contents** up to the **Sum Insured** stated in Section N(a) of the **Schedule of Benefits**.

Special Conditions to Section N:

1. The local police or equivalent local law enforcement officials must be notified within twenty-four (24) hours of the discovery of the occurrence of any event which may give rise to a claim under this Section N. The written police report of such notification must also be provided to **The Company**. Failure to give the notice required or failure to provide the report required by this condition precedent will result in **The Company** having no liability under this Section N.

2. **The Company**'s maximum liability for each and every item of lost or damaged **Household Contents** is the amount stated in Section N(b) of the **Schedule of Benefits**.

3. Where any item of lost or damaged **Household Contents** forms part of a pair or set, **The Company**'s maximum liability for that item and that pair or set will be restricted to the amount stated in Section N(b) of the **Schedule of Benefits**.

4. **The Company**'s total liability under this Section N for all items of **Household Contents** owned by the same **Insured Person** and lost or damaged as a result of burglary during the **Period of Insurance** shall not exceed the **Sum Insured** stated in Section N(a) of the **Schedule of Benefits**.

Exclusions to Section N:

This Section N does not cover:

1. Any special or unique value possessed by any item of lost or damaged **Household Contents** forming part of a pair or set.

2. Replacement costs which are covered for the same risk by any other insurance.

3. Any amount/loss which is payable, refundable to, or recoverable by, an **Insured Person** from any other source of indemnity, reimbursement or compensation.

Section O – Rental Vehicle Excess (Applicable To Executive Comprehensive Plan & Standard Comprehensive Plan Only)

During the **Period of Insurance** when the **Insured Person** is outside **Hong Kong**, in event of loss or damage to the **Rental Vehicle** caused by an **Accident** whilst the **Rental Vehicle** is under the control of the **Insured Person** during the rental period, **the Company** will reimburse the respective excess or deductible of a comprehensive motor insurance which the **Insured Person** becomes legally liable to pay, up to the **Sum Insured** as stated in Section O of the **Schedule of Benefits**.

Special Condition to Section O:

1. The **Rental Vehicle** must be rented from a licensed rental agency.

2. The **Insured Person** must take up all comprehensive motor insurance against loss or damage to **Rental Vehicle** during the rental period.

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3. **Insured Person** must comply with all requirements of the rental organization under the hiring agreement of the **Rental Vehicle** and of the insurer under such insurance, as well as the laws, rules and regulations of the country.

Exclusions to Section O:

This Section O does not indemnify the **Insured Person** in respect of, any claim which is, directly or indirectly, caused by, a consequence of, or arises in connection with or is contributed to by any the following:

1. Loss or damage arising from operation of the **Rental Vehicle** in violation of the terms of the rental agreement or loss or damage which occurs beyond the limits of any public roads or in the violation of laws, rules and regulations of the country.

2. Loss or damage arising from wear and tear, gradual deterioration, damage from insects or vermin, inherent vice, latent defect or damage.

3. Any Non Operation Charge (NOC), loss of use charge.

Section P – Credit Card Protection (Applicable To Executive Comprehensive Plan & Standard Comprehensive Plan Only)

If an **Insured Person** sustains **Bodily Injury** and, as direct and unavoidable result, suffers **Accidental** death within twelve (12) consecutive months of that Bodily Injury, **The Company** will pay up to the **Sum Insured** stated in Section P of the **Schedule of Benefits** for any outstanding balance on the deceased **Insured Person**'s credit card(s) for goods purchased by the deceased **Insured Person** during the **Journey**.

Exclusions to Section P:

This Section P does not cover:

1. Interest accrued or financial charges on the outstanding expenses of the deceased **Insured Person**'s credit card.

2. Any outstanding balance on the deceased **Insured Person**'s credit card which is covered for the same risk by any other insurance.

3. **Sickness**, disease or bacterial infection.

4. Any amount/loss which is payable, refundable to, or recoverable by, an **Insured Person** from any other source of indemnity, reimbursement or compensation.

Section Q – Golfers Hole-In-One

If an **Insured Person** achieves a "Hole-in-One" whilst playing golf at any recognized golf course outside Hong Kong during the **Period of Insurance**, **The Company** will pay the cash benefit, up to the **Sum Insured** stated in Section Q of the **Schedule of Benefits**.

Special Conditions to Section Q:

1. Any claim under this Section Q must be accompanied by proof of a signed/countersigned score card or signed certificate which recording the event issued by the recognized golf course on which the Hole-in-One occurred. Failure to provide such written proof as required by this condition precedent will result in **The Company** having no liability under this Section Q.

Exclusions to Section Q:

This Section Q does not cover:

1. **Insured Person** under eighteen (18) years of age on the first day of the **Period of Insurance**.

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2. **Insured Person** who is a **Professional Golfer**.

Section R – Amateur Sport Optional Benefit (If Applicable)

Section R is subject to the payment of additional premium:

The **Insured Person** can either claim under Benefit R(I) Golf Benefit or Benefit R(II) Skiing or Diving Benefit, during the **Period of Insurance**.

Special Conditions to Section R:

1. Under no circumstances shall **The Company's** total liability under this Section R for all claims related to **Sports Equipment** during the **Period of Insurance** exceed the **Sum Insured** stated in Section R of the **Schedule of Benefits** and **The Company's** maximum liability for all **Sports Equipment** lost, stolen or damaged which forms part of a pair or set will be restricted to the amount stated in Section R of the **Schedule of Benefits** for that item and/or that pair or set.

(I) **Golf Benefit**

(a) **Loss or Damage of Golf Equipment**

Subject to a reduction or allowance for physical deterioration, depreciation or obsolescence, **The Company** will indemnify, at its absolute discretion**,** reinstate, repair or replace **Golf Equipment** lost, stolen or damaged during the **Period of Insurance**, up to the **Sum Insured** stated in Section R(I)(a) of the **Schedule of Benefits**.

Special Conditions to Section R(I)(a) :

1. The local police or equivalent local law enforcement officials must be notified within twenty-four (24) hours of the occurrence of any **Golf Equipment** being lost, stolen or damaged by the wilful act of a third party which may give rise to a claim under this Section R(I)(a). The written policy report of such notification must also be provided to **The Company**. Failure to give the notice required or failure to provide the report required by this condition precedent will result in **The Company** having no liability under this Section R(I)(a).

2. If the loss, theft or damage occurs in transit, the **Public Conveyance** carrier must be promptly notified of the loss or damage within twenty-four (24) hours of the discovery of the loss or damage. The written report by the **Public Conveyance** carrier of such notification must also be provided to **The Company**. Failure to give the notice required or failure to provide the report required by this condition precedent will result in **The Company** having no liability under this Section R(I)(a) of the policy.

3. **The Company's** maximum liability for loss or theft of, or damage to, each item of **Golf Equipment** during the **Period of Insurance** will be restricted to the amount stated in Section R(I)(a) of the **Schedule of Benefits**.

4. Where any item of lost, stolen or damaged **Golf Equipment** forms part of a pair or set, **The Company's** maximum liability for that item and/or that pair or set will be restricted to the amount stated in Section R(a)(i) of the **Schedule of Benefits**.

5. **The Company's** total liability under this Section R(a)(i) for all loss, theft or damage in connection with **Golf Equipment** during the **Period of Insurance** shall not exceed the **Sum Insured** stated in Section R(I)(a) of the **Schedule of Benefits**.

6. Upon any payment being made under this Section R(I)(a), **The Company** shall be entitled to take and retain the benefit and value of any recovered or damaged **Golf Equipment** and to deal with salvage at its absolute discretion.

Exclusions to Section R(I)(a) :

This Section R(I)(a) does not cover:

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1. Loss, theft or damage arising from an **Insured Person's** negligence including, but not limited to, leaving **Golf Equipment** unattended.

2. Any unexplained loss, theft or damage to **Golf Equipment** which was left unattended in a vehicle (except locked in the trunk) or **Public Conveyance** or other public place.

3. Loss of, or damage to, any **Golf Equipment** due to moth, vermin, wear and tear, atmospheric or climatic conditions, gradual deterioration, mechanical or electrical failure, any process of cleaning, restoring, repairing, alteration, confiscation or detention by customs or any other authority.

4. Loss or theft of, or damage to, hired or leased equipment or any **Golf Equipment** forwarded in advance of a **Journey** or separately mailed or shipped in a **Public Conveyance** other than a **Public Conveyance** carrying the **Insured Person** at the same time.

(b) **Hiring Cost of Golf Equipment**

In the event that, during the **Period of Insurance, Golf Equipment** is delayed, misdirected or temporarily misplaced by a **Public Conveyance** or the **Insured Person**'s **Golf Equipment** is lost, stolen or damaged as covered under Section R(I)(a), resulting in the **Insured Person** needing to hire **Golf Equipment** for temporary use, **The Company** will reimburse the **Insured Person** for the actual cost of hiring **Golf Equipment**, up to the **Sum Insured** stated in Section R(I)(b) of the **Schedule of Benefits**.

Special Condition to Section R(I)(b) :

1. Any claim as a result of delayed, misdirected or temporarily misplaced **Golf Equipment** by a **Public Conveyance** under this Section R(I)(b) must be accompanied by written confirmation from the carrier associated with the delay, misdirection or temporary misplacement of the **Golf Equipment**. Failure to provide the written confirmation required by this condition precedent will result in **The Company** having no liability under this Section R(I)(b).

Exclusions to Section R(I)(b) :

This Section R(I)(b) does not cover:

1. Loss or theft of, or damage to, hired or leased equipment or any **Golf Equipment** forwarded in advance of a **Journey** or separately mailed or shipped in a **Public Conveyance** other than a **Public Conveyance** carrying the **Insured Person** at the same time.

2. Where the delay, misdirection or temporary misplacement of the **Golf Equipment** is unexplained or is due to confiscation or detention by customs or any other authority.

(c) **Golf Interruption:**

In the event of:

1. The sudden and unexpected death of an **Insured Person,** an **Immediate Family Member** or **Travel Companion** or **Business Partner;** or

2. The **Bodily Injury** or **Sickness** of an **Insured Person;** or

3. The **Journey** being delayed due to adverse weather, natural disaster, **Strike** involving the employees of the operator of a **Public Conveyance**, mechanical fault of a **Public Conveyance** or hijacking;

which directly prevents the **Insured Person** from participating in a planned golf activity, **The Company** will reimburse the following costs which have been forfeited by the **Insured Person**:

- The actual cost of booking the golf course; and

- The actual cost of hiring the **golf equipment**; and

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- The actual tuition cost

up to the **Sum Insured** stated in Section R(I)(c) of the **Schedule of Benefits**.

Special Condition to Section R(I)(c) :

1. Any claim under this Section R(I)(c) must be accompanied by documents relating to the occurrence of the incident which interrupts the golf activity and the original receipts for the golf activity.

2. Where the cancellation is as a result of **Bodily Injury** or **Sickness** of an **Insured Person**, that **Bodily Injury** or **Sickness** must be certified by a **Physician** as rendering that **Insured Person** unfit to participate in the golf activity or as being a danger to their life or health.

3. Where the cancellation is as a result of **Strike**, mechanical fault or hijacking as stated in (c)(3) above, written confirmation from the carrier associated with the delay stating the actual local arrival time at the stated destination and the reason for the delay in reaching that destination is required.

4. Failure to provide the documents required by this condition precedent will result in **The Company** having no liability under this Section R(I)(c) for the **Insured Person's** actual loss of the covered cost mentioned under Section R(I)(c) which is forfeited.

Exclusions to Section R(I)(c) :

1. Any amount which an **Insured Person** is not legally obliged to pay.

(II) **Skiing or Diving Benefit**

(a) **Loss or damage of Skiing Equipment or Diving Equipment**

Subject to a reduction or allowance for physical deterioration, depreciation or obsolescence, **The Company** will indemnify, at its absolute discretion**,** reinstate, repair or replace **Skiing Equipment** or **Diving Equipment** lost, stolen or damaged during the **Period of Insurance**, up to the **Sum Insured** stated in Section R(II)(a) of the **Schedule of Benefits**.

Special Conditions to Section R(II)(a)

1. The local police or equivalent local law enforcement officials must be notified within twenty-four (24) hours of the occurrence of any **Skiing Equipment** or **Diving Equipment** lost, stolen or damaged by the wilful act of a third party and which may give rise to a claim under this Section R(II)(a). The written policy report of such notification must also be provided to **The Company**. Failure to give the notice required by this condition or failure to provide the report required precedent will result in **The Company** having no liability under this Section R(II)(a).

2. If loss, theft or damage occurs in transit, the **Public Conveyance** carrier must be promptly notified of the loss or damage within twenty-four (24) hours of the discovery of the loss or damage. The written report by the **Public Conveyance** carrier of such notification must also be provided to **The Company**. Failure to give the notice required or failure to provide the report required by this condition precedent will result in **The Company** having no liability under this Section R(II)(a) of the policy.

3. **The Company**'s maximum liability for loss or theft of, or damage to, each item of **Skiing Equipment** or **Diving Equipment** during the **Period of Insurance** will be restricted to the amount stated in Section R(II)(a) of the **Schedule of Benefits**.

4. Where any item of lost, stolen or damaged **Skiing Equipment** or **Diving Equipment** forms part of a pair or set, **The Company**'s maximum liability for that item and that pair or set will be restricted to the amount stated in Section R(II)(a) of the **Schedule of Benefits**.

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5. **The Company**'s total liability under this Section R(II)(a) for all loss, theft or damage in connection with **Skiing Equipment** or **Diving Equipment** during the **Period of Insurance** shall not exceed the **Sum Insured** stated in Section R(II)(a) of the **Schedule of Benefits**.

6. Upon any payment being made under this Section R(II)(a), **The Company** shall be entitled to take and retain the benefit and value of any recovered or damaged **Skiing Equipment** or **Diving Equipment** and to deal with salvage at its absolute discretion.

Exclusions to Section R(II)(a) :

This Section R(II)(a) does not cover:

1. Loss, theft or damage arising from an **Insured Person**'s negligence including, but not limited to, leaving **Skiing Equipment** or **Diving Equipment** unattended.

2. Any unexplained loss, theft or damage to **Skiing Equipment** or **Diving Equipment** which was left unattended in a vehicle (except locked in the trunk) or **Public Conveyance** or other public place.

3. Loss of, or damage to, any **Skiing Equipment** or **Diving Equipment** due to moth, vermin, wear and tear, atmospheric or climatic conditions, gradual deterioration, mechanical or electrical failure, any process of cleaning, restoring, repairing, alteration, confiscation or detention by customs or any other authority.

4. Loss or theft of, or damage to, hired or leased equipment or any **Skiing Equipment** or **Diving Equipment** forwarded in advance of a **Journey** or separately mailed or shipped in a **Public Conveyance** other than a **Public Conveyance** carrying the **Insured Person** at the same time.

(b) **Hiring cost of Skiing Equipment or Diving Equipment**

In the event that, during the **Period of Insurance**, **Skiing Equipment** or **Diving Equipment** is delayed, misdirected or temporarily misplaced by a **Public Conveyance** or the **Insured Person**'s **Skiing Equipment** or **Diving Equipment** is lost, stolen or damaged as covered under Section R(II)(a), resulting in the **Insured Person** needing to hire **Skiing Equipment** or **Diving Equipment** for temporary use, **The Company** will reimburse the **Insured Person** for the actual cost of hiring **Skiing** or **Diving Equipment**, up to the **Sum Insured** stated in Section R(II)(b) of the **Schedule of Benefits**.

Special Condition to Section R(II)(b) :

1. Any claim as a result of delayed, misdirected or temporarily misplaced **Skiing Equipment** or **Diving Equipment** by a **Public Conveyance** under this Section R(II)(b) must be accompanied by written confirmation from the carrier associated with the delay, misdirection or temporary misplacement of the **Skiing Equipment** or **Diving Equipment**. Failure to provide the written confirmation required by this condition precedent will result in **The Company** having no liability under this Section R(II)(b).

Exclusions to Section R(II)(b) :

This Section R(II)(b) does not cover:

1. Loss or theft of, or damage to, hired or leased equipment or any **Skiing Equipment or Diving Equipment** forwarded in advance of a **Journey** or separately mailed or shipped in a **Public Conveyance** other than a **Public Conveyance** carrying the **Insured Person** at the same time.

2. Where the delay, misdirection or temporary misplacement of the **Skiing Equipment or Diving Equipment** is unexplained or is due to confiscation or detention by customs or any other authority.

