



Sunflower TravelPlus Insurance Plan

Travel Insurance Terms and Conditions

In consideration of the payment of premium and subject to the definitions, exclusions, limitations, provisions and terms contained herein, endorsed hereon, or attached hereto, AIG Insurance Hong Kong Limited (hereinafter called "the Company") agrees to provide insurance to the Person(s) bearing the policy number named in the Receipt/Official Receipt issued in relation to a Journey that commenced and occurred between the Departure Date and Return Date subject to the terms and conditions of this Policy (hereinafter called "insured Journey") and promises to pay indemnity for loss to the extent provided herein.

The Receipt/Official Receipt refers to the Receipt/Official Receipt provided by Sunflower Travel Service Ltd. (hereinafter called "the Travel Agent") to the Insured Person with a policy number and shall together constitute proof of insurance. The Receipt/Official Receipt, Travel Insurance Terms and Conditions and endorsements (if any), shall constitute the entire contract of insurance (hereinafter called the "Policy").

This insurance is only valid for conventional vacation or business trips (administrative duty only) and shall not apply to persons undertaking expeditions, treks or similar journeys. Subject to the terms and conditions outlined herein, coverage in relation to each benefit is provided up to the Maximum Benefit outlined in the Schedule of Benefits for either the Global Plan or the South China & Macau Plan. The Global Plan may be purchased for any Journey. Either the Global Plan or the South China & Macau Plan may be purchased for any Journey to Fujian, Guangdong, Guangxi, Hunan Province add/or Macau which is for 14 days or less.

SCHEDULE OF BENEFITS

Benefits	Maximum Benefit (HK\$)	
	Global Plan	South China & Macau Plan
Section 1 – Emergency Medical Assistance		
1a. Emergency Medical Evacuation	Unlimited	Unlimited
1b. Repatriation of Remains	Unlimited	Unlimited
Section 2 – Emergency Medical Expenses		
2a. Medical Expenses	1,000,000	250,000
Follow up Medical Expenses sub-limit:	1,000,000	250,000
Physiotherapist treatment for follow-up treatments sub-limit:	50,000	50,000
Chinese Medicine Practitioner and Chiropractors treatment for follow-up treatments sub-limit:	5,000	5,000
2b. Compassionate Visit	\$200 per visit per day up to \$3,000	\$200 per visit per day up to \$3,000
Section 3 – Personal Accident		
3a. Accident while in a Common Carrier	1,000,000	500,000
3b. Other Accidents (aged under 17 or over 75 years, maximum benefit is HK\$150,000)	500,000	250,000
Section 4 – Baggage and Personal Effects		
Sub-limit per article/ pair/ set of articles:	10,000	3,000
Section 5 – Baggage Delay		
	2,000	2,000
Section 6 – Personal Money and Documents		
6a. Loss of Travel Document – sub limit	500	N/A
6b. Personal Money – sub limit	10,000	3,000
Section 7 – Journey Cancellation and Interruption		
7a. Journey Cancellation	10,000	3,000
7b. Handling fee charged due to Journey Cancellation	10,000	3,000
7c. Journey Interruption	1,000	500
(1) Curtailment Expenses		
(2) Journey Re-arrangement		
(3) Compulsory Quarantine		
(4) Missed Connection		
Section 8 – Travel Delay		
8a. Travel Delay	2,000	N/A
Sub-limit: for first full 5 hours delay;	250	N/A
Sub-limit: for each full 10 hours delay thereafter	500	N/A
OR		
8b. Trip Cancellation – cover the trip cancellation if the travel is delayed over 10 hours from scheduled departure time	1,000	N/A
Section 9 – Personal Liability	1,000,000	1,000,000
Section 10 – Land Travel Arrangement	1,000	500
AIG Travel Assistance Service	Included	Included

BENEFITS

SECTION 1 – EMERGENCY MEDICAL ASSISTANCE

1a. Emergency Medical Evacuation

When as a result of an Injury sustained or Sickness commencing while the Insured Person is traveling overseas during the insured Journey and if in the opinion of the Company or its authorized representative, it is judged medically appropriate to move the Insured Person to another location for medical treatment, or to return the Insured Person to Hong Kong or his/her habitual residence, the Company or its authorized representative shall arrange for the evacuation utilizing the means best suited to do so, based on the medical severity of the Insured Person's condition. The Company shall pay directly to the medical provider the Covered Expenses for such evacuation.

Covered Expenses are expenses for services provided and/or arranged by the Company or its authorized representative for the transportation, medical services and medical supplies necessarily incurred as a result of an emergency medical evacuation of an Insured Person.

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

The Insured Person or a person on his/her behalf must contact AIG Travel Assistance Hotline at (852) 3516 8699 for the arrangement.

1b. Repatriation of Remains

When, as a result of an Injury sustained or Sickness commencing while the Insured Person is traveling during the insured Journey, the Insured Person dies during the course of the insured Journey, the Company or its authorized representative shall make the necessary arrangements for the return of the Insured Person's remains to Hong Kong or his/her habitual residence. The Company shall pay the actual cost incurred for such repatriation.

The Insured Person or a person on his/her behalf must contact AIG Travel Assistance Hotline at (852) 3516 8699 for the arrangement.

SECTION 2 – EMERGENCY MEDICAL EXPENSES

2a. Medical Expenses

Under this Section, if the Insured Person sustains an Injury or Sickness during the insured Journey and as a result the Insured Person incurs medical expenses for treatment of the said Injury or Sickness prior to his/her return to Hong Kong, the Company shall reimburse the Insured Person up to the Maximum Benefit stated in the Schedule for that portion of the medical expenses which (i) are incurred by the Insured Person within one-hundred and eighty two (182) days from his/her first sustaining the said Injury or Sickness; and (ii) constitute Usual, Reasonable and Customary Medically Necessary Expenses.

- Follow-up Medical Expenses

In the event that the Insured Person has received treatment for an Injury or Sickness when travelling overseas during the Period of Insurance and for which a claim is accepted by the Company under Section 2a Medical Expenses, then, should he or she require follow-up medical treatment for the same Injury or Sickness on their return to Hong Kong the Company shall also reimburse the Insured Person up to but not exceeding HK\$50,000 for that portion of the follow-up medical expenses which i) are incurred within ninety (90) consecutive days of the Insured Person's return to Hong Kong and ii) constitute Usual, Reasonable and Customary Medically Necessary Expenses and subject to the following sub-limit:

- The maximum amount payable for treatment or services provided by Chinese Medicine Practitioner is HK\$3,000 and a per visit and per day limit of HK\$200 shall apply;
- The maximum amount payable for treatment or services provided by chiropractors is HK\$3,000 and a per visit and per day limit of HK\$200 shall apply;
- The maximum amount payable for treatments or services provided by physiotherapist is HK\$5,000.

In no event, however, shall the total amount payable under this Section 2a (Medical Expenses) exceed 100% of the Maximum Benefit as stated in the Schedule of Benefits.

2b. Compassionate Visit

The Company will reimburse up to the Maximum Benefit as stated in the Schedule of Benefits for the reasonable additional Accommodation and/or traveling expenses necessarily incurred by one (1) adult Immediate Family Member or one (1) Traveling Companion of the Insured Person to fly over or stay behind, to be with and/or take care of the Insured Person, following the death, Serious Injury Or Serious Sickness of the Insured Person during the insured Journey. This coverage can only be utilized once during the insured Journey.

In no event, however, shall the total amount payable under this Section 2a (Medical Expenses) and Section 2b (Compassionate Visit) exceed 100% of the Maximum Benefit as stated in the Schedule of Benefits with respect to Section 2 (Emergency Medical Expenses).

Exclusions applicable to Section 1 – Emergency Medical Assistance & Section 2 – Emergency Medical Expenses

No benefits will be provided:

- For surgery or medical treatment when in the opinion of the Qualified Medical Practitioner treating the Insured Person, the treatment can be reasonably delayed until the Insured Person returns to Hong Kong.
- If the purpose of the insured Journey is to obtain medical treatment or the insured Journey is undertaken against the Qualified Medical Practitioner's recommendation.
- For any expenses incurred for services provided by another party for which the Insured Person is not liable to pay, or any expenses already included in the cost of a scheduled insured Journey.
- For failure to obtain a written medical report from the Qualified Medical Practitioner.
- If the Insured Person refuses to follow the recommendation of a Qualified Medical Practitioner to return to Hong Kong or to continue the insured Journey whilst the Insured Person's physical condition at the time of recommendation is fit for travel.
- For any expenses for a service not approved and arranged by the Company or its authorized representative except that this exclusion shall be waived in the event the Insured Person or his/her Traveling Companion(s) cannot contact Travel Guard Assistance Hotline during an emergency medical situation for reasons beyond their control. In any event, the Company reserves the right to reimburse the Insured Person only for those expenses incurred for service which the Company or its authorized representative would have provided under the same circumstances. (For Section 1a Emergency Medical Evacuation only).
- For any expenses incurred for the transportation of the Insured Person's remains not approved and arranged by the Company or its authorized representative. (For Section 1b Repatriation of Remains only).
- For the follow up treatment expenses incurred outside Hong Kong.
- For any additional cost of single or private room accommodation at a Hospital or charges in respect of special or private nursing, non-medical personal services such as radio, telephone and the like; procurement or use of special braces, appliances or equipment.
- For any cosmetic surgery, refractive errors of eyes or hearing-aids, and prescriptions therefor except necessitated by accidental Injury occurring during the insured Journey.

SECTION 3 – PERSONAL ACCIDENT

3a. Accident while in a Common Carrier

The benefit under this Section is payable to the Insured Person who suffers an Injury while riding as a fare paying passenger, and not as pilot, operator or crew member, in or on, or while boarding or alighting from any Common Carrier at the time of Injury during the insured Journey which, directly and independently of all other causes, results in any Event provided in the Benefit Table hereunder, but only to the extent and if such Injury results in such Event happening to the Insured Person within ninety (90) days after the date of the Accident.

This Section is extended to cover an Injury sustained by the Insured Person while riding on a carrier arranged by a travel agent at the time of Injury during the insured Journey which, directly and independently of all other causes, results in any Event provided in the Benefit Table hereunder, but only to the extent and if such Injury results in such Event happening to the Insured Person within ninety (90) days after the date of the Accident.

3b. Other Accidents

The benefit under this Section is payable only with respect to Injury sustained by an Insured Person as a result of an Accident other than those Accidents referred to in Section 3a (Accident while in a Common Carrier) during the insured Journey which, directly and independently of all other causes shall result in any Event as provided in the Benefit Table hereunder, but only to the extent and if such Injury results the Event happening within ninety (90) days after the date of the Accident.

Benefit Table

EVENTS		Percentage of Principal Sum
Accidental Death and Disablement		
1. Death		100%
2. Permanent Total Disablement		100%
3. Permanent and incurable paralysis of all limbs		100%
4. Permanent total Loss of Sight of one eye or both eyes		100%
5. Loss of or the Permanent total Loss of Use of one limb		100%
6. Loss of or the Permanent total Loss of Use of two limbs		100%
7. Loss of Speech and Loss of Hearing		100%
8. Permanent total Loss of Hearing in:		
(a) both ears		75%
(b) one ear		15%
Third Degree Burns		
Area	Damage as a Percentage of Total Surface Area	Percentage of Principal Sum
1. Head	Equal to or greater than 8% damage of total head surface area	100%
	Equal to or greater than 5% but less than 8% damage of total head surface area	75%
	Equal to or greater than 2% but less than 5% damage of total head surface area	50%
2. Body (exclude head surface area)	Equal to or greater than 20% damage of total body surface area	100%
	Equal to or greater than 15% but less than 20% damage of total body surface area	75%
	Equal to or greater than 10% but less than 15% damage of total body surface area	50%

Compensation:

- If more than one (1) of the above Events are applicable, only the Event with the highest compensation (i.e. the highest Percentage of Principal Sum) will be payable under this Section and in any event shall not exceed the Maximum Benefit stated in the Schedule of Benefits.
- The insurance for any Insured Person under this Policy shall terminate upon the occurrence of any loss for which indemnity is payable under any one (1) of the above Events, but such termination shall be without prejudice to any claim originating out of the Accident causing such loss.
- When a limb or organ which had been partially disabled prior to an Injury covered under this Policy becomes totally disabled as a result of such Injury, the Percentage of Principal Sum payable shall be determined by the Company having regard to the extent of disablement caused by the Injury. No payment however shall be made in respect of the loss of a limb or organ which was permanently disabled prior to the Injury.

