Policy coverage attaching to and forming part of Policy of Insurance

Welcome to your AXA General Insurance Hong Kong Limited SmartTraveller Insurance Policy.

Your Policy consists of:
- the proposal form (if any)
- the Policy Schedule/Certificate of Insurance
- any special terms that may apply to your Policy

Following payment of the premium stated in the Policy Schedule/Certificate of Insurance We will, in the event of Accident, Injury or loss happening during the period of insurance, provide insurance as described in the following pages for those Sections you have chosen. Please read this jacket together with your Policy Schedule/Certificate of Insurance to make sure you know what cover is provided.

Definitions

Certain words in the Policy have specific meanings. These words have the same meaning wherever they are used in the Policy or the Policy Schedule/Certificate of Insurance or subsequently endorsed hereon. These are given below or defined at the beginning of the appropriate Section.

**Accident** – means a sudden unforeseen and fortuitous event.
**Child/Children** – means dependent and unmarried child/children who are aged between 30 days and under 18 years old on the commencement date of this Policy as named in the Policy Schedule/Certificate of Insurance.
**Close Business Partner** – means a business companion who travels with the Insured Person for the same business purpose, and whose presence is necessary for the Insured Person’s business.
**Compulsory Quarantine** – means the Insured Person is being confined in an isolated ward of a Hospital or an isolated site appointed by the government for at least 24 hours and continuously stays in there until discharged from the quarantine.
**Family** – means Insured Person, his/her spouse and Children (irrespective of the number) travelling with the Insured Person and/or his/her spouse for the entire period.
**Hospital** – means the Hong Kong Special Administrative Region.
**Hospital or an isolated site appointed by the government for at least 24 hours and continuously**

**Immediate Family Member** – means the Insured Person’s spouse, parent, parent-in-law, grandparent, grandparent-in-law, son, daughter, brother, sister, grandchild or legal guardian.
**Infectious Disease** – means any kinds of Infectious Disease which are publicly announced and require quarantine by the government.
**Injury** – means bodily injury sustained by an Insured Person and caused solely and directly by an Accident and does not include any illness or naturally occurring medical conditions or degenerative process.
**Insured/Policyholder** – means individual or business entity/company who owns the insurance Policy.
**Journey** – means travel originating from Hong Kong and ceasing when the Insured Person returning and re-entering into Hong Kong.
**Loss of Hearing** – means Permanent irrecoverable Loss of Hearing rendering the Insured Person absolutely deaf in both ears irremediable by surgical or other means of treatment.
**Loss of Limb** – means the total and irrecoverable Loss of an entire hand, arm, foot or leg.
**Loss of Speech** – means the disability in articulating any three of the four sounds which contribute to the speech such as the Labial sounds, the Alveololabial sounds, the Palatal sounds and the Velar sounds or total loss of vocal cord or damage of speech centre in the brain resulting in Aphasia rendering the Insured Person absolutely Loss of Speech beyond remedy by surgical or other treatment.
**Loss of Use** – means total functional disablement and is treated like the total loss of said Limb or organ.
**Member Insured/Insured Person** – means the Insured Person(s) named in Policy Schedule/Certificate of Insurance. In the case where the Insured is a business entity/company, they are to be interpreted as “Insured Employee(s)” so long as they are named in the Policy Schedule/Certificate of Insurance.
**Permanent** – means lasting 12 consecutive months from the date of Accident and in the expiry of that period being beyond hope of improvement.
**Permanent Total Disablement** – means when as the result of Injury and commencing within 12 consecutive months from the date of Accident the Insured Person is totally and permanently disabled and prevented from engaging in or attending any business or occupation. If the Insured Person is employed or occupied at the time of Accident, Permanent Total Disablement means the inability to perform to all of the daily activities in his/her daily life. Provided such disability has continued for a period of 12 consecutive months and certified by a Qualified and Licensed/Registered Medical Practitioner to be total, continuous and Permanent for the remainder of the Insured Person’s life.

Public Common Carrier – means any mechanically propelled conveyance operated by a company or an individual licensed to carry passengers for hire which include:airplane, bus, coach, ferry, hovercraft, hydrofoil, ship, train, tram or underground train only.