(c) **Skiing or Diving Interruption**

In the event of:

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1. The sudden and unexpected death of an **Insured Person**, an **Immediate Family Member** or **Travel Companion** or **Business Partner**;

2. The **Bodily Injury** or **Sickness** of an **Insured Person**; or

3. The **Journey** being delayed due to adverse weather, natural disaster, **Strike** involving the employees of the operator of a **Public Conveyance**, mechanical fault of a **Public Conveyance** or hijacking;

Which directly prevents the **Insured Person** from participating in a planned skiing or diving activity, **The Company** will reimburse the following costs which have been forfeited by the **Insured Person**:

- The actual cost of the diving course or diving package; or the actual cost of the ski pass; and
- The actual cost of hiring the **diving equipment** or **skiing equipment**; and
- The actual tuition cost.

up to the **Sum Insured** stated in Section R(II)(c) of the **Schedule of Benefits**.

Special Condition to Section R(II)(c) :

1. Any claim under this Section R(II)(c) must be accompanied by the documents relating to the occurrence of the incident which interrupts the skiing or diving activity and the original receipts for the diving or skiing activity.

2. Where the cancellation is as a result of **Bodily Injury** or **Sickness** of an **Insured Person**, that **Bodily Injury** or **Sickness** must be certified by a **Physician** as rendering that **Insured Person** unfit to participate in the skiing or diving activity or as being a danger to their life or health.

3. Where the cancellation is as a result of **Strike**, mechanical fault or hijacking as stated in (c)(iii) above, written confirmation from the carrier associated with the delay stating the actual local arrival time at the stated destination and the reason for the delay in reaching that destination is required.

4. Failure to provide the documents required by this condition precedent will result in **The Company** having no liability under this Section R(II)(c) for the **Insured Person's** actual loss of the covered cost mentioned under Section R(II)(c) which forfeited.

Exclusions to Section R(II)(c) :

1. Any amount which an **Insured Person** is not legally obliged to pay.

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Part IV – General Exclusions

General Exclusions Applicable To All Sections

This policy does not cover loss, consequential loss or liability arising from:

1. Any **Pre-existing Medical Condition**, congenital or heredity condition.

2. Travelling abroad contrary to the advice of a **Physician**, or for the purpose of obtaining medical treatment or services.

3. Suicide, attempted suicide or intentional self-infliction of **Bodily Injury**.

4. Any condition resulting from pregnancy, abortion, childbirth, miscarriage, infertility and other complications arising therefrom, cosmetic surgery or venereal disease.

5. Dental care (unless resulting from **Accidental Bodily Injury** to teeth which were sound and natural before the **Accident**).

6. Mental or nervous disorders, insanity, psychiatric condition or any behavioural disorder.

7. War (whether declared or not), invasion, act of foreign enemies, civil war, revolution, rebellion, insurrection, coup, hostilities (whether war is declared or not).

8. Direct participation in a **Strike**/ **Riot**/civil commotion/acts of terrorism or from the **Insured Person** performing duties as a member of armed forces, or armed service or disciplined forces (which shall include but not be limited to policemen, customs officers, firemen, immigration officers/inspectors and correctional service officers/inspectors etc.), or as a volunteer and engaged in war or crime suppression.

9. Participation in:

    a. Any extreme sports and sporting activities that presents a high level of inherent danger (i.e. involves a high level of expertise, exceptional physical exertion, highly specialized gear or stunts) including but not limited to cliff jumping, horse jumping, stunt riding, big wave surfing and canoeing down rapids; unless such sports or sporting activities are usual tourist activities that are accessible to the general public without restriction (other than height or general health or fitness warnings) and which are provided by a recognized local tour operator, providing that an Insured Person is acting under the guidance and supervision of qualified guides and/ or instructors of the tour operators when carrying out such tourist activities.

    b. Any professional competitions or sports in which an Insured Person receives remuneration, sponsorship or any forms of financial rewards, any stunt activity, off-piste skiing,

    c. Racing, other than on foot but this does not include long-distance running more than ten (10) kilometres, biathlons and triathlons,

    d. Private white water rafting grade 4 and above,

    e. Any kind of climbing , Mountaineering or Trekking or ordinarily necessitating the use of specialized equipment including but not limited to crampons, pickaxes, anchors, bolts, carabineers and lead-rope or top-rope anchoring equipment,

    f. Scuba diving unless an Insured Person holds a PADI certification (or similar recognized qualification) or when diving with a qualified instructor. The maximum depth that this policy covers is as specified under the Insured Person's PADI certification (or similar recognized qualification). However, in any situation, it should not be deeper than thirty (30) meters and he/she must not be diving alone.

10. Prohibition or regulation by any government, or detention or destruction by customs or any other authority.

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11. An unlawful, willful, malicious or reckless act or omission of an **Insured Person**.

12. The actions of an **Insured Person** while under the influence of alcohol or drugs to the extent of legal impairment.

13. Riding in any aircraft other than as a passenger in an aircraft.

14. Any dishonest or criminal activity.

15. An **Insured Person**'s failure to mitigate the loss.

16. AIDS or AIDS Related Complex, any **Bodily Injury** or **Sickness** commencing at the time of or subsequent to a zero-positive test for HIV or related disease, or any other sexually transmitted diseases.

17. The **Insured Person** engaging in manual labor or non-clerical or hazardous work including but not limited to offshore drilling, mineral extraction, handling of explosives, site working, stunt works and aerial photography.

18. Any losses or expenses with respects to Cuba.

19. Any person or entity who is not a party to this policy shall have no rights under the Contracts (Rights of Third Parties) Ordinance (Cap 623 of the Laws of Hong Kong) to enforce any terms of this policy.

Part V – Extensions

1. Hijack Extension: where the **Journey** is delayed due to an **Insured Person** being a victim of a hijacking during the **Period of Insurance**, the **Period of Insurance** shall be automatically extended by a maximum period of twelve (12) consecutive months from the date of the hijacking or, until the **Insured Person** passes through **Hong Kong** immigration control point on their return to **Hong Kong,** whichever is earliest.

2. Travel Extension: where the duration of a **Journey** exceeds the **Period of Insurance** for any reason outside an **Insured Person**'s control, the **Period of Insurance** shall be automatically extended without charge by a maximum period of ten (10) calendar days or until the **Insured Person** passes through **Hong Kong** immigration control point on their return to **Hong Kong**, whichever is the earliest.

Part VI – General Conditions

1. Validity of Policy: (a) This policy is only valid for leisure travel or business travel (limited to administrative, clerical and non-manual works only) and shall not apply to persons undertaking expeditions, treks or similar journeys. (b) The **Insured Person** must be fit to travel.

2. Entire Contract: This policy, together with its endorsement(s), attachment(s) (if any), any application form completed by an **Insured Person**, together with any document(s) attached to that application form or referred to in it, comprise and constitute the entire contract of insurance. This policy shall not be modified except by written amendment signed by an authorized representative of **The Company**.

3. Sum Insured under each Section: Once the **Sum Insured** available to an **Insured Person** under any Section of this policy has been exhausted, that **Sum Insured** will not be reinstated and **The Company** will have no further liability under that Section to that **Insured Person**.

4. Sum Insured paid out: Each and every benefit paid under this policy will erode the relevant **Sum Insured** available to an **Insured Person**, leaving only the balance of the relevant **Sum Insured** available to pay any remaining benefit claims which may be presented to **The Company** by that **Insured Person**. **The Company**'s total liability under each Section of this policy for each **Insured Person** involved in an **Accident** shall not exceed the relevant **Sum Insured**.

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5. Duplicate Coverages: Each **Insured Person** agrees that, if they are covered under more than one TravelEase Single Trip Travel Insurance or other travel insurance issued by **The Company**:

   (a) **The Company** will consider the **Insured Person** to be insured under the policy which provides the highest amount of benefit; or

   (b) **The Company** will consider the **Insured Person** to be insured under the policy which was issued first if the benefit amount is the same.

   In any case, **The Company** will refund the premium paid, without interest, to the **Insured Person** for the policy that does not provide cover.

6. Notice and Sufficiency of Claim: Written notice of claim must be given to **The Company** as soon as is reasonably possible and in any event within thirty (30) days from the first day of the event giving rise to the claim under this policy. Notice given by or on behalf of an **Insured Person** to **The Company** with information sufficient to identify the **Insured Person** shall be deemed valid notice to **The Company**. **The Company**, upon receiving a notice of claim, will provide to an **Insured Person** such forms as it usually provides for filing proof of claim. The **Insured Person** shall, at his/her own expense, provide such certificates, information and evidence to **The Company** as it may from time to time require in connection with any claim under this policy and in the form prescribed. Proof of all claims must be submitted to **The Company** within one-hundred-eighty (180) days from the first day of the event giving rise to a claim.

7. Claims Investigation: In the event of a claim, **The Company** may make any investigation it deems necessary and the **Insured Person** shall co-operate fully with such investigation. Failure by the **Insured Person** to co-operate with **The Company**'s investigation may result in denial of the claim.

8. Examination of Books and Records: **The Company** may examine the **Insured Person**'s books and records relating to this policy at any time during the **Period of Insurance** and up to three (3) years after the expiration of this policy or until final adjustment and settlement of all claims under this policy.

9. Physical Examinations and Autopsy: **The Company**, at its expense, has the right to have the **Insured Person** examined as often as reasonably necessary while a claim is pending. It may also have an autopsy carried out unless prohibited by law.

10. Other Insurance (Applicable to Sections B, F, G, H, I, J, K, L, M, N, O, P and R): If a loss covered by this policy is also covered under any other valid insurance (and regardless of whether that other insurance is stated to be primary, contributory, excess, contingent or otherwise), this policy will be subject to all of its terms and conditions, only cover that loss to the extent that the loss exceeds any amount recovered under the other insurance.

11. Legal Action: No legal action shall be brought to recover on this policy until sixty (60) days after **The Company** has been given written proof of loss. No such action shall be brought after three (3) years from the date of loss.

12. Rights of Recovery: In the event that authorization of payment and/or payment is made by **The Company** or on its behalf by its authorized representatives, to include the **Authorised Assistance Service Provider**, **The Company** reserves the right to recover against the **Insured Person** the full sum which has been paid, or for which **The Company** is liable, to the **Hospital** to which the **Insured Person** has been admitted, less the liability of **The Company** under the terms of this policy.

13. Subrogation: **The Company** is entitled to subrogate the **Insured Person**'s right of recovery/indemnity against any third party and 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 event giving rise to a claim under this policy. The **Insured Person** should co-operate and endeavour to secure such rights and shall not take any action to prejudice such rights.

14. Assignment: No assignment of interest under this policy shall be binding upon **The Company**.

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15. To Whom Indemnities Payable: Any death payment will be paid to the legal representatives of the Insured Person's estate. Any payment under Section C – Chubb Assistance – 24-Hour Worldwide Assistance Services will be paid to the **Authorised Assistance Service Provider** or another provider of services rendered to the **Insured Person**. All other benefits will be paid to the **Insured Person**.

16. Currency: The **Sum Insured**, benefits and limit of liability stated in the **Schedule of Benefits** and this policy are expressed in Hong Kong dollars. Notwithstanding the first sentence of this policy, losses and/or benefits will be adjusted and paid in Hong Kong dollars or at **The Company**'s option in the currency of the local country. When currency conversion is necessary when applying terms and conditions of the policy, the rates of exchange to be adopted shall be those prevailing at the date of loss as per the exchange rate at the median level quoted on www.oanda.com.

17. Geographical Limit and Operative Time: The geographical limit and operative time shall apply twenty-four (24) hours a day anywhere in the world during the **Period of Insurance** except for Section C – Chubb Assistance – 24 Hour Worldwide Assistance Services, when the geographical limit shall apply anywhere in the world outside **Hong Kong** unless otherwise stated in any endorsement issued by **The Company**.

18. Disclaimer: Section C – Chubb Assistance – 24-Hour Worldwide Assistance Services are arranged by the **Authorised Assistance Service Provider** and the **Authorised Assistance Service Provider** is solely responsible for these services. The **Authorised Assistance Service Provider** is not a subsidiary or an affiliate of Chubb Insurance Hong Kong Limited and Chubb Insurance Hong Kong Limited will not be liable for any loss or damage caused by or relating to this service or any act or omission of the **Authorised Assistance Service Provider**.

19. Cancellation by The Company: **The Company** may cancel this policy at any time by sending written notice, stating the effective date of cancellation, to the **Insured Person**'s last known address as shown in **The Company**'s records. Cancellation will not affect valid claims already notified to **The Company** in accordance with General Condition 6 of this policy.

20. Premium: **The Company** has no liability under this policy until the premium is paid. The premium is deemed to be fully earned on the date this policy is purchased. No refund of premium shall be allowed once the policy has been issued.

21. Mediation: Any dispute or difference arising out of, or in connection with, this policy must first be referred to mediation at the **Hong Kong** International Arbitration Centre (HKIAC) and in accordance with the HKIAC's mediation rules. If the mediation is abandoned by the mediator or otherwise ends without the dispute or difference being resolved, the dispute or difference must be referred to, and resolved by, arbitration at the HKIAC and in accordance with the HKIAC's domestic arbitration rules. If the dispute or difference arising out of, or in connection with, this policy requires medical knowledge (including, but not limited to, questions relating to the **Sum Insured** for any medical service or an operation not listed in the **Schedule of Benefits**) the mediator or arbitrator may, in **The Company**'s reasonable discretion, be a registered medical practitioner or a consultant specialist, surgeon, or **Physician**. If **The Company** refuses to pay any claim under this policy and a dispute or difference arising from that refusal is not referred to mediation and, if necessary, arbitration, within twelve (12) months from the date of refusal, any claim against **The Company** arising from that dispute or difference will be barred.

22. Fraud or Mis-statement: Any false statement made by an **Insured Person** or concerning any claim shall result in **The Company** having the right to void this policy or repudiate liability under it.

23. Jurisdiction: This policy shall be governed and construed in accordance with the laws of **Hong Kong**. Subject to General Condition 21, any dispute under this policy shall be settled in accordance with the laws of **Hong Kong**.

24. Clerical Error: Clerical errors by **The Company** shall not invalidate insurance otherwise valid nor continue insurance otherwise not valid.

25. Breach of Conditions: If the Insured Person is in breach of any of the conditions or provisions of the Policy (including a claims condition), we may decline to pay a claim, to the extent permitted by law.

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26. Interpretation of this Policy: Please note that the English version of this Policy is the official version. This Policy has been provided to you in both English and Chinese languages for ease of reference only. The English version of the Policy will prevail if any dispute arises regarding the interpretation of any part of the Policy.

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

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

Part VII – How to Make A Claim

The Claimant should submit a claim within thirty (30) days of the event taking place to Chubb Claim Centre (www.chubbclaims.com.hk). You can simply scan the below QR code to access the Chubb Claim Centre on your smartphone or tablet.

Alternatively, you can complete a claim form and submit together with the travel documents and the following documents as appropriate to Chubb Insurance Hong Kong Limited within thirty (30) days of the event taking place. Please call 3191 6611 for further assistance.

* For English submission only.