4. If the Insured Person is under seventeen (17) years of age or over seventy-five (75) years of age on the Effective Date, the Maximum Benefit payable will be HK\$150,000 subject to the Percentage of Principal Sum as stated in the above Benefit Table under Section 3 (Personal Accident).

This Section is extended to cover an Injury sustained by the Insured Person

- While he/she is traveling directly from his/her place of residence or place of regular employment in Hong Kong to the immigration counter within four (4) hours before the scheduled departure time of the Common Carrier in which the Insured Person has arranged to travel for the purpose of commencement of his/her insured Journey.
- While he/she is traveling directly from the immigration counter in Hong Kong to his/her place of residence or place of regular employment within four (4) hours upon his/her arrival in Hong Kong after completion of his/her insured Journey.

Exposure

If by the reason of any covered Accident occurring during the insured Journey, the Insured Person is unavoidably exposed to the elements (including but not limited to prolonged and rigorous weather or environmental conditions) and as a direct and unavoidable result of such exposure sustains death, loss or disablement within twelve (12) months from the date of Accident, the Company will pay in accordance to the Events as stated in the Benefit Table.

Disappearance

If the Insured Person disappears as a result of the disappearance, sinking or wrecking of the Common Carrier caused by an Accident in which the Insured Person was traveling at the time of the Accident during the course of the insured Journey and remains missing after twelve (12) months from the date of the Accident, and the Company has reason to believe that the Insured Person has died in the Accident, the Company will pay the Personal Accident benefit, subject to receipt of a signed undertaking by the personal representative of the Insured Person's estate that any such payment shall be refunded to the Company if it is later discovered that the Insured Person did not die as a result of the Accident.

Exclusion Applicable to Section 3 - Personal Accident

- For the purpose of Section 3, in no event shall the Company be liable to pay for any loss caused by an Injury or otherwise which is a consequence of any kind of disease or Sickness.

SECTION 4 – BAGGAGE AND PERSONAL EFFECTS

The Company will pay the Insured Person up to the Maximum Benefit as stated in the Schedule of Benefits for loss of or damage to baggage, clothing and personal effects, worn, carried by the Insured Person by hand, in trunks, suitcases and like receptacles owned by the Insured Person occurring during the insured Journey. If any damaged article is proven to be beyond economical repair, a claim will be dealt with as if the article had been lost. The Company shall not be liable for more than HK\$2,000 in respect of any one (1) article, pair or set of articles and may make payment or at its opinion reinstate or repair the article, pair, or set of articles subject to due allowance for wear and tear and depreciation in respect of any item more than one (1) year old from the date of purchase.

Exclusions Applicable to Section 4 - Baggage and Personal Effects

No benefits will be provided for:

- The following classes of property: business goods or sample, foodstuffs, animals, motor vehicles (including accessories), motorcycles, bicycles, boats, motors, any other conveyances, household furniture, antiques, jewelry or accessories, mobile phone (including PDA phone and other accessories), money (including checks, traveler's checks, etc), plastic money (including the credit value of credit card, Octopus cards, etc), securities, tickets or documents.
- Any loss or damage caused by wear and tear, gradual deterioration, moths, vermin, inherent vice or damage sustained due to any process initiated by the Insured Person to repair, clean or alter any property.
- Any loss of or damage to hired or leased equipment.
- Any loss of or damage to property resulting directly or indirectly from insurrection, rebellion, revolution, civil war, usurped power, Terrorist Act or action taken by Governmental Authorities in hindering, combating or defending against such an occurrence; or from action taken by any Government or Public Authority pursuant to any customs or other regulations to secure, destroy, quarantine or confiscate such property; or in respect of any property which is contraband or which is or has been illegally transported or traded.
- Any loss or damage to property insured under any other insurance, or which could be reimbursed by a Common Carrier, a hotel, and any service providers or otherwise.
- Any loss of or damage to property which functions normally after it has been fixed or repaired by a third party.
- With respect to any of the Insured Person's baggage which the Insured Person either intentionally sent by a different Common Carrier than the one in which the Insured Person was traveling, or with respect to any baggage, souvenir or other items which the Insured Person mailed or shipped separately.
- Any loss of the Insured Person's baggage when it is left unattended in a public place or as a result of the Insured Person's failure to take due care and precautions for the safe guard and security of such property.
- Any loss of data recorded on tapes, cards, diskettes or otherwise.
- Breakage or damage to fragile articles.
- Any loss or damage while in the custody of a hotel or Common Carrier, unless reported immediately on discovery in writing to such hotel or Common Carrier within three (3) days and a Property Irregularity Report is obtained in the case of the event occurred in an airline.
- Any loss not reported to the police within twenty-four (24) hours from occurrence of the incident and such police report is not obtained at the place of loss.
- Loss by any mysterious disappearance.
- Shortage due to error, omission, exchange or depreciation in value.
- Receipts of the claimed items submitted which are not in the Insured Person's name.
- Any loss claimed under Section 5 (Baggage Delay) arising from the same cause.

SECTION 5 – BAGGAGE DELAY (APPLICABLE TO GLOBAL PLAN ONLY)

The Company shall reimburse up to the Maximum Benefit stated in the Schedule of Benefits the actual expenses incurred for emergency purchase of essential items or requisites in consequence of temporary deprivation of the Insured Person's baggage for over ten (10) hours from the time of arrival at the destination due to the misdirection in delivery of the baggage by a Common Carrier on or in which the Insured Person is traveling during the insured Journey. This benefit can only be utilized once during the insured Journey.

Coverage under this Section 5 is provided under the Global Plan only. No coverage under this Section 5 is provided under the Guangdong & Macau Plan.

Exclusions Applicable to Section 5 - Baggage Delay

No benefits will be provided:

- For the failure of the Insured Person to obtain written confirmation from the Common Carrier as to the number of hours and the reason for such delay.
- With respect to any of the Insured Person's baggage which the Insured Person either intentionally sent by a different Common Carrier than the one in which the Insured Person was traveling, or with respect to any baggage, souvenir or other items which the Insured Person mailed or shipped separately.
- For any loss claimed under Section 4 (Baggage and Personal Effects) arising from the same cause.

SECTION 6 – PERSONAL MONEY AND DOCUMENTS

6a. Loss of Travel Document

In the event that the Insured Person loses his/ her travel documents and/or travel tickets during the insured Journey as a direct result of robbery, burglary or theft, the Company will reimburse the Insured Person up to the Maximum Benefit as stated in the Schedule of Benefits for: (i) the replacement cost of the travel documents and/or travel tickets; and/or (ii) reasonable additional cost of Travel Ticket and/or Accommodation necessarily incurred by an Insured Person for the sole purpose of making necessary travel arrangements for replacing the travel documents.

Exclusions Applicable to Section 6a – Loss of Travel Document

No benefits will be provided:

- If the loss is not reported to the police within twenty-four (24) hours from the occurrence of the incident and for which such police report is not obtained at the place of loss.
- If the lost travel document and/or visa and/or travel tickets are not needed by the Insured Person to complete to the insured Journey.
- For loss by any mysterious disappearance.
- In respect of loss resulting directly or indirectly from insurrection, rebellion, revolution, civil war, usurped power, Terrorist Act or action taken by Governmental Authorities in hindering, combating or defending against any such an occurrence; or from action taken by any Government or Public Authority pursuant to any customs or other regulations to secure, destroy, quarantine or confiscate any property; or in respect of any property which is (or represents the proceeds of) contraband or which is or has been illegally transported or traded (or represents the proceeds of such actions).
- For both the temporary and permanent versions of the same travel document. In the event of such loss, an Insured Person may claim either one (1) version but not both.

6b. Personal Money

The Company will reimburse the Insured Person up to the Maximum Benefit as stated in the Schedule of Benefits for the loss of cash, bank notes, traveler's check and money order occurring during the insured Journey. This reimbursement is subject to the condition that the relevant loss must have been reported to the police at the place of the loss within twenty-four (24) hours from the occurrence of the incident and any such claim must be accompanied by written documentation and report from such police.

Exclusions Applicable to Section 6b - Personal Money

No benefits will be provided:

- In respect of any form of the plastic money (including any credit card, Octopus cards, etc) or securities.
- In respect of loss not reported to the police within twenty-four (24) hours from the occurrence of the incident and such police report is not obtained at the place of loss.
- In respect of shortage due to error, omission, exchange or depreciation in value.
- In respect of loss of traveler's checks where such loss is not immediately reported to the local branch or agent of the issuing authority.
- For loss by any mysterious disappearance.
- In respect of loss resulting directly or indirectly from insurrection, rebellion, revolution, civil war, usurped power, Terrorist Act or action taken by Governmental Authorities in hindering, combating or defending against such an occurrence; or from action taken by any Government or Public Authority pursuant to any customs or other regulations to secure, destroy, quarantine or confiscate such cash, bank notes, check or money; or in respect of any cash, bank notes, check or money which is (or represents the proceeds of) contraband or which is or has been illegally transported or traded (or represents the proceeds of such actions).

The maximum amount payable under Section 6a (Loss of Travel Document) and Section 6b (Personal Money) shall not in aggregate exceed 100% of the Maximum Benefit for Section 6 (Personal Money and Documents) as stated in the Schedule of Benefits.

SECTION 7 – JOURNEY CANCELLATION AND INTERRUPTION

7a. Journey Cancellation

The Company shall reimburse the Insured Person up to the Maximum Benefit as stated in the Schedule of Benefits for loss of travel fare and/or Accommodation expenses paid in advance by the Insured Person and for which the Insured Person is legally liable and which are not recoverable from any other source consequent upon the cancellation of the insured Journey necessitated by the occurrence of any of the following, within the period of one hundred and eighty (180) days before the scheduled departure date of the insured Journey (except for sub-paragraphs (iii) and (iv) below):

- Death, Serious Injury Or Serious Sickness of the Insured Person, Insured Person's Immediate Family Member, Close Business Partner or Traveling Companion;
- Witness summons, jury service or compulsory quarantine of the Insured Person;
- Sudden occurrence of strike by the employees of a Common Carrier, unanticipated outbreak of riot or civil commotion, or epidemic at the planned destination within the period of one (1) week before the departure date of the planned insured Journey;
- Serious damage to the Insured Person's and/or Traveling Companion's Primary Residence in Hong Kong from fire, flood, earthquake or similar natural disasters within the period of one (1) week before the departure date of the planned insured Journey which requires the Insured Person's and/or Traveling Companion's presence in the premises on the departure date of the insured Journey.

7b. Handling fee charged due to Journey Cancellation (applicable to South China & Macau Plan only)

The Company shall reimburse the Insured Person up to the Maximum Benefit as stated in the Schedule of Benefits for the handling fee charged by the travel agent if the tour is cancelled due to Tropical Cyclone Warning Signal no. 8 or above or Black Rainstorm Signal either being in force or announced to be hoisted by the Hong Kong Observatory within 3 hours prior to departure time.

Coverage under this Section 7b is provided under the South China & Macau Plan only and shall only apply if such Signal is issued, or initial weather warning was made, after the Policy issue date and time. No coverage under this Section 7b is provided under the Global Plan.

The coverage under Section 7a (Journey Cancellation) and 7b (Handling Fee charged due to Journey Cancellation) cannot be utilized once the Insured Person has commenced the insured Journey.