**Qualified and Licensed/Registered Medical Practitioner** – means a medical practitioner qualified by a medical degree and duly licensed or registered to practice medicine and who, in rendering such treatment (surgery or medical procedures for the sole purpose of cure or relief of Injury), is practising within the scope of his or her licensing and training in the geographical area of practice.

**Travel Companion** – means the person who committed or arranged the travel booking or reservation together with the Insured Person and accompanied the Insured Person for the whole Journey and is also insured with Us under the same Journey other than the tour guide or the tour member.

We, Us or Our – means AXA General Insurance Hong Kong Limited.

Geographical Limits

Cover is provided on worldwide basis. This Policy is only valid for travel originating from Hong Kong, unless specify otherwise under the Policy Schedule/Certificate of Insurance.

Operation of Insurance

(1) For all Sections (except for Section 6 – Personal Money and Travel Documents and Section 9 – Loss of Deposit or Cancellation of Trip stated as below), Journey refers to the period of insurance shown in the Policy Schedule/Certificate of Insurance. It commences when the Insured Person leaves his/her place of residence or business in Hong Kong (whichever is the earlier) to commence the Journey until the time of return to his/her place of residence or business in Hong Kong (whichever is the later) on completion of the Journey. In any event, unless specified otherwise, cover does not commence more than 24 hours prior to booked departure time and shall cease (i) upon the expiry of the period of insurance as specified in the Policy Schedule or (ii) 24 hours after booked return time to Hong Kong, or arrival at final destination, whichever is the earlier.

(2) For Section 6 – Personal Money and Travel Documents, Journey commences (i) at the time when the Policy Schedule/Certificate of Insurance is issued or (ii) 24 hours before the period of insurance shown in the Policy Schedule/Certificate of Insurance, whichever is the later.

(3) For Section 9 – Loss of Deposit or Cancellation of Trip, Journey is effective immediately the Policy Schedule/Certificate of Insurance is issued.

(4) For Single Journey, cover is provided up to a maximum of 184 days.

(5) For Annual Cover, cover is provided up to a maximum of 90 days with policy limits applied to each Journey, irrespective of the number of Journeys that are made within the policy period.

Memorandum for One Way Cover (applicable to Single Journey Only)

For Insured Person not returning to Hong Kong, cover terminates no later than 7 days from scheduled time of arrival at the country of final destination or expiry of the original declared period of insurance whichever is the earlier.

Memorandum for Automatic 10 Days Extension (applicable to Single Journey Only)

This Insurance will be automatically extended for a maximum period of 10 days without additional premium charged for such extension in the event that the Insured Person is unavoidably delayed in the course of the scheduled itinerary which was stipulated prior to departure.

Memorandum for Insured Person Aged below 18

For any Insured Person aged below 18 and paying the full adult premium, the maximum limit per Insured Person under Section 1 will be increased to 100% of item (a) of the selected plan; and the accidental death benefit under Section 3 will be limited to 50% of the selected plan, and not as originally stipulated in Previsions (i) under Section 3.
Section 1 – Medical and Related Expenses

Maximum Limit per Insured Person

(a) Insured Person aged up to 70 $400,000 $500,000
(b) Insured Person aged over 70 $500,000 $250,000
(c) Insured Child $250,000 $125,000

We will pay:

(1) the incurred medical, hospital and treatment expenses including the cost of dental treatment (as a result of Accident only), necessarily incurred outside Hong Kong, within 12 consecutive months as from the date of incident giving rise to the claim as a direct result of accidental bodily injury sustained or sickness contracted by the Insured Person during the Journey.

(N.B. Chinese bone-setting, acupuncture, physiotherapy or chiropractic treatment are subject to an aggregate limit of $3,000 and a per visit per day limit of $300)

(2) the incurred reasonable additional accommodation and travelling expenses (confined to economy class) incurred for a relative or friend required on medical advice to travel to or remain with the Insured Person as a result of the Insured Person’s hospitalization.

Limit per day $500 $500

(3) the incurred reasonable additional accommodation and travelling expenses (confined to economy class) incurred to return dependent Children of the Insured Person who are on the same Journey as Insured Person back to the Insured Person’s place of residence in Hong Kong who are left unattended as a result of the Insured Person’s hospitalization.

Sub-limit per Insured Person $40,000 $20,000

(4) the incurred guarantee of Hospital admittance deposit in the event of accidental bodily injury sustained or sickness contracted by the Insured Person during the Journey and the Insured Person is admitted into a Hospital.