Personal Accident Cover/ Burns Benefit / Credit Card Protection

- Medical report or certificate issued by a **Physician** certifying the degree or severity of disability
- Police report, where relevant

Accidental Death

- Death certificate
- Coroner's report
- Police report, where relevant
- In the event of a disappearance, presumption of death as proclaimed by court
- **Hospital Cash/ Medical Expenses**Diagnosis and treatment, including patient name and date of diagnosis, certified by a **Physician**
- Original **Hospital** bill/receipt with itemized list issued by a **Hospital**
- Original receipt for purchase of **Medical Equipment**, where relevant

Personal Property/Personal Money/Loss of Documents

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- Original receipts, including date of purchase, price, model and type of items lost or damaged
- Photos of the damaged items showing the extent of the damage
- Copy of notification to airline/**Public Conveyance** and their official acknowledgement in writing when loss of damage has occurred in transit
- Police report (which must be made within 24 hours of the occurrence)
- Copy of notification to the issuing authority in respect of loss of traveler's cheques (which must be made within 24 hours of the occurrence)

Trip Cancellation/Trip Interruption/Trip Curtailment

- Original unused ticket for **Special Occasion**
- All bills, receipts and coupons
- Diagnosis and treatment, including patient name and date of diagnosis, certified by a **Physician**
- Official documentation from airline/**Public Conveyance** including victim's name, date, time, duration and reason for delay

Travel Delay/Baggage Delay

- Official documentation from the airline/**Public Conveyance** including victim's name, date, time, duration and reason of delay
- Original bill/ receipt issued by hotel/airline/**Public Conveyance**
- Original bill/ receipt of essential toiletries and clothing

Home Contents Protection

- Receipts, including date of purchase, price, model and type of items lost or damaged
- Photos of the damaged items showing the extent of the damage
- Police report (which must be made within 24 hours upon return from the **Journey**)

Personal Liability

- Statement on the nature and circumstances of the incident or event (No admission of liability or settlement can be made or agreed upon without our written consent)
- All associated documentation received in connection with the incident or event (including copies of summons, all court documents, solicitors' and other legal correspondence)

Rental Vehicle Excess

- Rental agreement which shows the excess or deductible and terms and conditions of the comprehensive motor insurance
- Original receipt of the excess or deductible from the licensed rental agency
- Police report

Golfer Hole-In-One

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- Signed/countersigned score card or signed certificate which recording the event issued by the recognized golf course on which the Hole-in-One occurred

Amateur Sport Benefit

- Original Receipts, including date of purchase, price, model and type of items lost or damaged
- Copy of notification to airline/**Public Conveyance** and their official acknowledgement in writing when loss or damage has occurred in transit
- Police report (which must be made within 24 hours of the occurrence)
- Diagnosis and treatment, including patient name and date of diagnosis, certified by a **Physician**
- Original receipts for the following: booking of the golf course/diving course or package, ski pass, hiring of **Golf Equipment/Ski Equipment/Diving Equipment** and tuition fee
- Photos of the damaged items showing the extent of the damage

These are some of the required documents for claims. The Company reserves the right to request the Insured Person to provide any other information or documents which are not specified above, if necessary.

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Personal Information Collection Statement

The Company ("**We/Us**") want to ensure that Our **Insured Persons** ("**You**") are confident that any personal data collected by **Us** is treated with the appropriate degree of confidentiality and privacy.

This Personal Information Collection Statement sets out the purposes for which **We** collect and use personally identifiable information provided by **You** ("**Personal Data**"), the circumstances when **Personal Data** may be disclosed and information regarding Your rights to request access to and correction of **Personal Data**.

(a) Purposes of Collection of Personal Data

We will collect and use **Personal Data** for the purposes of providing competitive insurance products and services to **You**, including considering Your application(s) for any new insurance policies and administering policies to be taken out with **Us**, arranging the cover and administering and managing Your and Our rights and obligations in relation to such cover. **We** also collect the **Personal Data** to be able to develop and identify products and services that may interest **You**, to conduct market or customer satisfaction research, and to develop, establish and administer alliances and other arrangements with other organisations in relation to the promotion, administration and use of Our respective products and services. **We** may also use your **Personal Data** in other ways with your consent.

(b) Direct marketing

Only with your consent, **We** may also use your contact, demographic, policy and payment details to contact **You** with marketing information regarding our insurance products by mail, email, phone or SMS. Tick the box below if **You** do not consent to receive such marketing information from **Us**.

(c) Transfer of Personal Data

Personal Data will be kept confidential and **We** will not sell Your **Personal Data** to any third party. **We** limit the disclosure of Your **Personal Data** but, subject to the provisions of any applicable law, Your **Personal Data** may be disclosed to:

(i) third parties who assist **Us** to achieve the purposes set out in paragraphs a and b above. For example, **We** provide it to Our relevant staff and contractors, agents and others involved in the above purposes such as data processors, professional advisers, loss adjudicators and claims investigators, doctors and other medical service providers, emergency assistance providers, insurance reference bureaus or credit reference bureaus, government agencies, reinsurers and reinsurance brokers (which may include third parties located outside Hong Kong);

(ii) Our parent and affiliated companies, or any company within Chubb local and outside Hong Kong;

(iii) the insurance intermediary through which **You** accessed the system;

(iv) provided to others for the purposes of public safety and law enforcement; and

(v) other third parties with your consent.

With regard to the above transfers of **Personal Data**, where applicable, **You** consent to the transfer of Your **Personal Data** outside of Hong Kong.

(d) Access and correction of Personal Data

Under the **Personal Data** (Privacy) Ordinance ("PDPO"), **You** have the right to request access to and correction of **Personal Data** held by **Us** about **You** and **We** will grant **You** access to and correct Your **Personal Data** as requested by **You** unless there is an applicable exemption under the PDPO under which **We** may refuse to do so. **You** may also request **Us** to inform **You** of the type of **Personal Data** held by **Us** about **You**.

Requests for access or correction of **Personal Data** should be addressed in writing to:

Chubb Data Privacy Officer
39/F, One Taikoo Place, 979 King's Road, Quarry Bay, Hong Kong
O +852 3191 6222
F +852 2519 3233
E Privacy.HK@chubb.com

Your request to obtain access or correction will be considered within forty (40) days of Our receipt of Your request. **We** will not charge **You** for lodging a request for access to Your **Personal Data** and if **We** levy any charges for providing information, such charges will not be excessive. No fee is charged for data correction requests.

☐ Please tick if **You** do not consent to receive marketing material from **Us**.

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第一部分 – 保障計劃

根據向**本公司**所支付保費，並按照本保單所載的條文及條款，**本公司**同意按照本保單所載的方式及範圍提供保障。

請詳閱本保單

如本保單所載資料有任何不確之處，請立即將本保單交回本公司以作修正。

		至尊		尊尚	
		基本 (港幣)	綜合 (港幣)	基本 (港幣)	綜合 (港幣)
A. 個人意外					
(a) 乘搭公共交通工具時發生的意外（18 歲至 75 歲）	保額	1,200,000	1,200,000	600,000	600,000
(b) 其他意外（18 歲至 75 歲）	保額	600,000	600,000	300,000	300,000
(c) 意外（18 歲以下）	保額	250,000	250,000	250,000	250,000
B. 醫療費用					
(a) 醫療費用	保額	1,000,000	1,000,000	300,000	300,000
(b) 覆診醫療費用	保額	100,000	100,000	30,000	30,000
(1) 中醫最高限額		3,000	3,000	1,500	1,500
(2) 中醫每日最高限額		150	150	150	150
(3) 醫療用品最高限額	保額	20,000	20,000	10,000	10,000
(c) 創傷輔導保障	保額	20,000	20,000	20,000	20,000
(1) 創傷輔導保障每日最高限額		2,000	2,000	2,000	2,000
C. Chubb Assistance – 24-小時環球支援服務					
(a) 緊急醫療運送／或運返		不設上限	不設上限	不設上限	不設上限
(b) 遺體運返		不設上限	不設上限	不設上限	不設上限
(c) 親友探望	保額	30,000	30,000	10,000	10,000
(d) 小童護送	保額	30,000	30,000	10,000	10,000
(e) Chubb Assistance – 二十四(24)小時電話熱線及轉介服務		適用	適用	適用	適用
D. 住院現金					
(a) 最高限額	保額	不適用	10,000	不適用	3,000
(b) 每日最高保障		不適用	500	不適用	300
E. 燒傷保障	保額	300,000	300,000	150,000	150,000
F. 個人財物					
(a) 最高限額	保額	不適用	20,000	不適用	15,000
(b) 每件／套／對物件的最高限額		不適用	2,000	不適用	1,000
G. 個人金錢	保額	不適用	3,000	不適用	2,000
H. 遺失證件	保額	不適用	20,000	不適用	10,000
I. 取消旅程	保額	不適用	50,000	不適用	20,000
J. 旅程阻礙					
章節 J 最高限額	保額	不適用	50,000	不適用	20,000
(a) 特別活動阻礙	保額	不適用	1,000	不適用	1,000
(b) 縮短旅程	保額	不適用	50,000	不適用	20,000
(c) 因被強制性隔離而中斷旅程	保額	不適用	50,000	不適用	20,000
K. 旅程延誤					
章節 K 最高限額	保額	不適用	3,000	不適用	2,000
支付章節 K (a) 至(d) 內任何一(1)項：					
(a) 現金賠償，按每段延誤	每六(6)小時延誤	不適用	300	不適用	200

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(c) 損失的酒店住宿費用（延誤十二(12)個小時後）	延誤十二(12)個小時後	不適用	3,000	不適用	2,000
(d) 額外海外酒店住宿及公共交通費用（延誤六(6)個小時後）	每六(6)小時延誤	不適用	3,000	不適用	2,000
L. 行李延誤	保額	不適用	2,000	不適用	2,000
M. 個人責任	保額	不適用	2,000,000	不適用	2,000,000
N. 家居財物保障					
(a) 最高限額	保額	不適用	25,000	不適用	10,000
(b) 每件／套／對物件的最高限額		不適用	5,000	不適用	5,000
O. 租用汽車的免責補償費用	保額	不適用	5,000	不適用	3,000
P. 信用卡保障	保額	不適用	30,000	不適用	20,000
Q. 高爾夫球「一桿入洞」	保額	不適用	3,000	不適用	1,000
R. 業餘運動保障（如適用） **章節 R 保障須支付額外的保費：**					
章節 R 業餘運動保障的最高限額	保額	不適用	10,000	不適用	不適用
章節 R 每件／套／對物件的最高限額		不適用	3,000	不適用	不適用
只提供其中一(1)項保障，保障 R(I) 或保障 R(II):					
R(I) 高爾夫球保障					
(a) 高爾夫球用具遺失或損毀	保額	不適用	10,000	不適用	不適用
(b) 租用高爾夫球用具	保額	不適用	3,000	不適用	不適用
(c) 高爾夫球活動阻礙	保額	不適用	5,000	不適用	不適用
R(II) 滑雪或潛水保障					
(a) 滑雪用具或潛水用具遺失或損毀	保額	不適用	10,000	不適用	不適用
(b) 租用滑雪用具或潛水用具	保額	不適用	3,000	不適用	不適用
(c) 滑雪或潛水活動阻礙	保額	不適用	5,000	不適用	不適用
(b) 損失的酒店住宿及公共交通費用（延誤二十四(24)個小時後最終取消旅程）	延誤二十四(24)個小時後	不適用	3,000	不適用	2,000

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第二部分 – 詞彙釋義

在本保單內，下列詞彙應具有以下涵義：

1. **二級程度燒傷**指因燒傷導致的**身體損傷**及經**醫生**診斷為表皮及相連真皮均受損的情況。

2. **三級程度燒傷**指因燒傷導致的**身體損傷**及經**醫生**診斷為皮膚已完全受損或破壞且傷及皮下組織的情況。

3. **意外**或**意外的**指偶然發生的突發、不可預見及意料之外的事件。

4. **Chubb Assistance** 或**授權支援服務供應商**指**本公司**所指定向**受保人**提供海外支援服務的獨立服務供應商。

5. **黑色警示**指由**香港**政府保安局於「外遊警示制度」下就旅遊目的地發出的黑色外遊警示級別，就此定義，**本公司**會配合**香港**政府保安局就「外遊警示制度」的修訂不時作出修改。

6. **身體損傷**指於**受保期間**純粹及完全由**意外**造成並於**受保期間**持續的身體損傷。

7. **商業伙伴**指一名或多名與**受保人**從事同一商業企業並共享利潤及分擔風險的人士。

8. **現金**指屬於**受保人並由受保人**於**旅程**攜帶的現金、鈔票或旅遊支票。

9. **中醫師**指根據《中醫藥條例》（第 549 章）正式註冊為中醫師，惟有關人士不得為**受保人**或**直系家庭成員**。

10. **住院**指須以**住院病人**形式持續入住**醫院**，且**醫院**亦收取病房及膳食費用。

11. **潛水用具**指以下專門用作水肺潛水的用具，浮力控制裝置(BCD)、壓力調節器、圓筒、潛水電腦表、潛水面罩、潛水通氣管、潛水用的腳蹼、潛水鞋、潛水手套及潛水衣。

12. **高爾夫球用具**指以下專門用作高爾夫球活動的用具：高爾夫球桿、高爾夫球袋、桿頭封套、高爾夫手套及高爾夫球鞋。

13. **醫院**指按照其國家法律營運的合法機構，並符合以下所有要求：

    (a) 營運的主要目的是以**住院病人**形式為患病、抱恙或受傷人士提供接待、醫療護理及治療；及

    (b) 在一名或多名駐診**醫生**的監督下才接納以**住院病人**形式入院，而其中一位**醫生**必須隨時當值診症；及

    (c) 維持妥善設施以為**住院病人**提供醫學診斷及治療，並於機構內或由機構控管之地方內提供進行各主要手術之設施；及

    (d) 設有由合資格護士人員提供及監督之全日制護理服務；及

    (e) 任何時候均有最少一名**醫生**及一名合資格護士當值；及

    (f) 「**醫院**」一詞之釋義不包括以下：

    - 精神病院、主要提供精神病科或包括弱智等心理病治療之機構，以及醫院之精神科病部門；
    - 老人院、療養院、戒毒中心或戒酒中心；

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- 水療或自然療法診所、療養或復康中心，醫院內主要為吸毒者或酗酒者提供地方或作為護理、復康、康復治療、延續護理設施或療養院的特別單位。

14. **香港**指香港特別行政區。

15. **家居財物**指被爆竊時由**受保人**擁有且位於其**主要住所**的財物，惟不包括鑽石、寶石、古董、名畫、藝術品、珠寶和配件（包括但不只限於例如水晶、耳飾、項鏈、戒指或領針）或現金。

16. **直系家庭成員**指**受保人**的配偶、父母、配偶之父母、祖父母、子女、兄弟姐妹、孫子女或法定監護人。

17. **受保人**指名列**保單承保表**或後續批註（如有）內的一名或多名人士。

18. **旅程**指**保單承保表**所述的**香港**以外旅程。

19. **醫療用品**指因**身體損傷**或**患病**後，由**醫生**證明任何在醫學上有需要及可改善**受保人**症狀的以下各項醫療用品及儀器，包括輪椅、義肢、眼鏡、拐杖、助行架、頸托、矯形保護墊／護托及助聽器。

20. **醫療費用**指**受保人**因遭受**身體損傷**或**患病**，於接受**住院**、手術、醫療或由**醫生**給予或處方的其他診斷或治療（包括聘請護士、X 光檢查或因緊急情況使用救護車）而必須引致的所有**正常、合理及慣常的醫療費用**。

21. **受保期間**指下列期間：

    (a) 只關乎本保單章節 I －取消旅程，指由**保單承保表**所列購買本保單日子開始；或

    (b) 關乎本保單其他章節，於下列時間開始(i)**受保人**由**香港**開始**旅程**之三(3)個小時前，或(ii)**受保人**由**香港**任何一處直接前往**香港**入境處出入境管制站以展開其**旅程**的時間，以較後的時間為準；及

    (c) 關乎本保單所有章節，於下列時間結束(i)**受保人**離開**香港**展開其**旅程**後一百八十(180)天，或 (ii)由**受保人**於完成**旅程**返回**香港**通過**香港**入境處出入境管制站後三(3)個小時，或 (iii) 本**保單**終止之日期（以最早者為準）結束。

22. **永久**指：

    (a) 就單或雙肢而言，由**意外**發生之日期起喪失功用連續十二(12)個月，且於該期間結束時情況仍無改善希望或無法透過手術或其他治療治癒，或因於該期間內自手腕或足踝關節以上從身體分離而喪失有關肢體；或

    (b) 就任何其他類型喪失而言，由**意外**發生之日期起計連續十二(12)個月結束時，仍無改善希望或無法透過手術或其他治療治癒。

23. **永久完全傷殘**指純粹、直接及不受其他因素影響下由身體損傷導致的傷殘，其相關身體損傷須於意外後的一百八十(180)日內發生出現；而該 傷殘由意外發生之日期起計，須連續及無間斷持續十二(12)個月；及須在所有的可能性下，將完全妨礙受保人於餘生從事任何類型有報酬的工作及永無改善希望。

24. **個人財物**指屬於受保人的及在旅程中攜帶或取得的個人物品，惟不包括任何形式的金錢、任何種類的文件、任何種類的食物或飲料、古董、 合約、債券、證券、動物、軟件、流動電訊設備及配件、運輸工具及配件以及於遺失或損毀時受保人並未佩戴或攜帶的珠寶（包括但不只限於例如水晶、耳飾、項鏈、戒指或領針）。

25. **醫生**指合資格執業的醫師，在提供治療予他人時，所處司法管轄區的主管醫療當局已發出牌照予他／她，他／她於提供治療已領有合資格執業的醫師牌照並提供其接受培訓的範圍內的醫療服務，惟有關人士不包括**受保人**及**直系家庭成員**。