7c. Journey Interruption

(1) Curtailment Expenses

The Company shall reimburse the Insured Person up to the Maximum Benefit as stated in the Schedule of Benefit for the amount of travel fare and/or Accommodation expenses forfeited and/or additional Travel Ticket and/or Accommodation expenses reasonably and necessarily incurred after the commencement of the insured Journey where the Insured Person has to terminate and cut short the insured Journey and return to Hong Kong as a result of the following reasons:

- Death, Serious Injury Or Serious Sickness or hijacking of the Insured Person or Close Business Partner who is a resident in Hong Kong;
- Death, Serious Injury Or Serious Sickness of the Insured Person's Immediate Family Members or Traveling Companion;
- Sudden occurrence of strike by the employees of a Common Carrier, unanticipated outbreak of riot or civil commotion, natural disasters, or epidemic at the planned destination which prevents the Insured Person from continuing with his/her scheduled insured Journey.

(2) Journey Re-arrangement

The Company shall reimburse the Insured Person up to the Maximum Benefit stated in the Schedule of Benefits for additional and reasonable Travel Ticket and/or Accommodation incurred after the commencement of the insured Journey as a direct result of sudden occurrence of strike by the employees of a Common Carrier, unanticipated outbreak of riot or civil commotion, inclement weather, natural disasters, or epidemic at the planned destination. Such reimbursement is only payable if the aforesaid expenses are incurred solely for the purpose of the continuation of the traveling to the original planned destination comprised in the insured Journey.

Curtailment Expenses payable under Section 7c(1) in relation to the amount of travel fare and/or Accommodation expenses forfeited will be calculated in proportion to the number of days remaining after the relevant interruption of the insured Journey. Actual expenses incurred in relation to additional Travel Ticket and/or Accommodation expenses for the insured Journey payable under both Section 7c(1) (Curtailed Expenses) and Section 7c(2) (Journey Re-arrangement) will be reimbursed up to the Maximum Benefit as stated in the Scheduled of Benefits.

(3) Compulsory Quarantine

The Company shall reimburse the Insured Person up to the Maximum Benefit as stated in the Schedule of Benefits for the amount of pro-rated basic tour fee and/or Accommodation forfeited after the commencement of the insured Journey where the Insured Person is Compulsorily Quarantined due to suspected exposure to Pandemic Influenza infection. Compulsory Quarantine payable under Section 7c(3) in relation to the amount of basic tour fee and/or Accommodation forfeited will be calculated in proportion to the number of quarantined days during the insured Journey.

(4) Missed Connection

The Company shall reimburse the Insured Person up to the Maximum Benefit as stated in the Schedule of Benefits under Section 7c(4) for the necessary and reasonable expenses incurred to use an alternative common carrier to arrive at the destination on time in the event the scheduled common carrier connection is missed at the transfer point due to the late arrival of the preceding aircraft which was due to one (1) or more of the covered events listed under Section 7 (c) (2) Journey Re-arrangement.

The maximum amount payable under Section 7c(1) (Curtailed Expenses), Section 7c(2) (Journey Re-arrangement), Section 7c(3) (Compulsory Quarantine) and Section 7c(4) (Missed Connection) shall not in aggregate exceed 100% of the Maximum Benefit for Section 7c (Journey Interruption) as stated in the Schedule of Benefits. This coverage Section 7c (Journey Interruption) is effective only if this insurance is purchased before the Insured Person becomes aware of any circumstances which can lead to the disruption or interruption of the insured Journey.

Exclusions Applicable to Section 7 - Journey Cancellation and Interruption

No benefits will be provided for any loss:

- That is covered by any other existing insurance scheme, government program, or which will be paid or refunded by any Common Carrier, travel agent or any other provider of transportation and/or accommodation.
- That is caused directly or indirectly by government regulations or control, bankruptcy, liquidation or default of travel agencies, tour operator and/or Common Carrier.
- That arises from any circumstances leading to the cancellation and/or disruption of his/her insured Journey before the purchase of this travel insurance.
- That directly or indirectly arises from the Insured Person's failure to notify the travel agent/ tour operator or provider of transportation or accommodation immediately if it is necessary to cancel or curtail the travel arrangement for the reasons set out in sub-paragraphs i. to iv. of Section 7a (Journey Cancellation) or sub-paragraphs i. to iii. of Section 7c(1) (Curtailed Expenses).
- In respect of any loss claimed under Section 7c(1) (Curtailed Expenses), Section 7c(2) (Journey Re-arrangement), Section 7c(4) (Missed Connection) and Section 8 (Travel Delay) arising from the same cause.
- If the Insured Person fails to produce to the Company a written confirmation containing the information issued by the government or other relevant authorities regarding the Compulsory Quarantine, including but not limited to the quarantined period and the reason for such quarantine.

“**Primary Residence**” means the house or building permanently occupied by the Insured Person for the sole purpose of private dwelling.

“**Principal Sum**” means the Maximum Benefit.

“**Qualified Medical Practitioner**” shall mean any person legally authorized by the Government with jurisdiction in the geographical area of his or her practice to render medical or surgical service, but excluding a qualified medical practitioner who is the Insured Person or an Immediate Family Member of the Insured Person.

“**Schedule of Benefits**” means the section to this Travel Insurance Terms and Conditions entitled “Schedule of Benefits” and may be amended by the Company from time to time.

“**Serious Injury or Serious Sickness**” means an injury or sickness for which the Insured Person or Traveling Companion requires treatment and which is certified by a Qualified Medical Practitioner as being dangerous to life and as rendering the Insured Person unfit to travel or continue with his/her original insured Journey. When “Serious Injury or Serious Sickness” is applied to the Insured Person’s, Immediate Family Member(s) or Close Business Partner, it shall mean injury or sickness for which the Insured Person’s Immediate Family Member or Close Business Partner requires treatment and certified by a Qualified Medical Practitioner as being dangerous to life and which results in the Insured Person’s discontinuation or cancellation of his/her original insured Journey.

“**Sickness**” means a sickness or disease which is contracted during the insured Journey directly and independently of any other cause and which commences during the insured Journey.

“**Spouse**” means the person married to or in a civil partnership with the Insured Person. For these purposes, a marriage or civil partnership is a formal and legally binding union entered into between two people which is recognized as a marriage or civil partnership under the laws of the jurisdiction in which the union takes place.

“**Symptom**” means a sign or an indication of disorder or disease experienced by an individual.

“**Terrorist Act**” shall mean any actual or threatened use of force or violence directed at or causing damage, injury, harm or disruption, or commission of an act dangerous to human life or property, against any individual, property or government, with the stated or unstated objective of pursuing economic, ethnic, nationalistic, political, racial or religious interests, whether such interests are declared or not. Criminal acts, primarily committed for personal gain and acts arising primarily from prior personal relationships between perpetrator(s) and victim(s) shall not be considered terrorist acts. Terrorist act also includes any act, which is verified or recognised by the (relevant) Government as an act of terrorism.

“**Third Degree Burns**” shall mean full thickness skin destruction due to burns.

“**Travel Agent**” refers to the travel agent which is registered with the Company as its authorized insurance agent/agency.

“**Traveling Companion**” shall mean the person who is accompanying the Insured Person for the whole insured Journey.

“**Travel Ticket**” means an economy class travel ticket purchased for traveling on any Common Carrier.

“**Usual, Reasonable And Customary**” shall mean an expense which: (1) is charged for treatment, supplies or medical services medically necessary for caring of Insured Person(s) under the care, supervision, or order of a Qualified Medical Practitioner; (2) does not exceed the usual level of charges for similar treatment, supplies or medical services in the locality where the expense is incurred; and (3) does not include charges that would not have been made if no insurance existed.

“**War**” shall mean war, whether declared or not, or any warlike activities, including use of military force by any sovereign nation to achieve economic, geographic, nationalistic, political, racial, religious or other ends.

GENERAL CONDITIONS

- At the time this insurance becomes effective, the Insured Person must be fit to travel and not be aware of any circumstances which could lead to cancellation or disruption of the insured Journey, otherwise any claim could be forfeited.
- No refund of premium is allowed once the Policy has been issued.
- This Policy may not be renewed. However, if any circumstance exists during the insured Journey which is outside the Insured Person’s control and the insured Journey is extended beyond the period of Insurance stated in the Policy Schedule, the Company will automatically extend the Period of Insurance for a maximum ten (10) consecutive days without charge for such an extended period as is reasonably necessary for completion of the Insured Person’s insured Journey.
- During the Period of Insurance, if more than one Journey commenced, insured Journey shall mean and refer only to the Journey that commenced earliest.
- For travellers not departing from Hong Kong, all the words Hong Kong” which appear in the Policy shall be changed to read as “Departure Country” except for the currency, and provided that the Insured Person’s itinerary must include Hong Kong or such travel arrangements must be made and paid in Hong Kong.
- If the Insured Person is covered under more than one (1) comprehensive voluntary travel insurance policy underwritten by the Company for the same trip, only the travel insurance policy with the greatest compensation will apply and benefits thereunder be payable.
- The insurance is only valid for conventional leisure travel or business travel (limited to administrative duty) purpose only and shall not apply to persons undertaking expeditions, treks or similar journeys.
- Under the Global Plan, the benefits shown under the section headed “Global Plan” in Schedule of benefits shall be provided under this Policy. The maximum period of an insured Journey under the Global Plan cannot exceed one hundred and eighty-two (182) days per Journey.
- Under the South China & Macau Plan, only those benefits shown under the section headed “South China & Macau Plan” in the Schedule of Benefits are provided under this Policy. The maximum period of an insured Journey under the South China & Macau Plan cannot exceed fourteen (14) days per Journey.
- Any non-disclosure or fraudulent misrepresentation in any particular material shall lead to the whole Policy being void from inception.
- For Insured Person aged seventy-five (75) or above on the Effective Date, the Maximum Benefit payable will be HK\$150,000 subject to the percentage of such Principal Sum payable as stated in the Benefit Table under Section 3 (Personal Accident) whilst 50% of the Maximum Benefit will be payable for all other sections covered under this Policy.

GENERAL PROVISIONS

1. ENTIRE CONTRACT

The Receipt/Official Receipt, Travel Insurance Terms and Conditions and endorsements (if any), shall constitute the entire contract of insurance. No statement made by the applicant for insurance not included herein shall avoid the Policy or be used in any legal proceedings hereunder unless such statement is fraudulent. No agent has authority to change this insurance or to waive any of its provisions. No change in this insurance shall be valid unless approved by the Company and such approval is endorsed hereon.

2. ELIGIBILITY

Age limit: No age limit.

3. TIME OF NOTICE OF CLAIM

Written notice of loss on which a claim may be based must be given to the Company within thirty (30) days after the date of the incident causing such loss and in the event of accidental death, immediate notice thereof must be given to the Company.

4. FORMS FOR PROOF OF LOSS

The Company, upon receipt of such notice, will furnish to the claimant such forms as are usually furnished by it for filing proofs of loss. If such forms are not so furnished within fifteen (15) days after the receipt of such notice, the claimant shall be deemed to have complied with the requirements of this Policy as to proof of loss upon submitting within the time fixed in this Policy for filing proofs of loss, written proof covering the occurrence, character and extent of the loss for which a claim is made. All certificates, information and evidence required by the Company shall be furnished at the expense of the Insured Person/claimant or his legal personal representatives and shall be in such form and of such nature as the Company may prescribe.

5. TIME FOR FILING PROOF OF LOSS

Affirmative proof of loss must be furnished to the Company by the Insured Person at its said office in case of a claim for such loss within sixty (60) days after the termination of the period for which the Company is liable. If it shall be shown not to have been reasonable possible to give such notice within such time by the Insured Person, such proof is furnished as soon as reasonable possible and within one (1) year after the date of such loss.