Sub-limit per Insured Person $40,000 $40,000

(5) the reasonable costs incurred by the Insured Person in engaging the services of a local translator/interpreter in any Hospital where the Insured Person is confined due to accidental bodily injury or sickness, which occurred or was contracted abroad during the Journey, subject to the period of confinement exceeding 24 hours.

Sub-limit per Insured Person $5,000 $3,000

(6) the reasonable additional accommodation and travelling expenses necessarily incurred by the Insured Person in reverting to his/her original travel schedule/itinerary and/or rejoining his/her original travel Companions following an interruption or disruption of that schedule/itinerary caused by accidental bodily injury or sickness, which occurred or was contracted abroad during the Journey.

Sub-limit per Insured Person $5,000 $3,000

(7) the necessary medical, Hospital and treatment expenses (including the cost of dental treatment as a Result of Accident only), a private ambulance or professional home-nursing fees reasonably incurred by the Insured Person in Hong Kong within 3 consecutive months after the Insured Person’s return from abroad and such expenses having resulted from accidental bodily injury or sickness which occurred or was contracted abroad during the Journey and which necessitated medical consultation abroad.

Sub-limit per Insured Person due to accidental bodily injury $500 $300

Sub-limit per Insured Person due to sickness 10% of maximum limit of Section 1

(N.B. Chinese bone-setting, acupuncture, physiotherapy or chiropractic treatment are subject to an aggregate limit of $3,000 and a per visit per day limit of $300)

We will also pay:

(8) a daily hospital cash benefit to any Insured Person who is admitted to Hospital outside Hong Kong for more than 24 hours as a result of an accidental bodily injury or sickness which occurred or was contracted during the Journey. This benefit is also payable to any Insured Person who, upon return to Hong Kong, is admitted to Hospital in Hong Kong for more than 24 hours as a follow-up treatment.

Sub-limit per Insured Person $5,000 $3,000

(9) a daily Compulsory Quarantine cash benefit to any Insured Person in the event such Insured Person is being quarantined compulsorily due to contraction of Infectious Disease or suspicion of being contracted of Infectious Disease outside Hong Kong during the Journey or within 7 days upon termination of the Journey and returning to Hong Kong. This benefit can only be utilized once during any one Journey.

PROVISIONS

(i) The Compulsory Quarantine must be executed by local authorized health department or any regulatory authority. Voluntary quarantine and/or home quarantine shall be excluded.

(ii) We will pay the daily benefit on each full 24 hours of Compulsory Quarantine.

(iii) This benefit is only payable when the Infectious Disease has been rated at phase 5 or above under the Epidemic and Pandemic Alert and Response by the World Health Organization on or before the first day of Compulsory Quarantine of the Insured Person during the Journey, as declared by the Hong Kong Government, and is covered by the Government’s Preparedness Plan for Influenza Pandemic to the highest level – Emergency Response Level on or before the first day of Compulsory Quarantine of the Insured Person in Hong Kong.

(iv) No benefit shall be payable if the planned destination(s) has been declared as an infected area on or before the departure date of the Journey.

AXA Assistance (IPA) Worldwide Alarm Centre
安盛全球緊急援助中心

Hong Kong 香港
Singapore 新加坡
Australia 澳洲
U.S.A. 美國
United Kingdom 英國

852 2861 9285
800 8523 636
1800 467 856
1 866 654 4270
0800 051 7229

Section 2 – Worldwide Emergency Assistance Service

The services described in this Section must be necessitated by a medical emergency and coordinated by an assistance company appointed by Us (the “Assistance Company”).

(1) Emergency Assistance Hotline Services

A 24-hour emergency assistance hotline service is operated for the benefit of Insured Person so that, in the event of an emergency medical problem or situation covered herein, help and advice will be given.

(2) Emergency Medical Evacuation

If the local medical services are inadequate or not available and the medical condition warrants emergency evacuation to another place, the Assistance Company will arrange and We will pay the incurred cost for:

(i) emergency transport include air ambulance to the nearest and most appropriate Hospital or medical center available to the nature of the Insured Person’s accidental bodily injury or sickness suffered; and

(ii) medical attendants to accompany the Insured Person enroute on the advice and/or direction of the attending Qualified and Licensed/Registered Medical Practitioner.