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26. **保單承保表**指(i)容許以姓名及身份證或護照號碼識別各**受保人**，(ii)載有**受保人**的旅程表，及(iii)顯示選定計劃類別（任何至尊計劃或尊尚計劃）的一份（多份）文件。

27. **受保前已存在之傷病**指於**受保期間**首日前連續六(6)個月內，**受保人**、**直系家庭成員**、**同行伙伴**或**商業伙伴**出現跡象或症狀，或於同一期間，**受保人**、**直系家庭成員**、**同行伙伴**或**商業伙伴**已尋求或接受（或理應經已尋求或接受）**醫生**給予醫療、會診、處方藥物、診症或診斷的任何患病或傷害。

28. **主要住所**指**受保人**於**香港**的一個主要居住地點。

29. **職業高爾夫球手**指該受保人需倚賴及主要透過，參與高爾夫球活動以賺取生活費用。

30. **公共交通工具**指由持有效牌照可以出租方式運載乘客的公司或個人營運並以機械推動的任何運載工具。

31. **紅色警示**指由**香港**政府保安局於「外遊警示制度」下就旅遊目的地發出的紅色外遊警示級別，就此定義，**本公司**會配合**香港**政府保安局就「外遊警示制度」的修訂不時作出修改。

32. **住院病人**指因**身體損傷**或**患病**必須作為住院病人**住院**接受醫療、診斷及治療的**受保人**（而非僅僅是任何形式的護理、療養、康復、休養或延展看護）。

33. **租用汽車**指從持牌營運租用汽車公司租用其只用作在公共道路上運載受保人的非商用陸上車輛（不包括摩托車）。

34. **暴亂**指人群參與擾亂公共治安的行為（不論是否與**罷工**或停工有關），及任何依法成立的政府機關為鎮壓或試圖鎮壓任何上述擾亂行為或將上述擾亂行為的影響降至最低而採取的行動。

35. **保障計劃**指本保單第一部分所載的保障計劃表。

36. **滑雪用具**指以下專門用作滑雪活動的用具，滑雪橇、滑雪杖、滑雪靴、滑雪手套、滑雪板、滑雪板靴及滑雪頭盔。

37. **患病**指於**受保期間**遇上身體不適或罹患疾病。

38. **特別活動**指以觀眾身份到訪或參加下列各項，主題公園、博物館、開放予公眾的音樂或體育賽事或比賽、歌劇、戲劇、音樂表演或音樂／演奏會。

39. **運動用具**指**高爾夫球用具，滑雪用具及潛水用具**。

40. **罷工**指任何罷工工人或停工工人為推動罷工或抵制停工而蓄意作出的行為；或任何依法成立的機關為阻止或試圖阻止任何上述行為或將任何上述行為的影響降至最低而採取的行動。

41. **保額**指，就**受保人**根據本保單可享用的各項保障而言，在**保障計劃**或該保障的任何相應批註中所列最高金額。

42. **本公司**指安達保險香港有限公司。

43. **同行伙伴**指在整個**旅程**中陪伴**受保人**的人士。

44. **正常、合理及慣常的醫療費用**指在醫療方面用於治療**受保人**的病症所需的治療、物品或醫療服務的費用，且該費用不高於產生有關費用地區的類似治療、物品或醫療服務費用的正常水平。此釋義並不包括假如並無保險則不會產生的費用。

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第三部分 – 項目說明

章節 A – 個人意外

(a) 乘搭公共交通工具時發生的意外（適用於受保期間首日其年齡為 18 至 75 歲的人士）：

若**受保人**（於**受保期間**首日其年齡介乎十八(18)歲至七十五(75)歲），以繳費乘客身份乘搭**公共交通工具**或乘坐旅行代理安排的交通工具時遭受**身體損傷**，而直接及無可避免地於連續十二(12)個月內蒙受本章節 A 的損傷表上列任何類別的損失，**本公司**將按照本章節 A 損傷表上所列損失類別的百分比，支付**保障計劃**章節 A(a)所列**保額**。

(b) 其他意外（適用於受保期間首日其年齡為 18 至 75 歲的人士）：

若**受保人**（於**受保期間**首日其年齡介乎十八(18)歲至七十五(75)歲），遇上上文章節 A(a)所載者以外的意外並遭受**身體損傷**，而直接及無可避免地於連續十二(12)個月內蒙受本章節 A 的損傷表，**本公司**將按照本章節 A 的損傷表上所列損失類別的百分比，支付**保障計劃**章節 A(b)所列**保額**。

(c) 意外（適用於受保期間首日其年齡為 18 歲以下的人士）：

若**受保人**（於**受保期間**首日其年齡為十八(18)歲以下）因遭受**身體損傷**，而直接及無可避免地於連續十二(12)個月內蒙受本章節 A 的損傷表所列任何類型的損失，**本公司**將按照本章節 A 的的損傷表上所列損失類別的百分比，支付**保障計劃**章節 A(c)所列**保額**。

章節 A 損傷表：

損失類別		保額百分比
1.	**意外**死亡	100%
2.	**永久完全傷殘**	100%
3.	**永久**及完全喪失四肢或無法治癒的四肢癱瘓	100%
4.	**永久**及完全喪失雙眼視力	100%
5.	**永久**及完全喪失單眼視力	100%
6.	**永久**及完全喪失雙肢	100%
7.	**永久**及完全喪失單肢	100%
8.	**永久**及完全喪失語言能力及聽覺	100%
9.	**永久**及完全喪失雙耳聽覺	75%
10.	**永久**及完全喪失單耳聽覺	15%
11.	**永久**及完全喪失語言能力	50%

章節 A 的特別條款：

1. 假若**受保人**在同一次**意外**中遭遇超過一類章節 A 的損傷表所列的損失，**本公司**於本章節 A 的責任僅限於支付一種損失類別，即根據所有實際遭遇的損失類別中，在本章節 A 的損傷表列百分比為最高的一種損失類別，而**本公司**只會支付**保障計劃**章節 A 所列相關**保額**。

2. **本公司**根據本章節 A 就涉及同一**受保人**於**受保期間**內發生的所有**意外**而承擔的總責任不可超逾相關**保額**。

3. （只適用於家庭計劃）假若本保單保障超過一名來自同一家庭的**受保人**，且該家庭超過一名成員涉及同一次**意外**，**本公司**於本章節 A 對所有涉及該**意外**的所有**受保人**的總責任不超逾適用於該家庭任何成員的最高**保額**的 300%。

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4. 假若**受保人**的肢體或器官於**意外**發生前在運用上或感覺上已部分受損，則**本公司**可按其酌情決定及經考慮由**本公司**委任的醫療顧問所作的醫療評估後，按醫療顧問的意見認為純粹及單獨由該**意外**導致的任何**身體損傷**程度，支付其認為合理的相關**保額**百分比。**本公司**不會就**意外**發生前完全不能運用的肢體或器官支付費用。

5. 風險：假若**受保人**因遭遇**身體損傷**而面對不可避免地致命風險因素，以及因此直接及不可避免地導致於連續十二(12)個月內身故，**本公司**將按照本章節 A 的損害表內**意外**死亡所列百分比，支付**保障計劃**章節 A 所列相關**保額**。

6. 失蹤：假若**受保人**的身體於**受保人**所使用的交通工具失蹤、沉沒、毀壞，當日起計一(1)年內未能尋回：

   (a) 則假設**受保人**已於上述失蹤、沉沒或毀壞時因**身體損傷**而導致**意外**死亡；及

   (b) 在收到由已故**受保人**遺產的法定代表簽署的承諾書後（假若因**身體損傷**而導致**意外**死亡的假設其後被證實有誤，則**本公司**根據本章節 A 支付的任何款項將即時退還**本公司**）

本公司將按照本章節 A 的損傷表就**意外**死亡所列百分比，向已故**受保人**遺產的法定代表支付**保障計劃**章節 A 所列相關**保額**。

章節 A 的不受保事項：

本章節 A 並不保障：

1. 患病、疾病或細菌感染。

章節 B – 醫療費用

(a) **醫療費用**

假若**受保人**因**身體損傷**或**患病**於**受保期間**內而引致的**醫療費用**，**本公司**將向**受保人**補償有關**醫療費用**，惟金額上限為**保障計劃**章節 B(a)所列**保額**。

(b) **覆診醫療費用**

假若**受保人**於該**旅程**內因**身體損傷**或**患病**而在**香港**以外引致**醫療費用**，返回**香港**後，**受保人**仍須就同一**身體損傷**或**患病**在**香港**求診，而**醫生**及／或**中醫師**給予治療或處方藥物，則**本公司**將繼續向**受保人**補償因此所引致

1. 因於**香港**接受中醫診治而引致的合理醫療費用，而該費用由**中醫師**收取；及／或

2. 在以上本章節 B(b)(1)以外的任何**醫療費用**及／或

3. 實際購買**醫療用品**的費用，

直至**受保人**返回**香港**後九十(90)天或**保障計劃**第 B(b)項所列**保額**耗盡為止（以較早達到者為準）。

(c) **創傷輔導保障**

倘若於受**保期間**，**受保人**遇上造成精神創傷的事情，包括但不限於強姦、槍劫、襲擊、自然災害、遭到劫持或恐怖活動，**為上述造成精神創傷事件的受害者並因而蒙受身體損傷**，按**醫生**意見就該身體損傷而接受創傷輔導服務，**本公司**將向**受保人**補償，在發生造成精神創傷的事情後九十(90) 天內引起的合理及必須的創傷輔導費用，惟金額上限為**保障計劃**章節 B(c) 所列**保額**。

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章節 B 的特別條款：

1. 於**受保期間**於**香港**以外作為或預備作為**住院病人**，須立即通知**授權支援服務供應商**。如未能按照此項先決條款規定而發出通知，**本公司**恕不承擔本保單項下有關**醫療費用**的任何責任。

2. **本公司**根據本章節 B(a)內引致的所有**醫療費用**的責任，不可超逾**保障計劃** 章節 B(a)項所列**保額**。

3. **本公司**根據本章節 B(b)內引致的各項費用的責任，不可超逾**保障計劃**章節 B(b)項所列金額。

4. **本公司**根據本章節 B(b)(1)對於**中醫師**收取的所有費用的責任，不可超逾**保障計劃**第 B(b)(1)項所列金額。由**中醫師**收取的每日最高金額應為**保障計劃**的章節 B(b)(2)項所列金額。

5. **本公司**根據本章節 B(b)(3)內的實際購買**醫療用品**費用的總責任不可超逾**保障計劃**章節 B(b)(3)項所列金額。

6. **本公司**根據本章節在香港引致的**醫療費用**責任（包括**中醫師**收取的所有費用）不可超逾**保障計劃**章節 B(b)項所列金額。

7. 創傷輔導費用的每日最高保障應為**保障計劃**的章節 B(c)(1) 項所列金額。

8. **本公司**根據本章節 B(c) 對所有於**旅程**內引致的創傷輔導費用而收取的費用的總責任，不可超逾保障計劃章節 B(c)項所列保額。

9. **本公司**根據本章節 B 對所有**醫療費用**、由**中醫師**收取的費用及**創傷輔導**費用的總責任，不可超逾**保障計劃**章節 B(a)項所列**保額**。

章節 B 的不受保事項：

本章節 B 並不保障：

1. 於支付**旅程**費用當時已包括或預期的任何費用。

2. 按照診治**受保人**的**醫生**認為，可合理地延遲至**受保人**返回**香港**後才接受的手術或醫治。

3. **受保人**未有於合理時間內遵循**醫生**的意見，返回**香港**繼續治療於**香港**以外遭受的**身體損傷**或**患病**，因而在其後引致的任何費用。

4. **受保人**在**旅程**出發前，經**醫生**診斷認為不適宜旅行後，他／她在**旅程**內引致的任何費用。

5. 在該遭受的**身體損傷**或**患病**的**受保期間**結束後九十(90)天以外引致的任何覆診費用。

6. 引致首次費用之日期起計十二(12)個月後根據章節 B(a)及章節 B(c)引致的任何費用。

7. 健康檢查或任何並非與診斷、**身體損傷**或**患病**直接有關的檢驗，或並非醫療上必需的任何治療或檢驗。

8. 義肢、隱形眼鏡、眼鏡、助聽器、假牙及其他醫療設備或眼科治療的費用，除非該項目可於章節 B(b)(3)覆診醫療費用內的**醫療用品**項目上得到賠償。

章節 C －Chubb Assistance － 24-小時環球支援服務

(a) **緊急醫療運送及／或運返**

若**授權支援服務供應商**指定的**醫生**證實**受保人**的**身體損傷**或**患病**令其不適宜旅行或繼續其**旅程**或危及其生命或健康，以及在**受保人**蒙受**身體損傷**或**患病**後，**受保人**已經被送往最近的**醫院**或近處接受治療，而該處並無所須

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之治療，**本公司**可在**醫生**認為在醫療上適宜運送**受保人**的情況下，全權決定將**受保人**運送往其他地點接受所需治療。

授權支援服務供應商將於合理時間內安排運送，以及按照**受保人**的健康狀況，以最佳方式運送**受保人**，包括但不限於空中救護車、陸上救護車、定期航班、鐵路或其他合適交通工具。運送的工具及最終目的地將由**授權支援服務供應商**決定，並完全以醫療必要性決定。授權支援服務供應商會在適當情況下，將**受保人**送返**香港**。

本公司將直接向**授權支援服務供應商**支付**受保人**的緊急醫療運送及／或運返、相關醫療服務及醫療物品的實際費用。

(b) **遺體運返**

於**受保人**因**身體損傷**或**患病**而直接及不可避免地導致其身故時，**本公司**將支付把**受保人**的遺體由死亡地點運返**香港**的實際費用，或經由**授權支援服務供應商**批准在死亡地點當地安葬的費用。

(c) **親友探望**

若**醫生**證實**受保人**的**身體損傷**或**患病**令其不適宜旅行或繼續其**旅程**或危及其構生命或健康或在**旅程**中身故，**本公司**將支付(i)一(1)張來回經濟客位機票的費用予一(1)位人士前往探望於**香港**以外的**受保人**，及(ii)於任何**香港**以外酒店內的一(1)間普通客房的合理住宿費用，以最多連續五(5)晚為限（但不包括飲料、膳食及其他房間服務的費用），惟金額上限為**保障計劃**章節 C(c)所列**保額**。

(d) **小童護送**

在發生以下情況時：

1. 當**受保人**因**身體損傷**或**患病**而直接及無可避免地需**住院**，並獲**醫生**證明**受保人**不適宜旅行或繼續其**旅程**或危及其構生命或健康或在**旅程**中身故；及

2. 該**受保人**同行之小童（該小童必須為**受保人**）於**受保期間**首日年齡未滿十八(18)歲；及

3. 該小童因**受保人**的**住院**或身故而面對無人照顧的風險。

本公司將安排及支付一張單程經濟客位機票，護送該名小童返回**香港**，惟金額上限為**保障計劃**章節 C(d) 所列**保額**。

(e) **Chubb Assistance –二十四(24)小時電話熱線及轉介服務**

下列服務僅以轉介及安排的方式提供，且所有費用須由**受保人**支付：

1. 預防注射及簽證規定的資訊服務

2. 領使館轉介

3. 傳譯員轉介

4. 遺失行李支援

5. 遺失旅遊證件支援

6. 電話醫療諮詢

7. 醫療服務供應商轉介

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8. 住院時醫療狀況監察

9. 預約醫生安排

10. **醫院**入住安排

有關本服務之詳情，請致電電話熱線查詢或參閱由 **Chubb Assistance** 提供的轉介服務資料。若您對本電話熱線及轉介服務有任何查詢，可致電電話熱線 (852) 3723 3030 向 **Chubb Assistance** 查詢。

章節 C 的特別條款：

1. 本章節 C 的服務由**授權支援服務供應商**提供。假若發生根據章節 C(a)-(d) – Chubb Assistance – 24-小時環球支援服務可能導致潛在索償的任何事件，須立即通知**本公司**或**授權支援服務供應商**。如未能發出本條款規定的通知，**本公司**恕不承擔於保單本章節下的任何責任。