6. SUFFICIENCY OF NOTICE

Such notice by or on behalf of the Insured Person given to the Company, with particulars sufficient to identify the Insured Person shall be deemed to be notice to the Company. Failure to give notice within the time provided in this Policy shall not invalidate any claim if it shall be shown not to have been reasonably possible to give such notice and that notice was given as soon as was reasonably possible.

7. IMMEDIATE PAYMENT OF INDEMNITIES

All indemnities provided in this Policy for loss other than that of time on account of disability will be paid immediately after receipt of due proof.

8. TO WHOM INDEMNITIES PAYABLE

Any indemnity paid for loss of life shall be payable to the Insured Person’s estate. All other indemnities shall be payable to the Insured Person except for Emergency Medical Evacuation and Repatriation of Remains where relevant amounts will be paid directly to the provider of service in accordance with the terms of this Policy.

9. FRAUDULENT CLAIMS

If the claim be in any respect fraudulent or if any fraudulent means or devices be used by the Insured Person or anyone acting on the behalf to obtain any benefit under this Policy, all benefit in respect of such claims shall be forfeited.

10. RIGHT OF RECOVERY

In the event that authorization of payment and/or payment is made by the Company and/or its authorized representative for a claim which is not covered under this Policy or when the limit of liability of this insurance exceeds, the Company reserves the right to recover the said sum or excess from the Insured Person.

11. RIGHTS OF THIRD PARTIES

Nothing in this Policy is intended to confer a direct enforceable benefit on any party other than the Insured Person(s) and the Company, whether pursuant to the Contracts (Rights of Third Parties) Ordinance or otherwise. It is hereby noted and agreed, however, that the Company and the Insured Person(s) named in the Receipt/Official Receipt alone have the right to amend this Policy by agreement or (if any such rights exist in the Policy) to cancel or terminate the Policy, without giving notice, or requiring the consent of any other person.

12. MEDICAL EXAMINATION AND TREATMENT

The Company at its own expense shall have the right and opportunity to conduct medical examination on the Insured Person when and as often as it may reasonably require during a pending claim under this Policy and to make an autopsy in the case of death where it is not forbidden by law. The Insured Person shall as soon as possible after the occurrence of any Injury or Sickness obtain and follow the advice of a duly Qualified Medical Practitioner and the Company shall not be liable for any consequences arising by reason of the Insured Person’s failure to obtain or follow such advice and use such appliances or remedies as may be prescribed.

13. SUBROGATION

In the event of any payment under this Policy, the Company shall be subrogated to all the Insured Person’s rights of recovery therefore against any person or organization and the Insured Person shall execute and deliver instruments and papers and do whatever else is necessary to secure such rights. The Insured Person shall take no action after the loss to prejudice such rights.

14. LEGAL ACTIONS

No action at law or in equity shall be brought to recover on this Policy prior to the expiration of sixty (60) days after written proof of loss has been furnished in accordance with the requirements of this Policy. No such action shall be brought after the expiration of three (3) years after the time written proof of loss is required to be furnished.

15. LIMITATIONS CONTROLLED BY STATUTE

If any time limitation of this insurance, with respect to giving notice of claim or furnishing proof of loss, is less than that permitted by the law of Hong Kong, such limitation is hereby extended to agree with the minimum period permitted by such law.

16. COMPLIANCE WITH POLICY PROVISIONS

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

17. POLICY INTERPRETATION

This Policy is subject to the laws of the Hong Kong and the parties hereto agree to submit to the jurisdiction of the courts of the Hong Kong.

18. ASSIGNMENT

No notice of assignment of interest under this Policy shall be binding upon the Company unless and until the original or a duplicate thereof is filed at the Home Office of AIG Insurance Hong Kong Limited, 46/F, One Island East, 18 Westlands Road, Island East, Hong Kong and the Company’s consent to such assignment is endorsed. The Company does not assume any responsibility for the validity of an assignment. No provision of the charter, constitution or by-laws of the Company shall be used in defense of any claim arising under this Policy, unless such provision is incorporated in full in this Policy.

19. DATA PRIVACY

The Insured Person / Policyholder / Applicant agree(s) that:

- the personal data collected during the application process or administration of this policy may be used by AIG HK for the purposes stated in its Data Privacy Policy, which include underwriting and administering the insurance policy being applied for (including obtaining reinsurance, underwriting renewals, data matching, claim processing, investigation, payment and subrogation).
- AIG HK may use the Insured Person’s/ Policyholder’s/ Applicant’s contact details (name, address, phone number and e-mail address) to contact him/her about other insurance products provided by the AIG group (assuming AIG HK has obtained the agreement of the Insured Person / Policyholder / Applicant to use such contact details for this purpose).
- AIG HK may transfer the personal data to the following classes of persons (whether based in Hong Kong or overseas) for the purpose identified:
 - third parties providing services related to the administration of this policy, including reinsurers (per (a) above);
 - financial institutions for the purpose of processing this policy and obtaining policy payments (per (a) above);
 - in the event of a claim, loss adjusters, assessors, third party administrators, emergency providers, legal services providers, retailers, medical providers and travel carriers (per (a) above);
 - for the purpose of conducting direct marketing activities (per (b) above), marketing companies authorized by the AIG group;
 - another member of the AIG group (for all of the purposes stated in (a) and (b)) in any country; or
 - other parties referred to in AIG HK’s Data Privacy Policy for the purposes stated therein.
- The Insured Person / Policyholder / Applicant may gain access to, or request correction of his/her personal data (in both cases, subject to a reasonable fee), or change the option he/she previously elected in relation to the use of his/her contact details for direct marketing at any time, by writing to the Privacy Compliance Officer of AIG Insurance Hong Kong Limited at GPO Box 456 or cs.hk@aig.com. The same addresses may be used to contact AIG HK with any comments in relation to the services it provides. The full version of AIG HK’s Data Privacy Policy can be found at www.aig.com.hk.

20. CLERICAL ERROR

Clerical errors by the Company shall not invalidate insurance otherwise valid nor continue insurance otherwise valid.

Copyright in this Travel Insurance Terms and Conditions is reserved. No part of this Travel Insurance Terms and Conditions may be reproduced in whole or part without the express consent of AIG Insurance Hong Kong Limited.

新華旅遊樂保險計劃

旅遊保險條文及條款

當美亞保險香港有限公司(以下稱為“本公司”)收受保費後，即依據批註內的定義、不保事項、限制、條款和條件，同意承保名列於收據/正式收據內之**受保人**及根據條款和條件對由出發日期及回程日期內所出發和發生的旅程(以下稱為“受保旅程”)之損失作出賠償。

新華旅遊(以下稱為“旅行社”)所簽發的收據/正式收據及印有保單號碼，此表示保險的確立。

收據/正式收據、旅遊保險條文及條款和批註(如有者)將構成完整的保險契約(以下稱為“保單”)。

此保險只適用於常規的假期旅遊及文職商務旅遊，而不適用於探險跋涉或類似旅程。基於此列明的條款和條件，每項保障將以保障權益表內的環球計劃或中國華南及澳門計劃的最高賠償額為上限。任何旅程都可購買環球計劃，14日或以下的中國華南(包括福建省、廣東省、廣西省、湖南省及/或澳門)旅程可購買環球計劃或中國華南及澳門計劃，任選其一。

保障權益表

保障	最高賠償額 (港幣\$)	
	環球計劃	中國華南及澳門計劃
第1項 - 緊急醫療援助		
1a. 緊急醫療運送	不設限額	不設限額
1b. 運返費用	不設限額	不設限額
第2項 - 緊急醫療費用		
2a. 醫療費用	1,000,000	250,000
覆診費用:	1,000,000	250,000
物理治療覆診費用上限:	50,000	50,000
中醫及脊醫治療的覆診費用上限	5,000	5,000
	每日每症\$200	每日每症\$200
	最多\$3,000	最多\$3,000
2b. 緊急啟程	20,000	5,000
第3項 - 人身意外保障		
3a. 乘搭交通工具之意外	1,000,000	500,000
3b. 其他意外	500,000	250,000
17歲以下或 75歲以上	150,000	150,000
第4項 - 行李及個人物品		
每件、每對或每套限額:	10,000	3,000
	2,000	2,000
第5項 - 行李延誤	500	不適用
第6項 - 個人金錢及證件		
6a. 遺失旅遊證件上限	10,000	3,000
6b. 個人金錢上限	10,000	3,000
	1,000	1,000
第7項 - 旅程阻礙保障		
7a. 取消旅程	20,000	5,000
7b. 取消旅程衍生之手續費	不適用	50
7c. 旅程中斷	20,000	5,000
(1) 提早結束旅程 (2) 更改旅程 (3) 強制隔離保障	包括	包括
(4) 接駁交通工具誤點	1,000	500
第8項 - 旅程延誤		
8a. 旅程延誤	2,000	不適用
上限: 首 5 小時之延誤	250	不適用
其後每滿 10 小時之延誤	500	不適用
8b. 取消旅程	1,000	不適用
一保障因出發延誤超過 10 小時而需要取消旅程	1,000	不適用
第9項 - 個人責任	1,000,000	1,000,000
第10項 - 交通實津貼	1,000	500
AIG Travel 國際支援	包括	包括

保障範圍

第1項 - 緊急醫療援助

1a. 緊急醫療運送

若**受保人**在**受保旅程**期間於海外蒙受**損害**或感染**疾病**，於本公司或其授權代表的意見下，認為醫療上適合將**受保人**運送至其他地方接受治療，或運送回**香港**或日常居住地，而本公司或其授權代表亦會根據**受保人**當時的受傷程度或病情，安排最適當之醫療運送方式，本公司則會直接支付該醫療運送所需之有關保障費用。

保障費用是指由本公司或其授權代表因緊急運送**受保人**而提供或安排之醫療運送、服務及設備等費用。所有醫療運送方式及最終目的地均由本公司或其授權代表決定及根據當時醫療情況安排，包括租用空中或陸上救護車、航空運輸、鐵路或其他適合的運送方式。

受保人或其代表必須致電 AIG Travel 國際支援熱線 (852) 3516 8699 作出有關安排。

1b. 運返費用

若**受保人**在**受保旅程**期間因蒙受**損害**或感染**疾病**而死亡，本公司或其授權代表將安排運返**受保人**之遺體返回**香港**或日常居住地。本公司將直接支付有關保障費用。

受保人或其代表必須致電 AIG Travel 國際支援熱線 (852) 3516 8699 作出有關安排。

第2項 - 緊急醫療費用

2a. 醫療費用

在此項目下，若**受保人**於**受保旅程**期間蒙受**損害**或**疾病**而引致在返回香港前治療的醫療費用，本公司將以不超過**保障權益表**所規定之**最高賠償額**賠償**受保人**有關醫療費用，該醫療費用必須是(i) 由首次蒙受該**損害**或**疾病**起 182 日內所引致的，及(ii) **實際、合理及慣常醫療必需費用**。

- 覆診費用

如**受保人**在受保期間已接受因損害或疾病而在海外接受治療並有關費用索償在 2a.醫療費用被本公司接受，於受保人因相同**損害**或**疾病**而需要返回**香港**後覆診，本公司將賠償不超過 HK\$50,000 的覆診費用，但該覆診費用必須是(i) 返回**香港**後 90 日內引致的，及(ii) **實際、合理及慣常醫療必需費用**和符合以下限額:

- 中醫治療最高賠償額為 HK\$3,000，每日每症最高為 HK\$200;
- 脊醫治療最高賠償額為 HK\$3,000，每日每症最高為 HK\$200;
- 物理治療最高賠償額為 HK\$5,000

在任何情況下，第 2a 項「醫療費用」的總賠償額不可超過**保障權益表**所規定**最高賠償額**。

2b. 緊急啟程

若**受保人**在**受保旅程**期間死亡、遭遇**嚴重損害**或**嚴重疾病**，需要一名已成年的**直系親屬**前往或一名**旅遊夥伴**停留該地陪伴及/或照顧**受保人**，本公司將根據**保障權益表**所載**最高賠償額**為限賠償其合理的額外旅遊開支及/或住宿費用。此保障只可在同一**旅程**中索償一次。