(3) Repatriation/Repatriation of Mortal Remains

We will pay for services arranged by the Assistance Company in respect of:

(i) extra costs for economy airfare incurred for a Qualified and Licensed/Registered Medical Practitioner to accompany the Insured Person on the written advice of a Qualified and Licensed/Registered Medical Practitioner.

(ii) extra costs for economy airfare incurred for a Qualified and Licensed/Registered Medical Practitioner to accompany the Insured Person on the written advice of a Qualified and Licensed/Registered Medical Practitioner.

(ii) extra costs for economy airfare incurred for a Qualified and Licensed/Registered Medical Practitioner to accompany the Insured Person on the written advice of a Qualified and Licensed/Registered Medical Practitioner.

(ii) medical treatment or consultation (other than Chinese bone-setter, acupuncturist, physiotherapy or chiropractic), not received from local Qualified and Licensed/Registered Medical Practitioner.

Any treatment provided by Chinese bone-setter, acupuncturist, physiotherapy or chiropractic who is the Insured Person himself/herself or a relative of the Insured Person or Insured Person’s Immediate Family Members.

Section 3 – Personal Accident

We will pay the following benefit per Insured Person in the event of accidental bodily injury being sustained by an Insured Person during the Journey.

COMPENSATION TABLE

Maximum Benefit per Insured Person $1,000,000 $500,000

EXCLUDING

In addition to the Policy exclusions in Section 1, the following also applies:

1 Emergency Medical Evacuation or Repatriation/Repatriation of Mortal Remains or costs not accepted and arranged by the Assistance Company or its authorized representative even if We reserve the right to waive this exclusion at Our sole discretion and decision.

2 The cost of burial in Hong Kong.

2 The cost of burial in Hong Kong.

852 2861 9285
Accidental death shall not in any way be presumed by reason of the disappearance of the (c) Credit Card Protection.

We will not pay for extension (c) if the Insured Person is entitled to this benefit under any (vi) We will pay the Insured Person’s beneficiary in the event of the death of the Insured Person.

If as a result of an Accident the Insured Person sustains an Injury and is discovered that the Insured Person is found to be living and had not suffered Accident death.

Compensation shall not be payable for more than one of the above Events in respect of the same accidental bodily Injury. Should more than one of the Events occur from the same accidental bodily Injury. We shall only be liable for the greatest Compensation.

EVENTS

COMPENSATION

EXTENSIONS

It is extended to cover

(a) Third Degree Burn

(b) Under benefits (3) to (10), except on proof to Us that the disablement has continued for 12 months from the date of Injury and in all probability, will continue for the 12 months.

(c) Credit Card Protection

We will pay for any outstanding balance payable on the credit cards of the deceased Insured Person for items and sundries charged to his/her credit cards as at the date of Accident if during the Journey the Insured Person sustains Injury which directly causes or results in his/her death; provided the accidental death benefit is paid or payable under the same Injury.

Disappearance

Accidental death shall not in any way be presumed by reason of the disappearance of the Insured Person during his/her stay abroad for the total loss by sinking or wrecking of the whole aircraft in which the Insured Person was travelling at the material time. Accidental death payable is subject to the terms and conditions as written by the personal representative(s) of the Insured Person’s estate and that such payment shall be refunded to Us if it later discovered that the Insured Person is found to be living and had not suffer Accident death as a result of the Accident.

PROVISIONS

(i) In respect of an Insured Person who is aged over 18, the Sum insured of benefit (1) will be limited to $100,000 irrespective of the plan selected.

(ii) In respect of an Insured Person who is aged over the maximum amount We will pay under this Section will be limited to 50% of the above benefits (1) to (10).

(iii) No claims will be payable : (a) Under benefits (1) and (2) unless such benefits occurs within 12 months from the date of Accident; (b) Under benefits (3) to (10), except on proof to Us that the disability has continued for 12 months from the date of injury and in all probability, will continue for the remainder of the Insured Person’s life.

(iv) The amount of all benefits (1) to (10) and extension (a) payable for one or more Injuries sustained by an Insured Person during the Journey shall not exceed $1,000,000 and $500,000 for VIP and Classic Plan respectively.

(v) No interest accrued or financial charges shall be covered under extension (c).