2. 運送的安排、方式及最終目的地將由**授權支援服務供應商**決定，並完全以醫療必要性決定。

3. **本公司**根據本章節 C 支付款項後，**本公司**有權收取來自原有回程機票的任何應退還款項。

章節 C 的不受保事項：

本章節 C 並不保障任何：

1. 於支付**旅程**費用時已包括或預期的費用。

2. **受保人**在**旅程**出發前，經**醫生**診斷認為不適宜旅行後，他／她在**旅程**內引致的費用。

3. 由其他人士提供服務而產生的費用，該等費用受保人並不應負責的。

4. 不是由**授權支援服務供應商**批准及安排的服務而產生的費用。

5. 非由**醫生**給予或處方的治療。

6. 可合理地延遲至**受保人**返回**香港**後才接受治療而產生的費用。

章節 D – 住院現金（只適用於至尊綜合計劃或尊尚綜合計劃）

於**受保人**因**身體損傷**或**患病**而直接及不可避免地在**香港**以外的**住院**時，**本公司**將按照**保障計劃**第 D(a)項所列金額，就每日**住院**向**受保人**支付每日保障，惟上限為**保障計劃**第 D(b) 項所列**保額**。

章節 D 的延展保障：

假若**受保人**因**身體損傷**或**患病**而在**香港**以外的**住院**，在**香港**以外之**住院**完結後返回香港，但**受保人**仍須就同一**身體損傷**或**患病**須再度入住醫院治療，則**本公司**將繼續按照**保障計劃**第 D (b) 項所列金額，向**受保人**支付每日保障，直至**受保人**返回香港後九十(90)天或保障計劃第 D(a) 項所列保額耗盡為止（以較早達到者為準）。

章節 D 的特別條款：

1. 於本章節 D 的保障僅在**住院**結束後方會支付。

2. **本公司**根據本章節 D 對所有**住院**的總責任，不可超逾**保障計劃**第 D(a)項所列**保額**。

3. 於本章節 D 的保障與章節 B – 醫療費用項下應付的保障為累加保障。

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章節 D 的不受保事項：

本章節 D 並不保障：

1. **受保人**返回香港起計九十(90)日後的任何**住院**事宜。

章節 E – 燒傷保障

若**受保人**遭遇包括**二級程度燒傷**或**三級程度燒傷**在內的**身體損傷**，**本公司**將按照本章節 E 的燒傷表就燒傷程度所列百分比，支付**保障計劃**章節 E 所列**保額**。

燒傷表	賠償百分比
二級程度燒傷或三級程度燒傷	
頭部：	
等於或超過 8%	100%
等於或超過 5%但少於 8%	75%
等於或超過 2%但少於 5%	50%
身體：	
等於或超過 20%	100%
等於或超過 15%但少於 20%	75%
等於或超過 10%但少於 15%	50%

章節 E 的特別條款：

1. 若**受保人**在同一次**意外**中遭遇超過一類在本章節 E 的燒傷表上所列的燒傷，**本公司**於本章節 E 的責任應限於支付一項燒傷類別，即根據所有實際遭遇的燒傷類別中，在本章節 E 的燒傷表所列百分比為最高的一項燒傷類別，而**本公司**只會支付**保障計劃**章節 E 所列相關**保額**。

2. 於本章節 E 的保障與章節 A – 個人意外項下應付的保障為累加保障。

章節 F – 個人財物（只適用於至尊綜合計劃或尊尚綜合計劃）

就實際損耗、折舊及陳舊進行扣減或撥備後，**本公司**將按其絕對酌情權對於在**受保期間**內遺失或被盜或損毀的**個人財物**進行修復、修理或更換，惟上限為**保障計劃**第 F(a)項所列**保額**。

章節 F 的特別條款：

1. 假若發生任何**個人財物**遺失、被盜或因第三方的蓄意行為而損毀的情況可能導致本章節 F 的索償的事件，須在發生有關事件的二十四(24)小時內通知當地警方或相應的當地執法人員，並須附上報告該損失的書面證明。如未能發出此項先決條款規定的通知或附上該書面證明，**本公司**恕不承擔本章節 F 的任何責任。

2. 假若遺失、盜竊或損毀在運送時發生，須於發現遺失或損毀起計二十四(24)小時內，立即將有關遺失或損毀通知**公共交通工具**的承運人，並須附上報告該損失的書面證明。如未能發出此項先決條款規定的通知或附上該書面證明，**本公司**恕不承擔本章節 F 的任何責任。

3. **本公司**對於在**受保期間**內遺失、盜竊或損毀的每件**個人財物**的最大責任，將以**保障計劃**第 F(b)項所列金額為限。

4. 假若任何一件遺失、被盜或損毀的**個人財物**為一對或一套物品的一部分，**本公司**對該件及該對或該套物品的最大責任，將以**保障計劃**第 F(b)項所列金額為限。

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5. **本公司**根據本章節 F 對於在**受保期間**內所有遺失、盜竊或損毀的**個人財物**的總責任，不可超逾**保障計劃**章節 F(a)所列**保額**。

6. 於根據本章節 F 支付任何款項後，**本公司**有權獲得及保留任何尋回或損毀的**個人財物**的利益及價值，並按其絕對酌情權處理剩餘價值。

章節 F 的不受保事項：

本章節 F 並不保障：

1. 因**受保人**疏忽所致的遺失、被盜或損毀，當中包括但不限於將**個人財物**置於無人看管的狀態。

2. 任何原因不明的遺失、被盜或損毀。

3. **個人財物**因被置於汽車（鎖於車箱除外）或**公共交通工具**內或其他公共地方且無人看管而導致的遺失、被盜或損毀。

4. 任何**個人財物**因蟲蛀、蟲蝕、磨損、大氣或氣候狀況、逐漸損耗、機件或電力故障、任何清潔、修復、修理、改造的程序、海關或任何其他機關的充公或扣押而導致的遺失或損毀或由他們造成的破壞。

5. 任何租借或租賃設備遺失。

6. 在**旅程**前託運或單獨郵寄或以**公共交通工具**（同時運載**受保人**的**公共交通工具**除外）運載的任何**個人財物**遺失、被盜或損毀。

7. 易碎品之破損或毀壞。

8. 受保人可從任何其他來源獲得彌償或賠償退款或收回款項。

9. 已根據章節 L – 行李延誤就同一事件提出索償的損失。

章節 G – 個人金錢（只適用於至尊綜合計劃或尊尚綜合計劃）

本公司將賠償**受保人**在**受保期間**內因發生**意外**、盜竊或搶劫而損失**受保人**的**現金**，惟上限為**保障計劃**章節 G 所列**保額**。

章節 G 的特別條款：

1. 假若發生任何可能導致本章節 G 的索償的事件，須在發生有關事件的二十四(24)小時內通知當地警方或相應的當地執法人員，並須附上報告該損失的書面證明。如未能發出此項先決條款規定的通知或附上該書面證明，**本公司**恕不承擔本章節 G 的任何責任。

2. **本公司**根據本章節 G 對於**受保期間**內所有損失的總責任，不可超逾**保障計劃**章節 G 所列**保額**。

章節 G 的不受保事項：

本章節 G 並不保障：

1. 因**受保人**疏忽所致的損失，當中包括但不限於將**現金**置於無人看管的狀態。

2. 任何原因不明的損失，或因海關或任何其他機關充公或扣押、貨幣貶值或因貨幣兌換交易期間的過失或疏忽而產生不足所致的損失。

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3. **現金**因被置於汽車（鎖於車箱除外）或**公共交通工具**內或其他公共地方且無人看管而導致的遺失、被盜或損毀。

4. 因使用或不當使用任何形式的電子貨幣所致的損失，當中包括但不限於任何卡類、電子錢包或等同信貸儲值媒介中所持的信貸價值。

5. 受保人可從任何其他來源獲得彌償或賠償退款或收回款項。

章節 H – 遺失證件（只適用於至尊綜合計劃或尊尚綜合計劃）

本公司將向**受保人**補償(i)**受保人**於**受保期間**內補領因遺失或被盜且如不補領則會導致**旅程**延誤的出入境檢查所需旅遊證件及／或車船機票的費用，及／或(ii)**受保人**僅為安排補領(i)所提及的旅遊證件及／或車船機票而引致的合理額外交通費用及／或必須的住宿費用，惟金額上限為**保障計劃**章節 H 所列**保額**。

章節 H 的特別條款：

1. 假若發生任何可能導致本章節 H 的索償事件，須在發生有關事件的二十四(24)小時內通知當地警方或相應的當地執法人員，並須附上報告該損失的書面證明。如未能發出此項先決條款規定的通知或附上該書面證明，**本公司**恕不承擔本章節 H 的任何責任。

2. **本公司**根據本章節 H 對於在**受保期間**內所有損失的總責任，不可超逾**保障計劃**章節 H 所列**保額**。

章節 H 的不受保事項：

本章節 H 並不保障：

1. 因**受保人**疏忽所致的損失，當中包括但不限於將旅遊證件及／或車船機票置於無人看管狀態。

2. 任何原因不明的損失。

3. 旅遊證件及／或車船機票因被置於汽車（鎖於車箱除外）或**公共交通工具**內或其他公共地方且無人看管而導致的遺失、被盜或損毀。

章節 I – 取消旅程（只適用於至尊綜合計劃或尊尚綜合計劃）

假若：

1. **受保人**、**直系家庭成員**、擬定**同行伙伴**或**商業伙伴**在**保單承保表**所列購買本保單日子後及在**旅程**計劃開始日期前九十(90)天內突然身故；或

2. **受保人**在**保單承保表**所列購買本保單日子後及在**旅程**計劃開始日期前九十(90)天內因意料之外遭受**身體損傷**或**患病**而**住院**；或

3. **直系家庭成員**、擬定**同行伙伴**或**商業伙伴**在**保單承保表**所列購買本保單日子後及在**旅程**計劃開始日期前九十(90)天內因意料之外遭受**身體損傷**或**患病**而**住院**；或

4. **受保人**在**保單承保表**所列購買本保單日子後及**旅程**計劃開始日期前九十(90)天內，在未能預計地，**受保人**持續被強制性隔離；或

5. 在**保單承保表**所列購買本保單日子後及**旅程**計劃開始日前九十(90)天內，**受保人**須出任陪審員或**受保人**收到出任證人傳票；或

6. 在**保單承保表**所列購買本保單日子後及**旅程**的計劃目的地在**旅程**計劃開始日期前七(7)天內發生未能預計的**罷工**、**暴亂**或內亂、或遭遇恐怖活動；或

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7. **受保人**的**主要住所**在**保單承保表**所列購買本保單日子後及**旅程**計劃開始日期前七(7)天內因火災、水災、地震或類似自然災害而嚴重損毀，且**受保人**就此理應於**旅程**計劃出發日期身在**香港**；或

8. 於**保單承保表**所列購買本保單日子不少於一(1)天後，在未能預計的情況下**旅程**的計劃目的地被發出**黑色警示**，而此**黑色警示**在**旅程**計劃開始日期前七(7) 天內的任何時間內生效；

而導致**旅程**必須取消，**本公司**將就**受保人**因被沒收的交通費用及／或住宿費用損失，向**受保人**作出補償，惟上限為**保障計劃**章節 I 所列**保額**。

假若：

9. **受保人**在購買本保單後及在旅程計劃開始日期前九十(90) 天內，在未能預計下，蒙受毋須**住院**的**身體損傷**或**患病**；或

10. **直系家庭成員**、擬定**同行伙伴**或**商業伙伴**在購買本保單後及在**旅程**計劃開始日期前九十(90)天內，在未能預計下，蒙受毋須住院的**身體損傷**或**患病**而導致旅程必須取消；或

11. 於**保單承保表**所列購買本保單日子不少於一(1)天後，在未能預計的情況下**旅程**的計劃目的地被發出**紅色警示**，而此**紅色警示**在**旅程**計劃開始日期前七(7)天內的任何時間內生效

    本公司將就**受保人**因被沒收的交通費用及／或住宿費用損失的百分之五十(50%)，向受保人作出補償，惟上限為**保障計劃**章節 I 所列保額。

章節 I 的特別條款：

1. 若**旅程**取消是由於**受保人**或擬定**同行伙伴**的**身體損傷**或**患病**，該**身體損傷**或**患病**須得到**醫生**證明該**身體損傷**或**患病**令**受保人**或擬定**同行伙伴**不適宜旅行或危及其生命或健康。

2. 若**旅程**取消是由於**直系家庭成員**或**商業伙伴**的**身體損傷**或**患病**，該**身體損傷**或**患病**須得到**醫生**證明該**身體損傷**或**患病**危及其生命。

3. 如未能提供此項先決條件規定的證明，**本公司**恕不承擔在章節 I，**受保人**因預付或被沒收的交通費用及／或住宿費用損失的責任。

4. 若**受保人**同時在章節 I(2) 及章節 I(9) 及 章節 I(3) 及 章節 I(10) 的保障，**本公司**根據本章節 I 的總責任僅限於各相關章節的一項最高**保額的**章節於**保障計劃**所列之**保額。**

5. **本公司**根據本章節 I 內的總責任，不可超逾**保障計劃**章節 I 所列**保額**。

章節 I 的不受保事項：

本章節 I 並不保障因下列情況：

1. **受保人**可從任何其他來源獲得彌償或賠償退款或收回款項。

2. **受保人**在法律上沒有責任支付的有關款項。

3. 由於任何國家、地區或地方政府頒發禁令或規例而直接或間接取消。

4. 由於接受**旅程**預訂的旅行代理的疏忽、行為失當或周轉不靈而取消。

5. 由於人數不足導致旅遊經營商或批發商無法令旅行團成行而取消。

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6. 由於**受保人**出現財務困難；或**受保人**的情況或所承擔的合約責任改變；或**受保人**不願繼續**旅程**而直接或間接取消。

7. 因在預訂**旅程**時，已存在或於當時可合理地預計可能導致**旅程**取消的事件或情況所致的損失。

8. 該計劃目的地的**紅色警示**是由**黑色警示**調整至的。

9. 已根據章節 B – 醫療費用就同一事件提出索償的損失。

章節 J – 旅程阻礙（只適用於至尊綜合計劃或尊尚綜合計劃）

(a) **特別活動阻礙**

假若：

1. **受保人**、**直系家庭成員**、**同行伙伴**或**商業伙伴**突然身故；或

2. **受保人**、**同行伙伴**或**商業伙伴**遭受**身體損傷**或**患病**；或

3. 因出現惡劣天氣、自然災害、涉及**公共交通工具**營運商的僱員**罷工**、**公共交通工具**機件故障或遭到劫持或遭遇恐怖活動而延誤**旅程**；

並直接導致**受保人**缺席**特別活動**或無法使用**特別活動**的門票，**本公司**將依據**受保人**已預付但未享用門票的實際費用或該門票票面上的價值，以兩者中較低金額的數額作出補償，惟金額上限為保障計劃章節 J(a)所列**保額**。

章節 J(a)的特別條款：

1. 任何在本章節 J(a)內的索償須附上顯示發生有關事件的書面證明及未使用的**特別活動**正本門票。

2. 若**特別活動**阻礙由於章節 J(a)(3)提及之**罷工**、機件故障、遭到劫持或遭遇恐怖活動，須附上來自實際抵達所列目的地當地的相關承運人的確認書，當中須列明實際抵達的當地時間及發生延誤抵達該目的地的原因。

3. 如未能提供此項先決條款規定的文件，**本公司**恕不就**受保人**被沒收的門票的實際費用而承擔本章節 J(a)內所列的任何責任。

章節 J(a)的不受保事項：

1. **受保人**可從任何其他來源獲得彌償或賠償退款或收回款項。

2. **受保人**在法律上沒有責任支付的有關款項。

3. 因在預訂**特別活動**時，已存在或於當時可合理地預計可能會缺席**特別活動**所致的損失。

(b) **縮短旅程**

若**受保人**因下列原因而須縮短**旅程**並須直接返回**香港**：

1. 其**身體損傷**或**患病**；或

2. **直系家庭成員**、**同行伙伴**或**商業伙伴**突然身故、**身體損傷**或**患病**；或

3. **旅程**的計劃目的地在**受保期間**內發生未能預計的**罷工**、**暴亂**、內亂、爆發疫症、遭到劫持、遭遇恐怖活動、地震或類似自然災害而導致**受保人**不能繼續其計劃的**旅程**；或

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4. 在未能預計的情況下保安局於**受保期間**發出**黑色警示**予**旅程**的計劃目的地；

或因**受保人**身故，

本公司將補償下列(1)至(3)中其中一項費用，惟最大金額上限為**保障計劃**章節 J(b)所列**保額**：

1. 根據**受保人**在返回**香港**途中通過**香港**入境處出入境管制站時，或由**受保人**身故日起計，仍未使用的**旅程**天數，按比例計算**受保人**的未使用交通費用及／或住宿費用；