廣東及澳門計劃

在任何情況下，第 2 項「緊急醫療費用」的總賠償額不可超過**保障權益表**所規定**最高賠償額**。

適用於第1項 - 緊急醫療援助及第2項 - 緊急醫療費用的不保事項

以下情況不受保障:

- 根據**合格醫生**之意見，在合理的情況下該項手術或治療可延期至返回**香港**後進行。
- 受保人**旅遊之目的為醫治**疾病**或**受保人**違反**合格醫生**之勸告出外旅遊。
- 一切毋須由**受保人**支付及/或已包括於旅遊費用中的支出。

- 未能提供**合格醫生**之醫療報告。
- 在身體狀況許可下，**受保人**拒絕依循**合格醫生**之建議返回**香港**繼續治療，或繼續其**受保旅程**。
- 任何不經由本公司或其授權代表同意及提供服務的費用，除非**受保人**或其**旅遊夥伴**在緊急及不能控制的情況下無法致電 Travel Guard 國際支援熱線，在此情形下，本公司只補償**受保人**在同一情況下本公司或其授權代表會提供的服務而衍生的費用（只適用於第 1a 項「緊急醫療運送」）。
- 未經由本公司或其授權代表允許及安排之遺體運返（只適用於第 1b 項「運返費用」）。
- 在**香港**以外的覆診費用。
- 任何**醫院**內獨立或私人房間、特別或私家看護的額外費用；非醫療用的個人服務，包括收音機、電話及類同的物品；採購或採用特別支架、儀器或裝置的額外費用。
- 任何整容手術、眼睛折射造成的誤差、助聽器及佩戴眼鏡的驗光單，但於**受保旅程**期間因**意外**蒙受**損害**所引致的除外。

第3項 - 人身意外保障

3a. 乘搭交通工具之意外

若**受保人**在**受保旅程**期間，以付款乘客身份（不是機師、操作員或空中服務員）乘搭或上落**公共交通工具**期間發生**意外**，於事故發生當日起計 90 天內在直接及並無其他原因下引致以下之損害事項，本公司將依據保障表及其**保額百分率**賠償予**受保人**。

此部份提供額外保障予**受保人**在乘搭或上落由旅行社安排的交通工具期間發生之**意外**，於事故發生當日起計 90 天內在直接及並無其他原因下引致以下之損害事項，本公司將依據保障表及其**保額百分率**賠償予**受保人**。

3b. 其他意外

若**受保人**在**受保旅程**期間，因遭遇**意外**而蒙受**損害**，而非上述第 3a 項「乘搭交通工具之意外」，於事故發生當日起計 90 天內在直接及並無其他原因下引致以下的損害事項，本公司將依據保障表及其**保額百分率**賠償予**受保人**。

保障表

損害事項		保額百分率
意外死亡及永久傷殘		
1. 死亡		100%
2. 永久完全殘廢		100%
3. 永久及無法痊癒之四肢癱瘓		100%
4. 一眼或雙眼永久完全失明		100%
5. 喪失任何一肢或任何一肢永久完全喪失功能		100%
6. 喪失任何雙肢或任何雙肢永久完全喪失功能		100%
7. 雙耳完全失聰及喪失言語能力		100%
8. 永久完全失聰		75%
(a) 雙耳		15%
(b) 單耳		
三級程度燒傷		
部位	受損佔有關部位總面積之百分比	保額百分率
1. 頭部	達頭部總面積之 8%或以上	100%
	達頭部總面積之 5%至 8%以下	75%
	達頭部總面積之 2%至 5%以下	50%
2. 身體 (頭部以外)	達其餘身體部份總面積之 20%或以上	100%
	達其餘身體部份總面積之 15%至 20%以下	75%
	達其餘身體部份總面積之 10%至 15%以下	50%

賠償:

- 於同一次損害中，本公司只負責賠償以上任何一項之損害事項，若遭受多於一項損害事項，本公司則以**最高賠償額**(即最高保額百分率)的事項及以不超過列於**保障權益表**所載之**最高賠償額**為賠償依據。
- 倘本公司已賠償以上保障表其中一項的損害事項，**受保人**所有的保障會即時終止，但不會影響該**意外**所導致之**損害**賠償事宜。
- 倘**受保人**蒙受**損害**前局部手足或器官已喪失功能，而在**損害**後變成全部殘廢，本公司會決定**保額百分率**作為賠償該**損害**所引致的殘廢部份，而之前已永久喪失功能的部份則不獲賠償。
- 此**保單生效日期**時，**受保人**年齡為17歲以下或75歲以上，本公司會根據第3項「人身意外保障」之保障表的損害事項及其**保額百分率**作出賠償，最高賠償至HK\$150,000。

此部份提供額外保障予**受保人**在以下期間蒙受的**損害**:

- 當**受保人**於原定**公共交通工具**出發前4小時內直接由日常**香港**住所或工作地點前往**香港**入境事務處的期間以開始其**受保旅程**；
- 受**保旅程**完畢，當**受保人**回**香港**後4小時內直接由**香港**入境事務處返回日常住所或工作地點的期間。

暴露 - 倘**受保人**在**受保旅程**期間發生**意外**，及在無法避免的情況下身處於自然環境中(包括但不限於長期及嚴酷的天氣或環境狀況)，並於**意外**發生後12個月內直接因此無法避免的情況下引致死亡或傷殘，本公司將按照保障表賠償予**受保人**。

失蹤處理 - 倘**受保人**在**旅程**中所乘搭之**公共交通工具**發生**意外**而導致失蹤、墮毀或沉沒，**受保人**因而失蹤及於該次**意外**事件發生後連續12個月內仍無法尋回，則本公司有理由相信**受保人**已因該次**意外**死亡，並作出人身意外保障的賠償。但**受保人**的遺產管理若必須先填妥及遞交保證書，同意日後如發現**受保人**並未因該次**意外**導致死亡，將退回此項賠償予本公司。

適用於第3項 - 人身意外保障的不保事項

- 於此第3項保障，本公司不負責一切由**疾病**或**病毒**引致的**損害**。

第4項 - 行李及個人物品

若**受保人**在**受保旅程**期間，屬於其個人之行李、衣服及個人物品有所遺失或損毀(包括穿戴或存放於行李箱內)，本公司以不超過**保障權益表**所規定之**最高賠償額**賠償予**受保人**。若修理費用超越損毀物品之價值時，本公司於處理該賠償申請時，會視該物品已遺失或被竊。賠償額為該物品之實際價值，但以每件、每對或每套的最高 HK\$2,000 為限額。若物品已使用超過一年(由購買日期起計)，本公司有權根據其損耗及折舊程度賠償其重估價值或維修此物品。

適用於第4項 - 行李及個人物品的不保事項

以下情況不受保障：

- 貨物或貨辦、食物、動物、汽車(包括配件)、電單車、單車、船隻、發動機、其他交通工具、傢俱、古董、珠寶首飾或配件、手提電話(包括電子手帳電話及配件)、現金(包括支票/旅遊支票等)、電子貨幣(包括信用卡或八達通等)、證券、票或文件。
- 正常之磨損、消耗、蟲蛀、寄生蟲、固有毛病、或因維修、清潔、更改而導致的損失。
- 租借物品之遺失或損毀；
- 直接或間接因暴動、反叛、革命、內戰、篡權、**恐怖行為**或因政府意圖防止此等動亂所引起的損失；或由任何政府或公共機構基於任何海關或其他條例採取的行動而扣留、破壞、隔離或檢控該財物；或走私財物或非法攜帶或交易的財物。
- 受保於其他保險，或將會獲得**公共交通工具**機構、酒店及其他服務供應商的退款。
- 已獲第三者機構提供維修服務，使操作回復正常的物品。
- 任何**受保人**蓄意以不同交通工具寄運之行李或分開寄運或郵寄的行李、紀念品或其他物品。
- 在公眾場所沒有**受保人**的看管下，或因**受保人**疏忽保管其財物而導致行李及個人物品的遺失。
- 存錄於磁帶、記憶儲存碟、磁碟或其他的資料遺失。
- 易碎物品的破裂或損毀。
- 在酒店或**公共交通工具**機構保管下的損失，除非於3天內以書面通知該酒店或**公共交通工具**機構，如該機構為航空公司，需獲得其財物索賠報告。
- 遺失後24小時內未有向當地警方報案及未能連交當地警方之遺失報告。
- 任何因神秘失蹤而導致之損失。
- 因錯誤、遺漏、兌換率的浮動或貶值而出現的缺額。
- 遞交之索償物件收據上的名字並非**受保人**的名字。
- 基於同一原因於第5項「行李延誤」同時提出的索償。

第5項 - 行李延誤 (只適用於環球計劃)

若**受保人**在**受保旅程**中因所乘搭的**公共交通工具**機構誤送行李以致**受保人**於抵達目的地10小時後仍未取得其行李，本公司將以**保障權益表**上所載賠償**受保人**購買必須用品的實際費用，此保障只可於同一**旅程**中索償一次。

此項保障只適用於環球計劃，廣東及澳門計劃沒有提供此第5項保障。

適用於第5項 - 行李延誤的不保事項

以下情況不受保障：

- 未能獲取**公共交通工具**機構書面證明延誤時間及原因。
- 任何**受保人**蓄意以不同交通工具寄運之行李或分開寄運或郵寄的行李、紀念品或其他物品。
- 基於同一原因於第4項「行李及個人物品」同時提出的索償。

第6項 - 個人金錢及證件

6a. 遺失旅遊證件

若**受保人**在**受保旅程**期間直接因被搶劫、爆竊或偷竊而遺失之旅遊證件及/或旅遊票，本公司將以**保障權益表**所載之最高賠償為上限，賠償**受保人**(i)旅遊證件及/或旅遊票所需補領的費用；及/或(ii)因安排行程而必須衍生的額外合理的**旅遊票**及/或**住宿**費用，而該費用僅作證件補領及**旅程**安排之用。

適用於第6a項 - 遺失旅遊證件的不保事項

以下情況不受保障：

- 遺失後24小時內未有向當地警方報案及未能連交當地警方之遺失報告。
- 與是次**受保旅程**無關之證件及/或簽證及/或旅遊票。
- 任何因神秘失蹤而導致之損失。
- 直接或間接因暴動、反叛、革命、內戰、篡權、**恐怖行為**或因政府意圖防止此等動亂所引起的損失；或由任何政府或公共機構基於任何海關或其他條例採取的行動而扣留、破壞、隔離或檢控該財物；或走私財物(或相關收益)或非法攜帶或交易的財物(或因此行動引致的相關收益)。
- 同時擁有臨時或永久屬相同性質的旅遊證件，此情況下，**受保人**只能選擇索償其中一款。

6b. 個人金錢

若**受保人**在**受保旅程**期間遺失現金、銀行鈔票、旅行支票及匯票，本公司將賠償**受保人**實際所遺失的金額，但以不超過**保障權益表**所載之最高賠償為上限；**受保人**必須於遺失事件發生後24小時內向當地警方報案並於索償時提交書面文件及警方之正本報告。

適用於第6b項 - 個人金錢的不保事項

以下情況不受保障：

- 電子貨幣(包括任何信用卡或八達通等)或證券。
- 遺失後24小時內未有向當地警方報案及未能連交當地警方之遺失報告。
- 錯誤、遺漏、兌換率的浮動或貶值而出現的缺額。
- 沒有立即向旅行支票的簽發銀行當地的分行或代理人報告旅行支票損失事宜。
- 任何因神秘失蹤而導致之損失。
- 直接或間接因暴動、反叛、革命、內戰、篡權、**恐怖行為**或因政府意圖防止此等動亂所引起的損失；或由任何政府或公共機構基於任何海關或其他條例採取的行動而扣留、破壞、隔離或檢疫的現金、銀行鈔票、銀行支票或匯票；或走私現金、銀行鈔票、銀行支票或匯票(或相關收益)或非法攜帶或交易的現金、銀行鈔票、銀行支票或匯票(或因此行動引致的相關收益)。