(vi) We will not pay for extension (c) if the Insured Person is entitled to this benefit under any other source.

(vii) Extension (c) is not applicable to Insured Persons aged under 18 years of age.

(viii) This section exclude cover for Illness, sickness, disease, any pre-existing physical or mental defect or infirmity, bacterial or viral infections even if contracted by Accident. This does not exclude bacterial infection that is the direct result of an accidental cut or wound.

(ix) When a Limit which had been partially dysfunctional or disabled prior to an Injury covered under this Policy and which becomes totally dysfunctional or disabled as a result of such injury, the percentage of sum insured payable shall be determined by Us in its sole discretion having regard to the extent of disablement caused by the Injury. No payment however shall be made in respect of the loss of or the Permanent Total Loss of Use of one Limit which was totally dysfunctional or disabled prior to the Injury.

Section 4 – Baggage and Personal Effects

Maximum Limit per Insured Person: $25,000 $15,000

Limit per article/pair/set of article: $7,500 $5,000

Limit per mobile phone or tablet computer: $3,000 $2,000

Subject to a maximum of one of set of either item

We will pay the incurred loss of or damage to baggage taken, sent in advance or purchased on the Journey (including clothing and personal effects worn or carried on the Insured Person, trunks, suitcases, receptacles and the like), occurring during the Journey and owned by the Insured or the Insured Person.

In the event that the Insured or the Insured Person purchases a replacement item comparable with the original brand, style & condition of the lost article, We will only pay for the replacement costs provided the lost article was more than 2 years old at the date of loss. If the item of the Insured Person cannot prove the age of the lost article or if the article is more than 2 years old and the article is not replaced, We will assess the claim on the basis of intrinsic value of the article, or the cost of repair, whichever is the lesser.

If any article is proven to be beyond economic repair, a claim will be assessed under this Policy as if the article had been lost.

We have the option to indemnify the Insured or the Insured Person by cash payment for the loss or damage or by repair or replacement.

In the case of loss or damage occurring whilst the Insured property is in the custody or control of the Public Common Carrier, the Insured Person should firstly lodge his/her claim against that Public Common Carrier.

We shall reimburse the balance if the Insured or the Insured Person is not fully compensated by the Public Common Carrier subject to the limit under this Section of the Policy.

PAIR AND SET CLAUSE

Where any insured item consists of articles in a pair or set, this Section will not pay more than the value of any particular part or parts which may be lost, without reference to any special cause which such articles or articles may have in part of such pair or set, nor more than a proportionate part of the insured value of the pair or set.

EXCLUDING

1. Loss of or damage arising from delay or confiscation or detention by Customs or other official.

2. Loss of or damage to stamps, documents, contact or conceal lenses or damage to fragile or brittle articles such as glass or crystal.

3. Loss of damage to Business goods or samples.

4. Loss or damage caused by normal wear and tear, gradual deterioration or mechanical or electrical breakdown or derangement.

5. Loss or damage whilst in the custody of the Public Common Carrier, unless reported immediately on discovery and, in the case of an airline, a Property Irregularity Report obtained.

6. Loss not reported to the police within 24 hours and a report obtained, unless:- (i) to do so would be impossible; (ii) by doing so would invoke an additional claim under another Section of the Policy.

7. Loss of or damage to banknotes, treasury bills, currency notes or any other form of negotiable document.

8. Replacement cost of credit cards.

9. Loss of unattended properties.

10. Loss of data recovery or data recorded on tapes, cards, diskette or laptop computer.

11. Any loss claimed under Section 5 – Baggage Delay arising from the same cause.

12. Any damage to sports equipment whilst in use.

Section 5 – Baggage Delay

We will pay the incurred costs of emergency purchases of essential items or clothing or requisites connected with temporary deprivation of baggage for at least 6 hours from time of arrival at destination abroad due to mishandling by the airlines or hijack.

PROVISIONS

(i) All claims must be substantiated by written confirmation from the Public Common Carrier or in the case of an airline, a Property Irregularity Report obtained on the number of hours and the reason of such delay.

EXCLUDING

1. Any loss claimed under Section 4 – Baggage and Personal Effects arising from the same cause.

2. Any baggage not being on the same Public Common Carrier of the Insured Person or souvenirs and articles mailed or shipped separately.