2. 在**旅程**開始後由**受保人**引致額外的交通費用及／或住宿費用；

3. **受保人**在**旅程**開始後因預付或被沒收旅行及／或住宿費用所致的損失。

紅色警示保障：

在未能預計的情況下，若**受保人**因保安局於**受保期間**發出紅**色警示**予**旅程**的計劃目的地，而須縮短**旅程**並須直接返回**香港，本公司**將補償下列(1)至(3)中其中一項費用之百分之五十(50%)，惟最大金額上限為**保障計劃**章節 J(b)所列**保額**：

1. 根據**受保人**在返回**香港**途中通過**香港**入境處出入境管制站時，或由**受保人**身故日起計，仍未使用的**旅程**天數，按比例計算**受保人**的未使用交通費用及／或住宿費用；或

2. 在**旅程**開始後由**受保人**引致額外的交通費用及／或住宿費用；或

3. **受保人**在**旅程**開始後被沒收旅行及／或住宿費用所致的損失。

(c) **因被強制性隔離而中斷旅程**

假若**旅程**被延誤，因為**受保人**於受**保期間**在**旅程**的計劃目的地，被當地政府或相關醫療機構確定他／她與確診患上傳染病的人士有緊密接觸或受保人被相關醫療機構確認為傳染病帶菌者，**受保人**在未能預計下被強制隔離而令他／她不能繼續其計劃的**旅程**，**本公司**將補償

1. 隔離日起計仍未使用的**旅程**，按天數比例計算**受保人**的被沒收**旅程**費

2. **受保人**在**旅程**開始後因被沒收旅行及／或住宿費用所致的損失。

章節 J(c)的特別條款：

1. **本公司**根據本章節 J(c)內的總責任，不可超逾**保障計劃**章節 J(c)所列**保額**。

章節 J 的特別條款：

1. 若**旅程**縮短是由於**受保人或同行伙伴**的**身體損傷**或**患病**，須得到**醫生**證明該**身體損傷**或**患病**令**受保人或同行伙伴**不適宜旅行或危及其生命或健康。

2. 若**旅程**縮短是由於**直系家庭成員**、或**商業伙伴**的**身體損傷**或**患病**，須得到**醫生**證明該**身體損傷**或**患病**危及上述人士之生命。

3. 如未能提供此項先決條件規定的證明，**本公司**恕不承擔在章節 J，**受保人**所蒙受任何損失的責任。

4. **本公司**根據本章節 J 對於在**受保期間**內所有損失的總責任，不可超逾**保障計劃**章節 J 所列**保額**。

章節 J 的不受保事項：

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章節 J 並不保障因下列原因引致的未使用**旅程**費用的全部或任何部分，或**受保人**為令他／她抵達計劃目的地而引致的額外旅遊及／或住宿費用：

1. **受保人**可從任何其他來源獲得彌償或賠償退款或收回款項。
2. 由於任何國家、地區或地方政府頒發禁令或規例而直接或間接引致。
3. 由於接受**旅程**預訂的旅行代理的疏忽、行為失當或周轉不靈而引致。
4. 由於人數不足導致旅遊經營商或批發商無法令旅行團成行而引致。
5. 由於**受保人**出現財務困難；或**受保人**的情況或合約附加責任改變；或**受保人**不願繼續**旅程**而直接或間引致。
6. 因在預訂**旅程**時或於開始第一日**旅程**時，已存在或於當時可合理地預計可能會導致**旅程**被阻礙的事件或情況所致的損失。
7. 因違反醫生意見導致的。
8. 未能提供由公共交通工具營運商發出的書面證明相關取消或縮短情況及原因。
9. 該計劃目的地的紅色警示是由黑色警示調整至的。
10. 已根據章節 K – 旅程延誤就同一事件提出索償的損失。

章節 K – 旅程延誤（只適用於至尊綜合計劃或尊尚綜合計劃）

假若於**旅程**內，**公共交通工具**因遇上惡劣天氣、自然災害、涉及**公共交通工具**營運商的僱員**罷工**、**公共交通工具**機件故障、遭到劫持或遭遇恐怖活動而延誤，而且受保人必須以繳費乘客身份乘搭由合法**公共交通工具**經營商提供的固定路線，並持有由公共交通工具經營商發出之（列明其固定路線及目的地和計劃離開及／或抵達時間的）有效登機證，**本公司**將支付在章節 K (a)至(d) 內其中一項，可獲較高賠償金額，並以**保障計劃**章節 K 所列**保額**為上限：

(a) 現金賠償

本公司將按照以下方式計算的比率支付現金賠償：

每滿連續六(6)個小時延誤按照**保障計劃**第 K(a)項所列金額賠償，

(b) 損失的酒店住宿及公共交通費用

由**香港**出發的有固定班次的**公共交通工具**延誤連續二十四(24)個小時後，**受保人**最終決定取消**旅程**，**本公司**將補償，已預付但未享用的交通及酒店住宿費用，惟金額上限為保障計劃章節 K(b)所列金額。

(c) 損失的酒店住宿費用

延誤連續十二(12)個小時後，**本公司**將補償被沒收的酒店住宿費用，惟金額上限為保障計劃章節 K(c)所列金額。

(d) 額外海外酒店住宿及公共交通費用（只適用於香港以外之出發地）

連續六(6)個小時延誤後，本公司將補償以下任何合理及必須的額外費用：

1. 在該出發地引致的額外酒店普通客房住宿費用直至受保人被獲安排最早可啟程的替代交通工具，及

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2. 在該出發地引致的額外經濟客位之公共交通工具的費用，以使他／她可抵達原定計劃目的地，惟金額上限為保障計劃章節 K(d) 所列金額。

章節 K 的特別條款：

1. 各連續延誤時數將參照**受保人**旅程的原定旅程表計劃抵達的當地時間，與**受保人**實際抵達同一目的地的當地時間之間的差異計算。如因延誤最終取消旅程，各連續延誤時數將參照**受保人旅程**的原定旅程表計劃抵達的當地時間與最早可啟程的由**公共交通工具**安排替代交通工具原定計劃抵達當地時間之間的差異計算。

2. 若旅程涉及連串轉乘交通工具，則總延誤時間將參照最後交通工具的原定計劃抵達與實際抵達的當地時間之間的差異計算。如因延誤最終取消旅程，各連續延誤時數將參照受保人旅程的原定旅程表計劃抵達的當地時間與最早可啟程的由**公共交通工具**安排替代交通工具原定計劃抵達當地時間之間的差異計算。

3. **受保人**須採取合理措施縮短任何延誤時間。如未能按照此項先決條款的規定採取合理措施縮短任何延誤時間，**本公司**恕不承擔本章節 K 的任何責任。

4. 任何根據本章節 K 提出的索償，須附上來自實際抵達所列目的地的當地時間發生延誤的相關承運人的確認書，當中須列明發生延誤抵達該目的地的原因。如未能提供此項先決條款規定的確認書，**本公司**恕不承擔本章節 K 的任何責任。

5. 假若**受保人**在同一次延誤中遭遇超過一類章節 K 所列的損失，**本公司**於本章節 K 的責任僅限於支付在 K(a) 至 K(d) 內其中一項。**本公司**支付**保障計劃**章節 K 所列可獲最高**保額**的項目。

6. **本公司**根據本章節 K 於**受保期間**內發生的所有損失而承擔的總責任不可超逾**保障計劃**章節 K 上所列的**保額**。

章節 K 的不受保事項：

本章節 K 並不保障下列損失：

1. **受保人**因延誤抵達其**旅程**原定旅程表所列任何出發地點所引致的損失，但由於在**受保期間**內**公共交通工具**的僱員**罷工**造成延誤抵達所致的損失除外。

2. 因在生效日或之前，或在預訂旅程時，已宣佈且於當時可合理地預計可能導致旅程延誤的事件或情況所致的損失。

3. 已根據章節 J – 旅程阻礙提出索償（特別活動阻礙索償除外）且因同一原因或事件所致的損失。

4. **受保人**在法律上沒有責任支付的有關款項。

章節 L – 行李延誤（只適用於至尊綜合計劃或尊尚綜合計劃）

於**旅程**內，假若已托運的行李在**受保人**抵達**受保人旅程**原定旅程表所列目的地的口岸後，因**公共交通工具**營運商延誤、誤送或暫時丟失該行李超過連續六(6)個小時，**本公司**將向**受保人**補償購買必需盥洗用品及衣物的費用，惟上限為**保障計劃**章節 L 所列**保額**。

章節 L 的特別條款：

1. 根據章節 L 提出的任何索償，須附上公共交通工具營運商發出的確認書，以証明相關已托運的行李（於受保人抵達其原定旅程表所列目的地 的口岸後計）延誤、誤送或暫時丟失超過連續六(6)個小時。如未能提供此項先決條款規定的確認書，本公司恕不承擔本章節 L 的任何責任。

章節 L 的不受保事項：

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本章節 L 並不保障因下列原因購買必需盥洗用品及衣物費用：

1. **受保人**已收取或準備收取須對行李的延誤、誤送或暫時丟失負責的承運人或營運商所作出賠償。

2. 受保人抵達**香港**時所發生。

3. 行李的延誤、誤送或暫時丟失屬於原因不明或因海關或任何其他機關充公或扣押而導致。

4. 於有關**旅程**前託運或單獨郵寄或以**公共交通工具**（同時運載**受保人**的**公共交通工具**除外）運送的行李。

5. 已根據章節 F – 個人財物提出索償且因同一原因或事件所致。

章節 M – 個人責任（只適用於至尊綜合計劃或尊尚綜合計劃）

假若**受保人**因於**受保期間**內發生對任何其他人士造成**身體損傷**或損毀他人財物的**意外**，因而須承擔作出賠償的法律責任，**本公司**將代表**受保人**支付該賠償，惟上限為**保障計劃**章節 M 所列**保額**。

章節 M 的不受保事項：

本章節 M 並不保障符合下列各項的賠償：

1. **直系家庭成員**或受到**受保人**監護或控制的人士遭受**身體損傷**引起。

2. 屬於**受保人**或**直系家庭成員或同行伙伴**或受到**受保人**監護或控制的人士的財物損毀引起。

3. 屬於違反根據合約須承擔的任何責任的賠償。

4. 因擁有、管有、租賃或租用任何運輸工具、飛機、火器或動物所產生責任。

5. 因進行任何交易或專業所產生的責任。

6. 因(a)來自任何核子燃料或任何燃燒核子燃料而產生的任何核廢料的離子化輻射或輻射污染，或(b)任何因爆炸性核子裝配設施或該裝配設施的核子成分所產生的輻射、毒性、爆炸性或其他危險特性，而直接或間接導致的任何索償（不論任何性質）。

章節 N – 家居財物保障（只適用於至尊綜合計劃或尊尚綜合計劃）

假若**家居財物**於**受保期間**內因爆竊而遺失或損毀，且該爆竊發生於**主要住所**無人居住期間，並涉及以強行或暴力方式進入或離開**主要住所**，**本公司**將賠償**受保人**更換**家居財物**的費用，惟上限為**保障計劃**章節 N(a)所列**保額**。

章節 N 的特別條款：

1. 假若發生任何可能導致本章節 N 的索償事件，須於發現事件起計二十四(24)小時內通知當地警方或相應的當地執法人員，並須附上報告該損失的書面證明。如未能發出此項先決條款規定的通知或附上該書面證明，**本公司**恕不承擔本章節 N 的任何責任。

2. **本公司**對每件遺失或損毀的**家居財物**的最大責任為**保障計劃**第 N(b)項所列金額。

3. 假若任何遺失或損毀的**家居財物**為一件或一對或一套物品的一部分，**本公司**對該件及該對或該套物品的最大責任，將以**保障計劃**第 N(b)項所列金額為限。

4. **本公司**根據本章節 N 對所有由同一**受保人**擁有且於**受保期間**內因爆竊而遺失或損毀的**家居財物**的總責任，不可超逾**保障計劃**第 N(a)項所列**保額**。

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章節 N 的不受保事項：

本章節 N 並不保障：

1. 任何遺失或損毀且構成一對或一套的**家居財物**所擁有的任何特殊或獨有價值。

2. 任何其他保險就同一風險提供保障的重置費用。

3. 受保人可從任何其他來源獲得彌償或賠償退款或收回款項。

章節 O – 租用汽車的免責補償費用（只適用於至尊綜合計劃或尊尚綜合計劃）

假若**受保人**在**受保期間**的**旅程**中，而**受保人**在**旅程**中租用汽車期間，在他／她控制其租用汽車時發生意外令租用汽車損毀，並在法律上須對其損毀的租用汽車承擔責任，**本公司**將向**受保人**賠償該租用汽車的綜合汽車保險合約的免責補償費用，惟須依從保單條款的限制及上限為**保障計劃**章節 O 所列**保額**。

章節 O 的特別條款：

1. **租用汽車**須從領有牌照營運的租車代理中租用的。

2. 受保人須持有一份能在**租用汽車**期間，承擔租用汽車損毀責任的綜合汽車保險合約。

3. **受保人**須遵從租車機構在**租用汽車**合約上所列及承保人在汽車保險合約上所列的所有規定及協議，同時亦須遵守有關國家的法律、規則及管制。

章節 O 的不受保事項：

本章節 O 並不補償受保人，因下列任何各項，直接或間接所致的、引起的損失或後繼損失或責任：

1. 因違反**租用汽車**合約上的規定操作租用汽車而引致租用汽車的損毀或因超越任何使用公共道路的限制或違反有關國家的法律、規則及管制而引致租用汽車的損毀或。

2. 因磨損、逐漸損耗、因蟲蛀或蟲蝕、本身存在的缺陷、潛在的缺陷及損壞。

3. 任何非操作補償費用 (NOC) ， 因不能租出損毀汽車的營業損失。

章節 P – 信用卡保障（只適用於至尊綜合計劃或尊尚綜合計劃）

假若**受保人**遭受**身體損傷**，並直接及不可避免地於該**身體損傷**後連續十二(12)個月內**意外**身故，**本公司**將向已故**受保人**遺產的法定代表，支付已故**受保人**的信用卡中因已故**受保人**在**旅程**內購買商品而結欠的任何未繳結餘，惟上限為**保障計劃**章節 P 所列**保額**。

章節 P 的不受保事項：

本章節 P 並不保障：

1. 已故**受保人**的信用卡的未繳費用累計利息或財務費用。

2. 已故**受保人**的信用卡由任何其他保險就同一風險提供保障的任何未繳結餘。

3. **患病**、疾病或細菌感染。

4. **受保人**可從任何其他來源獲得彌償或賠償退款或收回款項。

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章節 Q – 高爾夫球「一桿入洞」

若**受保人**於**受保期間**在**香港**以外任何一個認可的高爾夫球場進行高爾夫球活動取得「一桿入洞」的成績，**本公司**將支付現金保障，惟上限為**保障計劃**章節 Q 所列**保額**。

章節 Q 的特別條款：

1. 根據本章節 Q 提出的任何索償須附上顯示由該認可的高爾夫球場簽署或加簽證明取得「一桿入洞」的成績紀錄卡或簽發之証書的書面證明。如未能提供此項先決條款規定的書面證明，**本公司**恕不承擔本章節 Q 的任何責任。

章節 Q 的不受保事項：

本章節 Q 並不保障：

1. 於**受保期間**首日受保人的年齡為十八（18）歲以下。

2. **受保人**為**職業高爾夫球手**。

章節 R – 業餘運動保障（如適用）

章節 R 保障須支付額外的保費：

在**受保期間**，**受保人**只可向其中一項保障，保障(I) 高爾夫球保障或、保障(II) 滑雪或潛水保障，提出索償。

章節 R 的特別條款：

1. 在任何情況下，**本公司**根據本章節 R 在**受保期間**內對所有**運動用品**索償的總責任，不可超逾**保障計劃**第 R 項所列**保額**。假若任何一件遺失、被盜或損毀的**運動用品**為一對或一套物品的一部分，**本公司**對該件及該對或該套物品的最大責任，將以**保障計劃**第 R 項所列金額為限。

(I) 高爾夫球保障

(a) 高爾夫球用具遺失或損毀

就實際損耗、折舊及陳舊進行扣減或撥備後，**本公司**將按其絕對酌情權對於在**受保期間**內遺失或被盜或損毀的**高爾夫球用具**進行修復、修理或更換，惟上限為**保障計劃**第 R(I)(a)項所列**保額**。