在任何情況下，第6項「個人金錢及證件」的總賠償額不可超過**保障權益表**所規定**最高賠償額**。

第7項 - 旅程阻礙保障

7a. 取消旅程

若**受保人**於原定**受保旅程**出發前180日內因下列原因(以下(ii)及(iv)除外)而需要取消**受保旅程**，本公司以不超過**保障權益表**內所規定之**最高賠償額**賠償**受保人**無法由其他途徑取回其已支付及法律上須負責支付之旅行費用及/或**住宿**費用：

- 受保人**、其直系親屬、密切商業夥伴或旅遊夥伴死亡、遭受**嚴重損害**或患上**嚴重疾病**；
- 受保人**收到傳票需出庭作證、當陪審員或需被隔離；
- 受保人**於原定**受保旅程**出發前1星期內，突然爆發**公共交通工具**機構員工罷工、暴動或民亂、或目的地廣泛性爆發傳染病；
- 受保人**及/或其**旅遊夥伴**之**香港**主要住所於**受保旅程**出發前1星期內因火災、水淹、地震或類似的天然災害，導致嚴重損毀，需要**受保人**及/或其**旅遊夥伴**於出發當日留於該處。

7b. 取消旅程衍生之手續費 (只適用於華南及澳門計劃)

若香港天文台於旅行團出發時間前三小時內預測將會發出或已發出熱帶氣旋警告信號八號或以上或黑色暴雨警告信號，而旅行社決定取消旅行團，本公司將以不超過**保障權益表**內所規定的**最高賠償額**賠償**受保人**有關之手續費。

此項保障只適用於華南及澳門計劃及只有在保單發出日期及時間前並未發出或預測將會發出任何該等信號才會有效，環球計劃沒有提供此第7b項保障。

若**受保人**已開始其**受保旅程**，此第7a項「取消旅程」及7b項「取消旅程衍生之手續費」保障便不再生效。

7c. 旅程中斷

(1) 提早結束旅程

若**受保人**在**受保旅程**期間，因下列原因必須結束及縮短**受保旅程**返回**香港**，本公司將以不超過**保障權益表**內所規定的**最高賠償額**，賠償**受保人**不能退回之未享用的旅行費用及/或**住宿**費用及/或額外的**旅遊票**及/或**住宿**費用：

- 受保人**或於**香港**居住的密切商業夥伴死亡、蒙受**嚴重損害**或患上**嚴重疾病**或遭遇騎劫；
- 受保人**的直系親屬或旅遊夥伴死亡、蒙受**嚴重損害**或患上**嚴重疾病**；
- 在未能預料情況下，目的地突然爆發**公共交通工具**機構員工罷工、暴動或民亂、天然災害或廣泛性爆發傳染病，以致**受保人**不能繼續原定的**受保旅程**。

(2) 更改旅程

若**受保人**於開始其**受保旅程**後因目的地突然爆發**公共交通工具**機構員工罷工、暴動或民亂、惡劣天氣、天然災害或廣泛性爆發傳染病，本公司將以不超過**保障權益表**內之**最高賠償額**賠償**受保人**因要繼續前往原本包括於**受保旅程**目的地而引致額外合理的**旅遊票**及/或**住宿**費用。

第7c(1)項「提早結束旅程」的保障是根據**受保旅程**中斷後，按比例賠償剩餘旅程日數之未享用的旅費及/或住宿費用。**受保旅程**中第7c(1)項「提早結束旅程」及第7c(2)項「更改旅程」的額外交通及/或住宿實際費用的賠償不可超過**保障權益表**內所載的**最高賠償額**。

(3) 強制隔離保障

在**受保旅程**期間，若**受保人**因被懷疑患上大流行病而被強制隔離，本公司將以不超過**保障權益表**的**最高賠償額**，按比例賠償**受保人**不能退回之未享用的基本團費及/或住宿費用。

第7c(3)項「強制隔離保障」是以**受保旅程**期間**受保人**被隔離日數按比例賠償未享用的基本團費及/或住宿費用。

(4) 接駁交通工具誤點

在**受保旅程**期間，若**受保人**因第7c(2)項「更改旅程」所列的其中一項或以上承保事項而導致前飛機延誤到達中轉站而錯過乘搭原定的接駁的**公共交通工具**，因此無法於**旅程**中按原定時間到達目的地，將賠償為按時到達目的地而使用取替**公共交通工具**所產生的必要及合理費用，但不能超過**保障權益表**所載最高賠償額。

此外，第7c(1)項「提早結束旅程」、第7c(2)項「更改旅程」、第7c(3)項「強制隔離保障」及第7c(4)項「接駁交通工具誤點」的合共賠償額不可超過**保障權益表**第7c項「旅程中斷」所載的**最高賠償額**。第7c項「旅程中斷」的保障亦只有在**受保人**未知如何將會引致**旅程**中斷的事件前購買才會有效。

適用於第7項 - 旅程阻礙保障的不保事項

以下情況不受保障：

- 受保人**於其保險或政府計劃，或將會獲得酒店、**公共交通工具**、旅行社、其他航運機構或酒店的賠償或退款。
- 直接或間接因政府之規例或監管，旅行社、導遊公司或**公共交通工具**機構的破產、結束或違約。
- 在購買此保險前已意識到可能引致取消及/或中斷**旅程**的情況。
- 直接或間接因**受保人**未能盡早通知旅行社、導遊公司、航運機構或旅館因第7a項「取消旅程」其中i至iv項的原因而要取消**旅程**，或因第7c(1)項「提早結束旅程」其中i至iii項的原因而要提早結束**旅程**。
- 基於同一原因於第7c(1)項「提早結束旅程」、第7c(2)項「更改旅程」、第7c(4)項「接駁交通工具誤點」及第8項「旅程延誤」同時提出的索償。
- 受保人**未能提供由政府或其他授權機構所簽發的有關強制隔離書面確認信，內容包括但不限於有關隔離的時期及隔離的原因。

第8項 - 旅程延誤 (只適用於環球計劃)

受保人只可索償下列a)或b)其中一項。

- 若**受保人**於**受保旅程**中，直接因天氣惡劣、天然災害、機械故障、騎劫或所乘之**公共交通工具**機構員工罷工，引致**受保人**所乘搭的**公共交通工具**員工比顯示於由**公共交通工具**機構所提供行程表內的出發或到達時間延誤達5小時，本公司將賠償 HK\$250，其後每滿10小時之延誤，將賠償 HK\$500，但以**保障權益表**所規定之**最高賠償額**為上限。
- 出發或到達延誤是根據由**公共交通工具**機構提供給**受保人**的行程表上列明的原本航班出發或到達時間，直到a)原本**公共交通工具**或b)有關**公共交通工具**機構安排之首班取替的交通工具有實際出發/或到達的時間作出計算。

或在同一**公共交通工具**的延誤下，**受保人**只可選擇索償出發或到達其中一項的延誤。

- 受保人**於辦理登機手續後，原定乘搭之**公共交通工具**直接因天氣惡劣、天然災害、機械故障、騎劫或所乘之**公共交通工具**機構員工罷工引致出發延誤超過10小時，**受保人**如決定取消這次**受保旅程**，本公司將賠償其不能退回之訂金及需負責支付的旅費，但以不超過**保障權益表**上所載之**最高賠償額**為上限。此保障並不包括因**受保人**未能成功辦理登機手續而導致的損失。

此項保障須在有關**公共交通工具**機構或其授權代表公佈有關事件可引致**公共交通工具**延誤前購買才會有效。

此項保障只適用於環球計劃，廣東及澳門計劃沒有提供此第8項保障。

適用於第8項 - 旅程延誤的不保事項

以下情況不受保障：

- 未能獲取**公共交通工具**機構書面證明延誤的時間及原因。
- 於申請投保前已宣布會引致延誤的事件。
- 受保人**遲到機場或碼頭（即在最後登記時間結束後才到達，但因**公共交通工具**機構員工罷工引致的遲到除外）。
- 受保人**最終未有登上有關**公共交通工具**機構所安排之首班取替交通工具。
- 基於同一原因於第7c(2)項「更改旅程」及第7c(4)項「接駁交通工具誤點」同時提出的索償。

第9項 - 個人責任

若**受保人**在**受保旅程**期間遇上下列情況而須負上法律責任賠償予第三者，本公司會以不超過**保障權益表**所規定之**最高賠償額**作出賠償：

- 誤傷第三者身體或引致其死亡；
 - 損壞或遺失第三者之財物。
- 在未取得向本公司書面同意前，**受保人**不可向他人承認過失、提出或允許付出不任何賠償或有關承諾，或牽涉入任何訴訟中。

適用於第9項 - 個人責任的不保事項

以下情況不受保障：

- 所有屬於**受保人**、其直系親屬、僱主或僱員的財產損失。
- 受保人**對其直系親屬、僱主或僱員的責任。
- 屬於**受保人**或由**受保人**看管的財產。
- 在合約項下應擔當的責任。
- 因**受保人**故意、蓄意或非法活動所引起的責任。
- 由於擁有或使用車輛、飛機、輪船、槍械或動物所引起的責任。
- 因貿易、商業或專業有關所引致的責任。
- 任何因非法行為引致的責任。

第10項 - 交通費津貼

若**受保人**在**受保旅程**期間蒙受**損害**或患上**疾病**後於海外前往醫院以尋求治療，本公司會以不超過**保障權益表**所規定之**最高賠償額**作出賠償任何前往醫院以尋求治療及海外出院後結束**旅程**返抵**香港**返回住所之合理及必要的額外陸地交通費用。此項賠償的條件是蒙受的**損害**或患上的**疾病**及/或住院作為有效索償根據第2項「緊急醫療費用」獲承保。

主要不保項目

本公司不會賠償任何保單內直接或間接因以下事項而引致的索償：

- 戰爭**、內戰、敵侵、叛亂、革命、運用軍事力量、篡奪政府或軍權；
- 本保單不會負責已經計劃或實際在、前往或途經古巴、伊朗、敘利亞、蘇丹、北韓、或克里米亞地區的**旅程**直接或間接地所引致的任何損失、損害、受損或法律責任。
- 本保單不會負責古巴、伊朗、敘利亞、蘇丹、北韓、或克里米亞地區居民所蒙受或遭受的任何索償、損失、損害或法律責任。
- 凡本公司提供之**受保條款**、索償賠償或本公司提供之保障會導致本公司、其母公司或其最終控制實體受到任何聯合國決議的制裁、禁止或限制、歐盟或美國的貿易或經濟制裁、法律或規例，本公司不會被當作提供該些保障及本公司不會負責任何該些索償或提供任何有關之保障。
- 受保人**不法的行為，或遭海關或有關當局充公、扣留或破壞；
- 任何政府的法案或禁令(除非政府基於在第7a(ii)項及第7c(3)項所保障的強制隔離)；**受保人**違反政府法案；或在預先警告會爆發**公共交通工具**機構職員罷工、暴動或民變、惡劣天氣、天然災害、或傳染病的情況下，**受保人**沒有作出合理的預防以防止索償的出現；
- 任何**恐怖行為**，但第1項「緊急醫療援助」、第2項「緊急醫療費用」及第3項「人身意外保障」除外；
- 受保人**沒有合理地看管個人財物、避免**損害**或減低索償；
- 以乘客或司機身份參與任何類型之賽事；比賽；職業運動或因參與該運動而可賺取收入或報酬；
- 與服用酒精或藥物有關的損失，但由合格醫生所處方之酒精或藥物除外；
- 妊娠、分娩或與之有關的損傷或**疾病**；
- 自殺、企圖自殺或故意自我傷害；或自我暴露於不必要的危險中；
- 任何**受保前**已存在之狀況；先天性或遺傳病；
- 愛滋病**或因人體免疫不全病毒血清測試呈陽性反應下出現之**損害**或**疾病**；性病；
- 精神病、睡眠、精神或神經失調；
- 受保人**從事或參與海陸空服務或行動；持械工作；以航空公司空勤人員身份乘搭或駕駛飛機；測試交通工具；參與體力勞動性工作；參與離岸活動，如商業潛水、油田鑽探、採礦、空中攝影；爆炸物處理；演員；地盤工人、漁夫、廚師或廚房工人；導遊或領隊；