Section 6 – Personal Money and Travel Documents

We will pay the actual replacement cost of travel documents including passports, Hong Kong Identity Card or the like, applicable entry visas, credit cards, driving licences, travel tickets, and other travel documents belonging to the Insured Person following the accidental loss during the insured Journey. In the event of the loss of travel ticket and/or other travel documents belonging to the Insured Person during the Journey, We will also reimburse the additional travelling cost. If the ticket or expenses incurred by the Insured Person, provided that the travelling class and/or the room type for the accommodation shall not be better than the original travelling class and/or the room type for the accommodation in the Journey.

EXCLUDING

1. Loss not reported to the local police within 24 hours or for which a relevant police report is not obtained.

2. Shortages due to error, omission, exchange or depreciation in value.

3. Loss or damage arising from delay or confiscation or detention by Customs or other official.

4. Loss of traveller’s cheques not immediately reported to the local branch or agent of issuing authority.

5. Any unexplained loss or mysterious disappearance.

6. Loss of credit cards not complying with the terms and conditions of the issuing authority.

7. Loss of membership cards of any kind.

8. Loss of or damage to stamps, documents, contact or conceal lenses or damage to fragile or brittle articles such as glass or crystal.

9. Loss of or damage to Business goods or samples.

10. Loss or damage caused by normal wear and tear, gradual deterioration or mechanical or electrical breakdown or derangement.

11. Loss or damage whilst in the custody of the Public Common Carrier, unless reported immediately on discovery and, in the case of an airline, a Property Irregularity Report obtained.

12. Loss not reported to the police within 24 hours and a report obtained, unless:- (i) to do so would be impossible; (ii) by doing so would invoke an additional claim under another Section of the Policy.

13. Loss of or damage to banknotes, treasury bills, currency notes or any other form of negotiable document.

14. Replacement cost of credit cards.

15. Loss of unattended properties.

16. Loss of data recovery or data recorded on tapes, cards, diskette or laptop computer.

17. Any loss claimed under Section 5 – Baggage Delay arising from the same cause.

18. Any damage to sports equipment whilst in use.

EXCLUDING

1. Loss not reported to the local police within 24 hours or for which a relevant police report is not obtained.

2. Shortages due to error, omission, exchange or depreciation in value.

3. Loss or damage arising from delay or confiscation or detention by Customs or other official.

4. Loss of traveller’s cheques not immediately reported to the local branch or agent of issuing authority.

5. Any unexplained loss or mysterious disappearance.

6. Loss of credit cards not complying with the terms and conditions of the issuing authority.

7. Loss of membership cards of any kind.

8. Loss of any travel document and/or visas and/or travel ticket which is not necessary to complete the Journey.

9. Any fine or penalties incurred due to non-replacement or late replacement of the documents.
Section 7 – Personal Liability

Maximum Limit per Insured Person

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To indemnify the Insured Person in respect of his/her legal liability towards third parties up to the limit of the plan selected during the Journey as a result of:
1. Accidental bodily injury (including death).
2. Accidental loss of life or property.

In addition, to indemnify the Insured Person for:
3. third parties costs and expenses recoverable from the Insured Person either under Common Ownership, possession or use of vehicles, aircraft or watercraft (other than small non-motorised sailing craft), or
4. Pursuit of trade, business or profession.
5. Any wilful, malicious or unlawful act.

EXCLUDING
Claims arising directly or indirectly from, in respect of or due to:
1. Employers’ Liability, contractual liability or liability to a member of an Insured Person’s Family, Travel Companion.
2. Property belonging to or held in trust or in the care, custody or control of an Insured Person.
3. Any wilful, malicious or unlawful act.
4. Pursuit of trade, business or profession.
5. Ownership or occupation of land or building (other than occupation only of any temporary residence).
6. Ownership, possession or use of vehicles, aircraft or watercraft (other than small non-mechanical sailing craft), or
7. Legal costs, fines, penalties or the like resulting from any criminal proceedings.
8. The Insured Person being under the influence of drugs or intoxicating liquor.