章節 R(I)(a)的特別條款：

1. 假若發生任何**高爾夫球用具**遺失、被盜或因第三方的蓄意行為而損毀的情況可能導致本章節 R(I)(a)的索償的事件，須在發生有關事件的二十四(24)小時內通知當地警方或相應的當地執法人員，並須附上報告該損失的書面證明。如未能發出此項先決條款規定的通知或附上該書面證明，**本公司**恕不承擔本章節 R(I)(a)的任何責任。

2. 假若遺失、盜竊或損毀在運送時發生，須於發現遺失或損毀起計二十四(24)小時內，立即將有關遺失或損毀通知**公共交通工具**的承運人，並須附上報告該損失的書面證明。如未能發出此項先決條款規定的通知或附上該書面證明，**本公司**恕不承擔本章節 R(I)(a)的任何責任。

3. **本公司**對於在**受保期間**內遺失、盜竊或損毀的每件**高爾夫球用具**的最大責任，將以**保障計劃**第 R(a)(i)項所列金額為限。

4. 假若任何一件遺失、被盜或損毀的**高爾夫球用具**為一對或一套物品的一部分，**本公司**對該件及該對或該套物品的最大責任，將以**保障計劃**第 R(a)(i)項所列金額為限。

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5. **本公司**根據本章節 R(I)(a)對於在**受保期間**內所有遺失、盜竊或損毀的**高爾夫球用具**的總責任，不可超逾**保障計劃**章節 R(I)(a)所列**保額**。

6. 於根據本章節 R(I)(a)支付任何款項後，**本公司**有權獲得及保留任何尋回或損毀的**高爾夫球用具**的利益及價值，並按其絕對酌情權處理剩餘價值。

章節 R(I)(a)的不受保事項：

本章節 R(I)(a)並不保障：

1. 因**受保人**疏忽所致的遺失、被盜或損毀，當中包括但不限於將**高爾夫球用具**置於無人看管的狀態。

2. **高爾夫球用具**因被置於汽車（鎖於車尾箱除外）或**公共交通工具**內或其他公共地方且無人看管而導致任何原因不明的遺失、被盜或損毀。

3. 任何**高爾夫球用具**因蟲蛀、蟲蝕、磨損、大氣或氣候狀況、逐漸損耗、機件或電力故障、任何清潔、修復、修理、改造的程序、海關或任何其他機關的充公或扣押而導致的遺失或損毀。

4. 在**旅程**前託運或單獨郵寄或以**公共交通工具**（同時運載**受保人**的**公共交通工具**除外）運載的租借或租賃設備或任何**高爾夫球用具**的遺失、被盜或損毀。

(b) **租用高爾夫球用具**

於**受保期間**內，**高爾夫球用具**因**公共交通工具**延誤、誤送或暫時丟失或**受保人**的**高爾夫球用具**遺失或被盜或損毀並已在章節 R(I)(a)保障，導致**受保人**須租用**高爾夫球用具**短暫使用，**本公司**將向**受保人**補償實際租用**高爾夫球用具**的費用，惟上限為**保障計劃**章節 R(I)(b)所列**保額**。

章節 R(I)(b)的特別條款：

1. 根據章節 R(I)(b)提出的任何索償，須附上承運人就有關**高爾夫球用具**延誤、誤送或暫時丟失而發出的確認書。如未能提供此項先決條款規定的確認書，**本公司**恕不承擔本章節 R(I)(b)的任何責任。

章節 R(I)(b)的不受保事項：

本章節 R(I)(b)並不保障：

1. 於有關**旅程**前託運或單獨郵寄或以**公共交通工具**（同時運載**受保人**的**公共交通工具**除外）運送的**高爾夫球用具**。

2. **高爾夫球用具**的延誤、誤送或暫時丟失屬於原因不明或因海關或任何其他機關充公或扣押而導致。

(c) **高爾夫球活動阻礙**

假若：

1. **受保人**、**直系家庭成員**或**同行伙伴**突然身故；或

2. **受保人**遭受**身體損傷**或**患病**；或

3. 因出現惡劣天氣、自然災害、涉及**公共交通工具**營運商的僱員**罷工**、**公共交通工具**機件故障或遭到劫持而延誤**旅程**；

並直接阻礙**受保人**參與已計劃的高爾夫球活動，**本公司**將補償下列**受保人**已預付但未享用的費用，

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- 租用高爾夫球場地的實際費用；和
- 租用**高爾夫球用品**的實際費用；和
- 實際的學費。

惟上限為**保障計劃**章節 R(I)(c)所列**保額**。

章節 R(I)(c)的特別條款：

1. 任何在本章節 R(I)(c)內的索償須附上影響參與高爾夫球活動的文件及有關是次高爾夫球活動的正本收據。
2. 若取消活動是由於**受保人**的**身體損傷**或**患病**，須得到**醫生**證明該**身體損傷**或**患病**令**受保人**不適宜參與高爾夫球活動或危及其生命或健康。
3. 若取消活動是由於如上述(c)(iii)內所述的**罷工**、機件故障或遭到劫持引致，須附上來自實際抵達所列目的地當地的相關承運人的確認書，當中須列明實際抵達的當地時間及發生延誤抵達該目的地的原因。
4. 如未能提供此項先決條款規定的文件，**本公司**恕不就**受保人**實際已預付但未享用在本章節 R(I)(c)內列明的受保費用而承擔本章節 R(I)(c)內所列的任何責任。

章節 R(I)(c)的不受保事項：

1. **受保人**在法律上沒有責任支付的有關款項。

(II) **滑雪或潛水保障**

(a) **滑雪用具或潛水用具遺失或損毀**

就實際損耗、折舊及陳舊進行扣減或撥備後，**本公司**將按其絕對酌情權對於在**受保期間**內遺失或被盜或損毀的**滑雪用具**或**潛水用具**進行修復、修理或更換，惟上限為**保障計劃**第 R(II)(a)項所列**保額**。

章節 R(II)(a)的特別條款：

1. 假若發生任何**滑雪用具**或**潛水用具**遺失、被盜或因第三方的蓄意行為而損毀的情況可能導致本章節 R(II)(a)的索償的事件，須在發生有關事件的二十四(24)小時內通知當地警方或相應的當地執法人員，並須附上報告該損失的書面證明。如未能發出此項先決條款規定的通知或附上該書面證明，**本公司**恕不承擔本章節 R(II)(a)的任何責任。
2. 假若遺失、盜竊或損毀在運送時發生，須於發現遺失或損毀起計二十四(24)小時內，立即將有關遺失或損毀通知**公共交通工具**的承運人，並須附上報告該損失的書面證明。如未能發出此項先決條款規定的通知或附上該書面證明，**本公司**恕不承擔本章節 R(II)(a)的任何責任。
3. **本公司**對於在**受保期間**內遺失、盜竊或損毀的每件**滑雪用具**或**潛水用具**的最大責任，將以**保障計劃**第 R(a)(i)項所列金額為限。
4. 假若任何一件遺失、被盜或損毀的**高爾夫球用具**為一對或一套物品的一部分，**本公司**對該件及該對或該套物品的最大責任，將以**保障計劃**第 R(a)(i)項所列金額為限。
5. **本公司**根據本章節 R(II)(a)對於在**受保期間**內所有遺失、盜竊或損毀的**滑雪用具**或**潛水用具**的總責任，不可超逾**保障計劃**章節 R(II)(a)所列**保額**。

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6. 於根據本章節 R(II)(a)支付任何款項後，**本公司**有權獲得及保留任何尋回或損毀的**滑雪用具**或**潛水用具**的利益及價值，並按其絕對酌情權處理剩餘價值。

章節 R(II)(a)的不受保事項：

本章節 **R(II)(a)**並不保障：

1. 因**受保人**疏忽所致的遺失、被盜或損毀，當中包括但不限於將**滑雪用具**或**潛水用具**置於無人看管的狀態。

2. **滑雪用具**或**潛水用具**因被置於汽車（鎖於車尾箱除外）或**公共交通工具**內或其他公共地方且無人看管而導致任何原因不明的遺失、被盜或損毀。

3. 任何**滑雪用具**或**潛水用具**因蟲蛀、蟲蝕、磨損、大氣或氣候狀況、逐漸損耗、機件或電力故障、任何清潔、修復、修理、改造的程序、海關或任何其他機關的充公或扣押而導致的遺失或損毀。

4. 在**旅程**前託運或單獨郵寄或以**公共交通工具**（同時運載**受保人**的**公共交通工具**除外）運載的租借或租賃設備或任何**滑雪用具**或**潛水用具**的遺失、被盜或損毀。

(b) **租用滑雪用具或潛水用具**

於**受保期間**內，**滑雪用具或潛水用具**因**公共交通工具**延誤、誤送或暫時丟失或**受保人**的**滑雪用具**或**潛水用具**遺失或被盜或損毀並已在章節 R(II)(a)保障，導致**受保人**須租用**滑雪用具或潛水用具**短暫使用，**本公司**將向**受保人**補償實際租用**滑雪用具或潛水用具**的費用，惟上限為**保障計劃**章節 R(II)(b)所列**保額**。

章節 R(II)(b)的特別條款：

1. 根據章節 R(II)(b)提出的任何索償，須附上承運人就有關**滑雪用具**或**潛水用具**延誤、誤送或暫時丟失而發出的確認書。如未能提供此項先決條款規定的確認書，**本公司**恕不承擔本章節 R(II)(b)的任何責任。

章節 R(II)(b)的不受保事項：

本章節 R(II)(b)並不保障：

1. 於有關**旅程**前託運或單獨郵寄或以**公共交通工具**（同時運載**受保人**的**公共交通工具**除外）運送的**滑雪用具**或**潛水用具**。

2. **滑雪用具**或**潛水用具**的延誤、誤送或暫時丟失屬於原因不明或因海關或任何其他機關充公或扣押而導致。

(c) **滑雪或潛水活動阻礙**

假若：

1. **受保人**、**直系家庭成員**或**同行伙伴**突然身故；或

2. **受保人**遭受**身體損傷**或**患病**；或

3. 因出現惡劣天氣、自然災害、涉及**公共交通工具**營運商的僱員**罷工**、**公共交通工具**機件故障或遭到劫持而延誤**旅程**；

並直接阻礙**受保人**參與已計劃的滑雪或潛水活動，**本公司**將補償下列**受保人**已預付但未享用的費用，

- 潛水套票或滑雪入場證的實際費用；和

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- 租用潛水用品或滑雪用品的實際費用；和
- 實際的學費。

惟上限為**保障計劃**章節 R(II)(c)所列**保額**。

章節 R(II)(c)的特別條款：

1. 任何在本章節 R(II)(c)內的索償須附上影響參與滑雪或潛水活動的文件及有關是次滑雪或潛水活動的正本收據。

2. 若取消活動是由於**受保人**的**身體損傷**或**患病**，須得到**醫生**證明該**身體損傷**或**患病**令**受保人**不適宜參與滑雪活動或進行潛水活動或危及其生命或健康。

3. 若取消活動是由於如上述(c)(iii)內所述的**罷工**、機件故障或遭到劫持引致，須附上來自實際抵達所列目的地當地的相關承運人的確認書，當中須列明實際抵達的當地時間及發生延誤抵達該目的地的原因。

4. 如未能提供此項先決條款規定的文件，**本公司**恕不就**受保人**已預付但未享用在本章節 R(II)(c)內列明的受保費用而承擔本章節 R(II)(c)內所列的任何責任。

章節 R(II)(c)的不受保事項：

1. **受保人**在法律上沒有責任支付的有關款項。

第四部分 － 一般不受保事項

適用於所有章節的一般不受保事項：

本保單並不保障因下列各項所致的損失或後繼損失或責任：

1. 任何**受保前已存在之傷病**、先天性或遺傳狀況。

2. 違反**醫生**意見而外出旅遊，或為了獲取醫治或醫療服務而外出旅遊。

3. 自殺、企圖自殺或故意引致自身的**身體損傷**。

4. 因懷孕、墮胎、分娩、流產、不育而引致的任何情況及其所致的其他併發症，整容手術或性病。

5. 牙醫護理（**意外**前為天然及健全的牙齒但因**意外身體損傷**所引致除外）。

6. 精神或神經失常、精神錯亂、精神狀況或任何行為失常。

7. 戰爭（不論宣戰與否）、侵略、外敵行動、內戰、革命、叛亂、暴動、敵對行為（不論宣戰與否）。

8. 直接參與**罷工**／**暴亂**／內亂／恐怖活動，或因**受保人**履行身為軍隊、武裝部隊或紀律部隊（包括但不限於警員、海關職員、消防員、入境處職員／督察及懲教處職員／督察等）成員或身為戰爭或滅罪行動志願者的職責。

9. 參與

   (a) 任何極限的運動或體育活動，其性質存有高度的危險性（即涉及高度專門技術、超乎正常的體力運用、使用專門工具或特技等），包括但不只限於跳懸崖、馬術障礙賽、特技表演、衝巨浪及獨木舟激流。除

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非該項活動是由當地合資格的旅遊活動經營者主辦，而且是項活動是開放給一般大眾及遊客參與，而對參與者並無特殊限制的旅遊活動（除身高或一般健康狀況警告外）。在參與活動時，受保人必須跟從按照合資格的導師及／或旅遊經營商的指導員之指導和監督。

(b) 職業體育賽事或運動，而受保人可透過從事該運動而取得報酬、贊助或任何形式的財政報酬、任何特技活動、偏離滑雪道之滑雪活動，

(c) 競賽（除徒步的競賽外，但不包括超過十公里的跑步、冬季兩項競賽及三項全能運動），

(d) 第四(4)級程度之私人水域橡皮艇漂流，

(e) 任何一般需利用專用裝備的攀石或攀山活動，裝備包括但不限於鉤、鶴嘴鋤、錨、螺、繩索或嚮導等工具，

(f) 潛水活動，除非**受保人**持 PADI 証書（或同類認可的資格）、或在合資格的導師指導下陪同之下進行潛水。深度限制不能超過**受保人**的 PADI 証書（或同類認可的資格）所注明的深度，惟在任何情況下都不得超過三十(30)米深及不得單獨進行潛水。

10. 任何政府的禁令或規例，或海關或任何其他機關扣押或破壞。

11. **受保人**的非法、蓄意或惡意行為或魯莽行為或疏忽。

12. **受保人**因服用超越法定水平之酒精或藥物引起的有關損失。

13. 乘搭任何飛機，但作為飛機搭客除外。

14. 任何不誠實或犯罪活動。

15. **受保人**未有減輕損失。

16. 愛滋病或愛滋病相關綜合症、任何於人體免疫力衰減症或相關疾病的陽性測試當時或其後開始的任何**身體損傷**或**患病**、或任何其他經性接觸傳染之疾病。

17. **受保人**從事體力勞動或非文職或危險工作，當中包括但不限於離岸鑽探、礦物提煉、處理爆炸品、地盤作業、特技工作及空中攝影。

18. 任何與古巴有關之損失或費用。

19. 任何不是本保單某一方的人士或實體，不能根據《合約（第三者權利）條例》（香港法例第 623 章）強制執行本保單任何條款。

第五部分 – 延期條款

1. 劫機延期：若**旅程**因**受保人**於**受保期間**內成為劫機的受害者而延誤的情況下，**受保期間**將由劫機日期起計自動延長最多連續十二(12)個月，或直至**受保人**返回**香港**時通過**香港**入境處出入境管制站為止（以較早者為準）。

2. 旅行延期：若**旅程**期間因在**受保人**控制以外的任何原因而超過**受保期間**，**受保期間**將自動免費延長最多十(10)個曆日，或直至**受保人**返回**香港**時通過**香港**入境處出入境管制站為止（以較早者為準）。

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第六部分 – 一般條款

1. 保單有效性：(a) 本保單只適用於消閒或公幹（只限行政性質、文職及非體力勞動）的旅程，而不適用於探險跋涉或類似旅程。(b) 受保人必須是適宜旅行人士。

2. 完整合約：本保單，連同其批註、附件（如有）、經**受保人**填妥的任何申請表格連同該申請表格附帶或於申請表格提及（如有）的任何文件，組成及構成完整的保險合約。除經**本公司**授權代表簽署的書面修訂外，本保單不得修改。

3. 每一章節的保額：**受保人**根據本保單任何章節可獲賠償的**保額**一經耗盡，**保額**將不會重置，且**本公司**毋須根據該章節對該**受保人**承擔任何進一步責任。