17. **受保人**旅遊之目的為**醫治疾病**，或**受保人**在身體不適合旅遊的情況下旅遊或**受保人**違反**合格醫生**勸告出外旅遊；
18. 任何持有中華人民共和國護照及以此護照往返中華人民共和國(香港、台灣及澳門除外)之**受保人**，但若**受保人**同時擁有由其他國家政府(不包括中華人民共和國，但**香港**、台灣及**澳門**則除外)所簽發的法定文件證明為該地合法居民，此不保事項則會被撤消；
19. 已從其他方面獲得的賠償，但第3項「人身意外保障」及第8項「旅程延誤」則除外；

定義

「**意外**」是指於受保**旅程**期間遇上不能預料及非自願的事件而引致**損害**。

「**住宿**」是指房租費用。

「**後天免疫力缺乏綜合症**」或「**愛滋病**」是參照世界衛生組織之定義為標準，指人體免疫不全病毒血清測試呈陽性反應下出現機會性感染、惡性腫瘤、人類免疫不全病毒感染性腦病變、人體免疫不全病毒之消瘦症候群或其他病症。

「**子女**」是指於原定出發日期受保人未滿17歲的合法受養人。

「**中醫**」是指任何跌打、針灸或中醫師根據中醫藥條例（香港法例第 549 章）合法註冊成為中醫，但若是若中醫為**受保人**本人或其**直系親屬**則除外。

「**密切商業夥伴**」是指**受保人**的密切商業夥伴，可提供商業登記或公司的註冊文件予本公司作為佐證。

「**公共交通工具**」是指由註冊的航運公司經營以接載付款乘客的巴士、旅遊巴士、的士、渡輪、氣墊船、水翼船、船、火車、電車或地下火車；及由註冊的航空公司或包機公司營運以接載付款乘客的飛機及直升機，來往於商業機場或直升機場之間；及有固定路線及班次的機場巴士。

「**強制隔離**」是指受保人被政府或有關授權機構指令隔離。

「**生效日期**」是指 1)本**保單**的簽發日期或 2)取消旅程保障開始生效之日期，以較遲者為準。

「**香港**」是指香港特別行政區，英文簡稱 HKSAR。

「**醫院**」是指合法經營並為受傷及患病病人提供治療和照顧之醫院（不包括老人院、長期病患中心、靜養、護理、戒酒或戒毒等類似服務之醫療機構），此外，須設有完善的診斷及外科手術設備和 24 小時專業護理及醫療服務。

「**直系親屬**」是指**受保人**的配偶、父母、配偶之父母、祖父母、子女、女婿、媳婦、兄弟姊妹、孫、合法監護人。

「**損害**」是指**受保人**遭遇**意外**事故，在直接及別無其他原因之下引致之身體損害。

「**受保人**」是指**受保人**名字列於保障列表內或批註內之**受保人士**。

「**旅程**」是指該段旅遊期間由**受保人**離開**香港**入境事務處櫃檯開始，直至**受保人**於此段旅遊完結後到達**香港**入境事務處櫃檯為止，或受保日期的到期日，以較早者為準。

「**喪失**」或「**喪失功能**」是指**永久**完全失去功能或手腕或足踝以上之部位完全分離；若套用於眼睛，是指完全及無法恢復的視力。

「**失聰**」是指**永久**及無法恢復之聽力：

如果 a 分貝 — 損失聽力至 500 赫 如果 b 分貝 — 損失聽力至 1,000 赫

如果 c 分貝 — 損失聽力至 2,000 赫 如果 d 分貝 — 損失聽力至 4,000 赫

(a=2b+2c+d) 之 1/6 高於 80 分貝。

「**喪失語言能力**」是指構成語言之口唇音、齒舌音、口蓋音、喉頭音等之四種語言機能中，有三種以上不能發出者，聲帶全部剔除或因腦部言語中樞神經的損傷而患失語症。

「**澳門**」是指澳門特別行政區，英文簡稱 Macau SAR。

「**惡性腫瘤**」是指在後天免疫力缺乏存在下出現包括但不限於卡波西氏腫瘤、中樞神經系統淋巴瘤或其他已知或未知之惡性病變，直接導致死亡、疾病或殘廢。

「**最高賠償額**」是指列於本**保單**的**保障權益表**內每項受保保障的賠償額。

「**醫療必需費用**」是指**受保人**所須支付予**合格醫生**、醫生、外科醫生、護士、**醫院**及/或救傷車服務的費用，包括醫藥、手術、X 光檢查、**醫院**或護理治療包括醫療用品及租用救傷車的費用，但不包括牙科護理（除非因**意外**而**損害**健全及天然之牙齒所必須之診治費用）。亦不包括本**保單**內第 1a 項「緊急醫療運送」及第 1b 項「運送費用」兩項保障利益所需的任何費用。本**保單**僅負責賠償經由**合格醫生**所處方或治療的費用。倘**受保人**可從其他來源取回全部或部份費用，本公司則根據**保單**條款負責賠償剩餘的費用。

「**機會性感染**」包括但不限於肺囊原蟲肺炎、慢性腸炎之生物體、過濾性病毒或散佈性的真菌感染。

「**大流行病**」指有關流感流行病衝擊規模遍及世界各地，並導致大部份人類感染，有關程度被世界衛生組織宣佈為大流行警戒級別 5 級或以上。

「**保額百分率**」是指保單第 3 項「人身意外保障」中之保障表中的投保百分率，用以計算保障之最高賠償。

「**受保日期**」是於指附於此保單收據正式收據所列明的出發日期和回程日期期間。

「**永久**」是指由**意外**事故發生之日起計**損害**情況持續至少 12 個月，並於此段時間終結時沒有好轉之跡象。

「**永久完全殘廢**」是指由**意外**事故發生之日起計至少 90 天，**受保人**因蒙受**損害**而永久及完全不能從事任何業務或有薪酬的工作；若**受保人**沒有從事任何工作，則指完全不能進行一般日常生活活動。

「**受保前已存在之狀況**」指在保單**生效日期**前，**受保人**、**直系親屬**、**密切商業夥伴**或**旅遊夥伴**的任何疾病、病症、受傷或醫療狀況；

(1)需要**合格醫生**的研究、治療、藥物治療或醫療意見；或

(2) 以上所提及的人士 已知悉或應合理地已知悉所出現的病徵或徵兆及一位合理人士將因此病徵或徵兆而到**合格醫生**診症或治療。

「**主要住所**」是指**受保人**永久居住及只用作為私人寓所的主要房子或樓宇。

「**保額**」是指最高賠償額。

「**合格醫生**」是指得到當地政府承認並准許在其管轄範圍內提供醫療服務之人士，但不包括**受保人**本人或其**直系親屬**。

「**保障權益表**」是指在旅遊保險條文及條款中所名為的「保障權益表」，本公司有權隨時對其作出更改。「**嚴重損害或嚴重疾病**」若套用於**受保人**或**旅遊夥伴**，是指**受保人**或**旅遊夥伴**需要**合格醫生**診治，及證明會有生命危險及不適合旅行或繼續原定受保之**旅程**；若套用於**受保人**的**直系親屬**或**密切商業夥伴**，是指其**直系親屬**或**密切商業夥伴**需要治療及經**合格醫生**證明他們會有生命危險，以致**受保人**需要停止或取消原定受保之**旅程**。

「**疾病**」是指於受保**旅程**期間在直接及別無其他原因之下所開始罹患或感染之病症。

「**配偶**」是指**受保人**結婚或與其保持民事伴侶關係的人。就此而言，婚姻或民事伴侶關係是指兩人之間作出的正式而有法律約束力的結合，而該結合獲兩人所結合之地區的法律承認為婚姻或民事伴侶關係。

「**病徵**」是指個別人士於失調或**疾病**前經歷的症候及跡象。

「**恐怖行為**」是指所有確實發生或恐嚇使用武力或暴力手段造成損毀、傷害或混亂的行為，或此等行為對個人、財物或政府造成人命傷亡或財物損失，以達至經濟、部落、民族、種族或宗教上的利益，無論有否陳述其追求之目的。若盜竊或其他罪行主要是基於犯案者的個人利益出發，純粹只是犯罪者及犧牲者的關係，則不被視為恐怖行為。恐怖行為是必定要得到（有關）政府証實及承認才算是恐怖主義的行為。

「**三級程度燒傷**」是指全部皮膚層因燃燒而完全遭到破壞。

「**旅行社**」是指與本公司註冊登記作為其授權保險代理之旅行社。

「**旅遊夥伴**」是指在整個受保**旅程**中與**受保人**同行的人士。

「**旅遊票**」是指用以乘坐任何**公共交通工具**的經濟各位票。

「**實際、合理及慣常**」是指(1)在**合格醫生**之照顧、監管或指示下為**受保人**提供必須的治療、醫療設施及服務的收費；(2)不超過同一地區內接受類似治療、醫療設施及服務費用之正常水平的收費；及(3)不但在沒有保險的情況下便不會收取之費用。

「**戰爭**」是指戰爭（不論有否宣戰），或任何類似戰爭的行為，包括任何國家利用軍事力量達到經濟、地理、民族、政治、種族、宗教或其他目的。

一般條件

- 在此保險生效時，**受保人**身體狀況必須適合旅遊及未意識到任何可引致取消或擾亂受保**旅程**的狀況，否則會喪失索償的權利。
- 若此**保單**已經簽發，所有保費均不能退還。
- 此保險不能續保，若**受保人**於受保**旅程**期間在不能控制的情況下，原列在保障列表內的受保日期需要延長，在合理及必需的情況下，本公司會免費延長**保單**的受保日期至最高 10 日，以便**受保人**可以完成受保**旅程**。
- 如超過一個**旅程**在受保日期內開始，只有最早開始的**旅程**才是受保**旅程**。
- 若**受保人**之啟程地點不在**香港**，**保單**內所有提及「**香港**」的字詞(貨幣除外)將更改為「出境國

家」，但**受保人**的行程中必須包括**香港**或有關旅遊行程必需於**香港**安排及付款。

6. 若**受保人**為同一旅程購買多於一份由本公司承保的自購綜合旅遊保險，本公司只會根據可獲較高賠償額的一份保單作出賠償。

7. 此**保單**只適用於常規的假期旅遊及文職商務旅遊，而不適用於探險跋涉或類似旅程。

8. 如購買環球計劃，此保單將提供保障權益表中以「環球計劃」為標題的保障項目，環球計劃每次受保**旅程**的保障期最長為 182 日。

9. 如購買中國華南及澳門計劃，此保單將提供保障權益表中以「中國華南及澳門計劃」為標題的保障項目，中國華南及澳門計劃每次受保**旅程**的保障期最長為 14 日。

10. 如**受保人**蓄意隱瞞或提供錯誤的重要資料，此**保單**將在**生效日期**起便失效。

11. 若**受保人**於**生效日期**時年齡為 75 歲或以上，最高賠償額為列於**保障權益表**內的百分之五十，而第 3 項「人身意外保障」最高賠償為 HK150,000 及根據保障表保額百分率作出賠償。

基本條款

1. 完整的保險契約

收據/正式收據、旅遊保險條文及條款和批註(如有者)將構成完整的保險契約。**受保人**未有在投保書上作出的任何陳述，除欺詐外，均不得作為廢除本契約或利用於合法的訴訟程序。任何營業員均無權更改或刪除本保險的任何條款，任何保險的更改需由本公司簽署同意並簽發批註後，方為有效。