4. 保額支付：根據本保單支付的各項保障將會減少**受保人**可獲賠償的相關**保額**，而相關**保額**只有剩下的結餘可用於支付該**受保人**可能會向**本公司**提出的任何餘下保障索償。**本公司**根據本保單所有章節對涉及**意外**的每名**受保人**的總責任，將不超逾相關**保額**。

5. 重複保障：每一受保人同意，若他們同時受保多於一份由本公司簽發的「安達旅無憂單次旅遊保險」保單或其他由**本公司**簽發的旅遊保險：

   (a) **受保人**將會被視作只受保於該份提供最高保障金額的保單；或

   (b) 如每份保單提供的保障相同時，則會以**本公司**首次簽發的保單以提供保障。

   在任何情況下，任何重覆投購的保單，**本公司**將會在不付利息下全數退回已繳交的保費給**受保人**。

6. 索償通知及充份程度：索償的書面通知必須在合理的情況下盡早送交**本公司**，且在任何情況下，須於導致根據本保單提出索償的受保事件發生之日起計三十(30)天內送交**本公司**。由**受保人**或其代表或索償人送交**本公司**且載有足以證明**受保人**身份的通知，應視為已有效送交**本公司**的通知。**本公司**於接獲索償通知後，將向**受保人**提供**本公司**為備存索償證明而通常提供的該等表格。**受保人**或索償人須根據本保單及該等表格就有關提出任何索償的規定，以自費方式就此向**本公司**提供有關證明書、資料及證據。所有索償的證明必須於導致索償的受保事件發生之日起計一百八十(180)天內送交**本公司**。

7. 索償調查：於出現索償時，**本公司**可能作出其視為必要的任何調查，**受保人**應全面配合該調查。倘**受保人**未能配合**本公司**的調查，可能導致索償遭拒。

8. 檢查賬簿及記錄：**本公司**可能於**受保期間**內任何時間及直至本保單屆滿後三（3）年，或直至根據本保單提出的所有索償獲得最終調整及解決前，將會檢查於本保單有關的**受保人**賬冊及記錄。

9. 體格檢查及屍體剖驗：在索償處理期間，**本公司**有權自費於合理必要的情況下要求**受保人**接受檢查，除非法律禁止，否則亦可能要求進行屍體剖驗。

10. 其他保險（適用於章節 B、F、G、H、I、J、K、L、M、N、O、P 及 R）：倘若根據本保單受保的損失屬於任何其他有效保單的保障範圍（而不論該份其他保險是屬於主要、分擔、附加、待定或其他性質的保險），本保單會根據本保單條文及條款，保障該份其他保險所支付的金額以外的實際損失金額，惟以有關損失金額為限。

11. 法律訴訟：**受保人**在向**本公司**發出書面損失證明後六十（60）天起，方可展開法律訴訟追討本保單的賠償。**受保人**於損失日期起三（3）年後不得提出有關訴訟。

12. 追討權：倘若**本公司**或其授權代表（包括**授權支援服務供應商**）代**受保人**作出授權支付及／或支付，則**本公司**保留權利向**受保人**追討已支付或**本公司**須向接納**受保人**入住的**醫院**支付的全部金額，惟將扣除**本公司**根據本保單條款責任須支付的金額。

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13. 代位權：**本公司**有權以自費方式，以**受保人**的名義對導致根據本保單提出索償的事件可能負上責任的第三方提出訴訟。

14. 轉讓：本保單的任何權益轉讓對**本公司**並無約束。

15. 彌償的支付對象： 身故賠償將支付予已故**受保人**遺產的法定代表。根據章節 C – Chubb Assistance – 24-小時環球支援服務應付的款項乃支付予**授權支援服務供應商**或向**受保人**提供服務的其他服務提供商，除上述規定外，所有其他保障款項乃支付予**受保人**。

16. 貨幣：本保單所有列於保障計劃內的保額、保障及限額等均以港幣計算。儘管本保單之賠償及／或保障將調整至港幣計算及付款，本公司亦可選擇以當地貨幣算付。而相關之貨幣匯率則以意外當天列於 網站 www.oanda.com 的匯率中位數換算。

17. 地域限制及施行時間：地域限制及施行時間適用於**受保期間**中在世界各地的一日二十四（24）小時 ，惟章節 C – Chubb Assistance – 24-小時環球支援服務除外，就該項而言，除非經**本公司**批註，否則適用於**香港**以外在世界各地的一日二十四（24）小時。

18. 免責條款：章節 C – Chubb Assistance – 24-小時環球支援服務由**授權支援服務供應商**安排。**授權支援服務供應商**全面負責此 24 小時環球支援服務。**授權支援服務供應商**並非安達保險香港有限公司之聯營或附屬機構及安達保險香港有限公司概不負責有關或由**授權支援服務供應商**作出之任何行為或疏忽而引致之任何損失或損傷。

19. 取消保單：**本公司**可以根據**本公司**記錄所顯示**受保人**最後所知地址，以書面通知方式隨時取消本保單。該通知應註明該項取消的生效日期。該項取消不會影響於取消提出前已根據本保單一般條款第 6 項已向**本公司**提出的任何索償。

20. 保費：除非保費已支付，**本公司**在本保單內並無任何責任。保費於保險購買日期已被視為完全賺取。當保單繕發後，保費將不獲退還。

21. 調解：凡出現因本保單產生或與本保單有關的任何爭議或歧異，均須首先提交**香港**國際仲裁中心，並按**香港**國際仲裁中心的調解規則進行調解。假若調解員放棄調解，或調解以任何方式結束但未能解決爭議或歧異，則該爭議或歧異必須提交**香港**國際仲裁中心，並按**香港**國際仲裁中心的本地仲裁規則透過仲裁解決。假若因本保單產生或與本保單有關的任何爭議或歧異需要醫療知識（包括但不限於與**保障計劃**並未列明的任何醫療服務或手術的**保額**有關的問題），則按照**本公司**的合理酌情權，調解員或仲裁員可以為註冊醫療人員或顧問或專科醫生、外科醫生或**醫生**。倘若**本公司**拒付根據本保單提出的任何索償，而因拒付產生的任何爭議或歧異並未於拒付日期起計十二(12)個月內提交調解及仲裁（如有必要），則因該爭議或歧異所引致而針對**本公司**的任何索償將不獲受理。

22. 欺詐或錯誤陳述：由**受保人**作出或有關任何索償的任何虛假陳述均會導致**本公司**有權廢除本保單或撤銷根據本保單提出的責任。

23. 司法管轄權：本保單受**香港**法律約束並據其解釋。依從一般條款第 21 項，本保單的任何爭議均須根據**香港**法律解決。

24. 文書錯誤：**本公司**的文書錯誤不應令生效的保單因此失效，亦不應令失效的保單因此生效。

25. 違反條文：若**受保人**違反任何本保單的條文（包括理賠條件），本公司可在法律容許下的範圍內，拒絕支付賠償。

26. 本保單的詮釋：本保單以中英雙語撰寫；而英文版本為正式版本。如因對本保單內任何地方的詮釋而引起任何爭議，均以英文版本為準。

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27. 經貿制裁規定：當經貿制裁規定或其他法規禁止我們提供保險 (包括但不限於支付賠償金) 時，本保險將不適用。保單中的所有其他條款及細則則維持不變。

安達保險香港有限公司是一間美國公司 - Chubb Limited 的子公司/分公司， Chubb Limited 是紐約證券交易所上市公司，因此除了歐盟聯合國和香港的貿易限制之外，安達保險香港有限公司還受某些美國法律和法規的約束，這些限制可能禁止其向某些個人或實體提供保險或支付賠償，或者對某些類型的活動及某些國家/地區例如古巴提供保障。

第七部分 – 如何索償

索償人應於事發後三十 (30) 天內於安達索償中心* (www.chubbclaims.com.hk) 提交索償申請。閣下亦可透過智能電話或平板電腦掃描以下的 QR 碼登入安達索償中心。

再者，閣下可將索償申請表，連同旅遊證件及下列文件 (視乎事件而定) 於事發後三十 (30) 天內送交至安達保險香港有限公司。如需協助，請致電 3191 6611。

*只支援英文輸入。

個人意外保障／燒傷保障／信用卡保障

- 由**醫生**簽發的醫療報告或證明書，證明傷疾程度或嚴重狀況
- 警方報告（若相關）

意外死亡

- 死亡證
- 死因裁判官報告
- 警方報告（若相關）
- 如屬失蹤，由法院宣佈推定死亡

住院現金／醫療費用

- 經**醫生**證明的診斷，包括病人姓名及診斷日期
- 由**醫院**簽發的**醫院**賬單／收據正本並列明詳細項目購買**醫療用品**的收據正本（若相關）

個人財物／個人金錢／遺失證件

- 收據正本，包括遺失或損毀物件的購買日期、價格、型號及類別
- 展示損毀物件及其情況的相片
- 如在運送時遺失或損毀，由航空公司／**公共交通工具**發出的遺失通知書副本及其正式確認書

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- 警方報告（必須於事發後 24 小時內發出）
- 若屬遺失旅行支票，由簽發機構發出的遺失通知書副本（必須於事發後 24 小時內發出）

取消旅程／旅程阻礙／縮短旅程

- 未使用的**特別活動**正本門票
- 所有賬單、收據及票券
- 經**醫生**證明的診斷及治療，包括病人姓名及診斷日期
- 航空公司／**公共交通工具**所發出的正式文件，包括受害人姓名、日期、時間、延誤期間及延誤原因

旅程延誤／行李延誤

- 航空公司／**公共交通工具**所發出的正式文件，包括受害人姓名、日期、時間、延誤期間及延誤原因
- 酒店／航空公司／**公共交通工具**所發出的正式賬單／收據
- 購買必需盥洗用品及衣物之賬單或收據正本

家居財物保障

- 收據，包括遺失或損毀物件的購買日期、價格、型號及類別
- 展示損毀物件及其情況的相片
- 警方報告（必須於**旅程**回程後 24 小時內發出）

個人責任

- **意外**或事件的性質及情況聲明（未經**本公司**書面同意，不得承認責任或達成和解）
- 就意外或事件接收的所有有關文件（包括法院傳票副本、所有法院文件、律師函件及其他法律書信）

租用汽車的免責補償費用

- 由領有牌照營運的租車代理發出的正本收據
- 租用汽車合約，當中顯示免責補償費用及承擔租用的汽車損毀責任的綜合汽車保險合約條文
- 警方報告

高爾夫球「一桿入洞」

- 由該認可的高爾夫球場簽署或加簽證明取得「一桿入洞」的成績紀錄卡或簽發之証書的書面證明

業餘運動保障

- 正本收據，包括遺失或損毀物件的購買日期、價格、型號及類別
- 如在運送時遺失或損毀，由航空公司／**公共交通工具**發出的遺失通知書副本及其正式確認書

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- 警方報告（必須於事發後 24 小時內發出）
- 經**醫生**證明的診斷及治療，包括病人姓名及診斷日期
- 以下項目的正本收據：租用高爾夫球場地／潛水套票，滑雪入場證，租用**高爾夫球用品**／**滑雪用品**／**潛水用品**及學費
- 展示損毀物件及其情況的相片

上述文件為提出索償時需要提供的部份文件。本公司保留權利，於有必要時，要求受保人提供上文並未註明的任何其他資料或文件。

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個人資料收集聲明

本公司（「**我們**」）竭力確保**受保人**（「**閣下**」）對我們在收集個人資料方面的信心，**我們**於處理任何已收集的個人資料均會採取適當的保密程度及以處理私隱手法採用資料。

本個人資料收集聲明陳述**我們**收集及利用由**閣下**提供以識別 **閣下**個人的資料（「**個人資料**」）的目的、**個人資料**可能被公開的情況及 **閣下**有權要求查閱及更改**個人資料**的詳情。

(a) 收集個人資料的目的

我們收集及使用 **閣下個人資料**的目的，是為了向 **閣下**提供具優勢的保險產品及服務，包括用作考慮 **閣下**投保任何新的保險產品，及管理由**我們**提供的保單，安排保障，及執行和管理 **閣下**及**我們**在該等保障下的權利及責任。同時，**我們**亦會收集及使用 **閣下個人資料**以設計及識別能吸引 **閣下**的產品及服務，進行市場或顧客滿意度調查，及發展、建立及管理與其他機構就宣傳推廣、行政及使用**我們**相應的產品及服務的聯盟及其他計劃。在 **閣下**的同意下**我們**亦可能使用 **閣下**的**個人資料**作其他用途。

(b) 直接促銷

只會在得到**閣下**的同意，**我們**會使用 **閣下**的聯絡資料、人口統計資料、保單資料及繳費資料透過郵寄、電郵、電話或 SMS 短訊方式聯絡 **閣下**以便提供有關**我們**的保險產品的宣傳推廣。如 **閣下**不希望接收到**我們**的宣傳推廣，請於下列方格內加上「✓」。

(c) 個人資料的轉讓

個人資料將予以保密，而**我們**亦絕對不會將 **閣下**的**個人資料**售賣給第三者。**我們**會對公開 **閣下個人資料**作出限定；但在任何適用的法例條文下， **閣下**的**個人資料**可能：

(i) 會被透露予**我們**相信必須達成以上第 a 及第 b 段所述目的之第三者。例如：**我們**把 **閣下**的**個人資料**提供予**我們**相關的員工及承辦商、代理及其他涉及以上目的之人士，如處理數據的人士、專業人士、損失評估人員及索償調查員、醫生及其他醫療服務提供者、緊急支援服務提供者、保險局或信貸局、政府機構、分保人及分保經紀（當中可能包括在香港以外的第三方）；

(ii) 會給**我們**的母公司及附屬聯營公司或安達在本地及海外的相關人員使用；

(iii) 會提供予保險中介人， **閣下**可以透過指定系統查閱有關資料；

(iv) 會給予有關人士以維持公眾安全及法紀；及

(v) 在 **閣下**同意下提供予其他第三者。

就以上**個人資料**的轉移，如有適用的地方，則代表 **閣下**亦同意該資料在香港以外地方轉移。

(d) 查閱及更改個人資料

根據**個人資料**（私隱）條例， **閣下**有權要求查閱及更改曾給予**我們**的資料，另除非在**個人資料**（私隱）條例下有適用的豁免條款賦予**我們**可拒絕遵從，否則**我們**必須按 **閣下**的要求，給 **閣下**查閱及更改本身的**個人資料**。 **閣下**亦可向**我們**要求提供持有 **閣下個人資料**的類別。

翻查或更改**個人資料**的要求，必須透過書面提出及郵寄致：

安達個人資料私隱主任
香港鰂魚涌英皇道 979 號太古坊一座 39 樓
電話 +852 3191 6222
傳真 +852 2519 3233
電郵 Privacy.HK@chubb.com

在**我們**收到 **閣下**查閱或更改資料的要求後，會在四十(40)天內予以回覆該項要求，**我們**一般將不會收取任何費用；但即使**我們**在提供資料時需徵收費用，它們也會在合理的水平。至於更改資料的要求，則不會收取任何費用。

☐ 如 **閣下**不希望接收**我們**的宣傳推廣，請於方格內劃上「✓」。

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About Chubb in Hong Kong

Chubb is the world's largest publicly traded property and casualty insurer. With both general and life insurance operations, Chubb has been present in Hong Kong for more than 90 years via acquisitions by its predecessor companies. Its general insurance operation in Hong Kong (Chubb Insurance Hong Kong Limited) is a niche and specialist general insurer. The company's product offerings include Property, Casualty, Marine, as well as Accident & Health programs for large corporates, midsized commercial and small business customers. Over the years, it has established strong client relationships by offering responsive service, developing innovative products and providing market leadership built on financial strength.

More information can be found at www.chubb.com/hk.

關於安達香港

安達為全球最大的財產及責任保險公開上市公司。安達經營一般保險及人壽保險業務，透過收購其前身公司，已立足香港超過 90 年。安達香港的一般保險業務（安達保險香港有限公司）為大型及中小企業客戶提供注重在特定領域的保險產品，包括財產、責任、水險和意外及醫療保險服務。多年來，公司憑著其雄厚實力，在具有市場領導地位上致力於開創新產品，提供優質服務，並且建立穩健的客戶關係，與時並進。

如欲獲取更多資料可瀏覽 www.chubb.com/hk。

Contact Us

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聯絡我們

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Chubb. Insured.℠

TravelEase Single Trip Travel Insurance Policy Wording, Hong Kong. 安達旅無憂單次旅遊保險保單條款，香港.
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