2. 年齡限制

無年齡限制。

3. 申請賠償通知的期限

任何賠償申請需於事故發生後 30 日內以書面通知本公司，倘若**受保人**因**意外**引致死亡，應立即以書面通知本公司。

4. 損害證明文件

本公司於接獲該書面通知後，會將申請賠償表格送交索償人，以作填寫損害證明之用。倘索償人於書面通知書發出後 15 日內仍未收到該申請賠償表格，索償人可將事故的發生、性質與損害程度於本**保單**內損害證明文件遞交之期限前提交本公司，本公司會將此書面證明視作已符合本**保單**條款之要求。本公司所需之任何證明文件，須依據本公司所定之形式及性質提交，而所需費用概由**受保人**或其合法代理人負責。

5. 證明文件遞送之期限

倘**受保人**要申請傷殘賠償，**受保人**需於發生損害後 60 日內將損害證明文件遞送本公司；若**受保人**在合理情況下未能於此限期內遞交證明文件，則須於合理時間內及事發日後 1 年內呈交。

6. 充足的通知期

申請賠償通知書可由**受保人**或其代表人送交本公司，並提供足夠資料以證明**受保人**之身份。倘有合理之緣由不能於本**保單**之限期內將通知書送交本公司，而已盡可能將通知書於限期後即送出，則不會被認為放棄申請賠償權利。

7. 賠償金支付時間

當本公司接獲所需的證明文件後，將根據本**保單**立即作出合理賠償。

8. 賠償金之支付

倘**受保人**死亡，賠償金將賠償予**受保人**的遺產承繼人，其他賠償則賠償予**受保人**本人，而緊急醫療運送及運送費用之賠償則根據本**保單**的條款直接支付有關之服務提供機構。

9. 欺騙索償

倘若**保單****受保人**或其代表人在本**保單**的索償中存有任何欺詐成份，所有賠償均會作廢。

10. 追討權利

若本公司及/或其授權代表支付了不包括在此**保單**保障範圍內的索償，或超過此保險的賠償限額時，本公司會保留追討**受保人**之權利。

11. 第三者權利

除**受保人**及本公司以外，此保單未有賦予其它人士享有按《合約（第三者權利）條例》或以其它方式直接強制執行此保單條款的權益。惟特此說明及同意只有本公司及於收據/正式收據上列明的**受保人**方可享有在無須給予其它人士通知或無須獲其它人士同意的情況下，可藉協議修改本保單或取消終止此保單（如此保單載有此權利）的權利。

12. 身體檢查

於處理本**保單**的賠償申請時，本公司有權隨時要求**受保人**作身體檢查。倘**受保人**死亡，除法律不允許外，本公司有權要求解剖驗屍，而費用則由本公司負擔。**受保人**於遭遇**損害**發生或感染**疾病**後需聽從**合格醫生**的醫療建議，若**受保人**沒有依從正確的療法，本公司不會負上任何賠償責任。

13. 債權人之取代

若本公司已向**受保人**作出本**保單**的賠償，便可取代其爭取賠償的權利，向有關人士或機構追討，而**受保人**必須簽署及遞交法律文件和身份證件，或利用任何方法去保證此項的權利，對於損失此權利後，**受保人**不可採取任何行動。

14. 法律訴訟

依據本**保單**所規定之條款及期限內，將損害證明文件送交本公司後，60 日內不得進行法律訴訟以求賠償。倘須訴訟應於本**保單**規定之損害證明文件送交本公司限期後 3 年內進行，否則不得再進行訴訟。

15. 國家之法律限制

倘本保險有關呈交**損害**通知書或證明文件之期限少於**香港**法例所允許之期限，則將依法例延長至所容許之最低限度的期限。

16. 保單條款之遵從

倘**受保人**有違反本**保單**內所載的任何條文，所有賠償申請均不會被接納。

17. 保單詮釋

本**保單**受**香港**法例之約束。本**保單**所涉及之人士均同意服從香港特別行政區法庭之裁決。

18. 轉讓

本**保單**的轉讓權益不會對本公司構成法律的約束力，除非此轉讓權益的正本或副本已保存於美亞保險香港有限公司位於香港港島東華蘭路 18 號港島東中心 46 樓的辦事處，及獲得本公司的確認。此外本公司不會對轉讓的有效性承擔責任。任何的意章、條款或法規均不可以阻礙本**保單**的索償，除非有關條款已詳細列於本**保單**內。

19. 私隱條例

受保人 / 保單持有人 / 申請人謹此同意及確認：

- 美亞保險可按列於其私隱政策的用途使用於處理此保單申請或管理此保單所收集之個人資料，其用途包括核保及管理已申請的保單(包括獲取再保險、核保續保之保單、資料配對、處理索賠、調查、付款及行使代位權)；
- 美亞保險可使用**受保人** / 保單持有人 / 申請人的聯絡資料（姓名、地址、電話號碼及電郵地址）聯絡**受保人** / 保單持有人 / 申請人有關其它由 AIG 集團提供之保險產品(如美亞保險已獲**受保人** / 保單持有人 / 申請人同意可如此使用其聯絡資料)；
- 美亞保險亦可向以下類別的人士（不論在香港或海外）轉交該些個人資料，作上述列明之用途：
 - 提供有關本人/吾等保單管理服務的第三者（包括再保險公司）(如上(a)項所述)；
 - 財務機構，作處理此申請及收取保費(如上(a) 項所述)；
 - 公證人、調查員、第三者管理人、緊急支援服務提供者、法律服務提供者、零售商、醫療提供者、及交通工具機構，以處理索償事宜(如上(a) 項所述)；
 - AIG 集團授權的市場推廣公司，以作直銷之用(如上 (b) 項所述)；
 - 其它在任何國家之 AIG 集團之成員公司，作上述 (a) 及(b) 項所有列明之用途；或
 - 其它於美亞保險私隱政策所列明的人士，作於私隱政策列明之用途。
- 受保人** / 保單持有人 / 申請人可隨時致函到美亞保險香港有限公司之私隱事務主任(地址:香港郵政總局信箱 456 號或電郵:cs.hk@aig.com) 查閱、或要求修改其個人資料（美亞保險可查閱及修改要求收取合理費用），或更改有關其個人資料被使用作直銷用途的選擇。如對美亞保險提供的服務有任何意見，可按上述地址聯絡美亞保險。美亞保險私隱政策的全文載於 www.aig.com.hk。

20. 筆誤

本公司的筆誤不會令生效的**保單**因而失效，或令失效的**保單**因而生效。

此旅遊保險條文及條款的版權為美亞保險香港有限公司所有。未經美亞保險香港有限公司同意不得複製全部或部分旅遊保險條文及條款之內容。

（此中文譯本乃供參考之用，如中文譯本與英文有異，一概以英文為準）

The following "Important Matters" is for reference only and does not form a part of the Policy.
以下之“重要事項”只供參考及不會構成保單之一部份。

IMPORTANT MATTERS

I. Medical Security Service

In the event of a serious Injury or Sickness which requires hospital confinement in overseas, the Company or its authorized representative will arrange payment to the hospital. You just contact AIG Travel Assistance Hotline which helps those in need of medical care to get to the most appropriate medical facilities available.

II. Emergency Medical Evacuation & Repatriation Please contact AIG Travel Assistance Hotline for arrangements.

III. Travel Insurance Claims Procedures

To ensure prompt processing of your claim, it is important that you submit a completed claim form with (1) the original or copy of your Policy, (2) proof of departure and arrival dates e.g. travel document, air ticket or train ticket copy, (3) together with all supporting documentation (please refer the following items). You should always retain copies for your records.

Medical Expenses

A full physician's report stipulating the diagnosis of the condition treated and the date the disability commenced in the physician's opinion and the physician's summary of the course of treatment including medicines prescribed and services rendered together with all original bills, receipts and tickets.

Personal Accident

Hospital and Physicians Reports giving details of the nature of the loss, police report where relevant and if death shall have resulted, a copy of the death certificate and the relevant coroner's report

Journey Cancellation & Interruption

All related documents such as medical reports and receipts of all forfeited and additional accommodation and tickets should be submitted with your claim.

Delay Coverage

A proof of such loss must be obtained in writing from the common carrier management.

Personal Effects

(1) while the baggage or personal effect is/are in the hotel or a common carrier and proof of such loss must be obtained in writing from the hotel management or the common carrier management and such proof must be provided to the Company;

(2) as the result of loss of the baggage or personal effects, personal money, travel document, such loss must be reported to the police having jurisdiction at the place of the loss within twenty-four (24) hours from the incident. Any claim must be accompanied by written documentation from such police.

Personal Liability

Please immediately contact AIG Travel Assistance Hotline for legal advice. Please note: any offer or promise of payment or admit of fault to any other party, or any involvement in any litigation must not be undertaken without the Company's written approval. The Company has the right to commence or take-over any legal proceedings to defend the Insured Person provided the Company choose to do so and to take any action to recover any payment made under this Policy. The Insured Person must co-operate with the Company to this end and do nothing to prejudice their rights.

Address 地址: 7/F, One Island East, 18 Westlands Road, Island East, Hong Kong

香港港島東華蘭路 18 號港島東中心 7 樓

Enquiry Hotline 查詢熱線: (852) 3666 7022

Claims Hotline 索償熱線: (852) 3666 7090

重要事項

I. 一般住院保證服務

如受保人在旅遊期間需要入住醫院，本公司或其授權代表可提供協助受保人支付醫療費用予有關醫院。受保人只須在入院前致電 AIG Travel 國際支援熱線安排此項服務。

II. 緊急醫療運送及運返保障

受保人須致電 AIG Travel 國際支援熱線，以安排一切交通及醫療所需。

III. 旅遊保障計劃申請賠償手續

如需要申請賠償，請填妥賠償表格連同(1)保單正本或副本，(2)出入境證明如旅遊證件副本，飛機票，車票等及(3)有關所需文件(請參考下列所需文件)送交本公司，請自留影印本備查。

醫療費用

如申請醫療費用賠償，受保人須附上醫生填寫之報告列明病名 / 受傷情況，病發原因 / 受傷原因 及日期，處方藥物詳情及其他有關證明文件正本。

人身意外保障

一切醫院收據和醫生報告並需列明受傷之性質及傷殘程度等。如遭遇死亡，必須附上死亡證之副本及驗屍官之報告。

旅程阻礙保障

受保人需附上一切有關文件如醫生證明及向旅行社索取文件證明已退回之定金，額外住宿費收據等。

延誤保障

如申請此項賠償，受保人須向有關運載公司取得報告，其報告需列明事發日期，原因及延誤的時間。

個人財物保障

(1) 如在酒店或運載公司內，引致行李損毀及遺失，受保人應向酒店或運載公司管理人員報告行李損毀及遺失，並取得管理人員填寫之報告包括事發日期及經過。受保人應連同損失物品的付款收據，有關證明一併送回本公司。

(2) 如行李金錢/旅遊證件遺失或被盜竊，受保人須於 24 小時內向當地警局報告，並取有關報告。

個人責任

請立即致電 AIG Travel 國際支援熱線查詢有關法律責任問題。請注意：如未經本公司的同意，受保人不可向第三者作出任何法律責任的承諾，或同意賠償。在法律上本公司擁有為受保人辯護的權利，而受保人必須與本公司合作，不可作任何行動以阻止本公司在這方面的權益。

AIG Travel Services **AIG Travel 國際支援服務** **(852) 3516 8699**

For Emergency assistance, please call our AIG Travel Assistance Hotline.
在旅程中，如有任何緊急事故，請致電AIGTravel 國際支援熱線。

- Evacuation and Repatriation Service 醫療運送及運返
- Referral of Legal Service 法律轉介服務
- Pre-Trip Assistance Service 出發前所需的諮詢
- Medical Assistance Service 醫療服務諮詢
- Baggage Service 行李服務
- Emergency Ticket Service 緊急訂票服務