Section 8 – Travel Delay, Trip Re-routing, Missed Journey and Overbooking

Maximum Limit per Insured Person

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In respect of (a), (b) and (c) below as a direct result of: –
1. Striking or other industrial action, civil commotion, hijack, terrorism, adverse weather conditions, natural disaster, mechanical and/or electrical breakdown of the Public Common Carrier or closure of the airport, we will pay: –

(a) Travel Delay

in the event of the Public Common Carrier in which the Insured Person has arranged to travel is delayed for at least 6 hours from the departure or arrival time specified in the Insured Person’s original itinerary.

The period of delay will be calculated from EITHER:
- Departure delay - the original scheduled departure time of the Public Common Carrier specified in the itinerary supplied to the Insured Person until the actual departure time of (i) the original Public Common Carrier or (ii) the first available alternative transportation offered by that Public Common Carrier; or
- Arrival delay - the original arrival time of the Public Common Carrier specified in the itinerary supplied to the Insured Person until the actual arrival time of (i) the original Public Common Carrier or (ii) the first available alternative transportation offered by that Public Common Carrier.

The Insured Person can only claim for either Departure delay or Arrival delay of the same Public Common Carrier. If the Insured Person has consecutive connected flights, each period of delayed travel cannot be accumulated and the proximate cause of the delay must be due to the above-mentioned reasons.

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(b) Extra Accommodation Expenses, Irrecoverable Pre-paid Deposits or Charges due to Travel Delay

(i) the additional, reasonable and irrecoverable accommodation expenses; or
(ii) the irrecoverable pre-paid deposits or charges or contracted to be paid for the benefit of the Insured Person incurred outside Hong Kong in the event that the outward or transit of the Public Common Carrier in which the Insured Person has arranged to travel is delayed for more than 6 hours from the time when the Insured Person has boarded after check-in or booking-in-time (except for the late arrival caused by events beyond the control of the Insured Person).

The Insured Person can only claim for either (i) or (ii) above.

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(c) Trip Re-routing Costs due to Travel Delay

the additional and irrecoverable costs of travel ticket (economy class only) incurred by the Insured Person to reach the planned destination as specified in his/her original itinerary by an alternative means of Public Common Carrier in the event that the Public Common Carrier in which the Insured Person has scheduled to travel is cancelled as a consequence of the Public Common Carrier being delayed beyond 6 hours from the time when the Insured Person’s check-in.

This benefit can only be utilized once during any one Journey.

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(d) Missed Journey

We will pay expenses reasonably incurred for the accommodation and meals, if it is not provided or compensated by the Public Common Carrier or any third party, in the event that the Insured Person has failed to board the Public Common Carrier due to missed Journey.

The failure to board the Public Common Carrier due to the missed Journey connection may be verified in writing by the Public Common Carrier.

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(e) Overbookin

We will pay expenses reasonably incurred for the accommodation and meals, if it is not provided or compensated by the Public Common Carrier or any third party, in the event that the Insured Person fails to board the Public Common Carrier due to overbooking on which the Insured Person has obtained a confirmed reservation.

The failure to board the Public Common Carrier due to the overbooking must be verified in writing by the Public Common Carrier.

<table>
<thead>
<tr>
<th>Class</th>
<th>VIP</th>
<th>Classic</th>
</tr>
</thead>
<tbody>
<tr>
<td>$10,000</td>
<td>$5,000</td>
<td></td>
</tr>
</tbody>
</table>

EXCLUDING
Claims arising from:
1. Failure of the Insured Person to check in accordance to the itinerary supplied to him/her, and failure to obtain written confirm Carriers (or their handling agents) of the number of hours of delay and the reason for such delay.
2. Any circumstances leading to the relevant delay of the Journey which is existing or arising on or before the Public Common Carrier’s departure time (including Single Journey) or earlier before (i) the application date of this Policy or (ii) the date of booking the scheduled Journey.
3. Late arrival of the Insured Person at the airport, port, train station or other place of boarding after check-in or booked-in-time (except for the late arrival caused by events beyond control of the Insured Person).
4. Any loss in relation to alternations to schedules that is not verified by the Public Common Carrier or the travel agency or any other provider of service forming part of the booked itinerary (except for (a) Travel Delay).
5. Any circumstances covered by other insurance scheme, government programme or which will be paid or refunded by travel agency, tour operator or other provider of any service forming part of the booked itinerary (except for (a) Travel Delay).
6. In respect of losses claimed under Section 10 – Trip Curtailment arising from the same cause.

Section 9 – Loss of Deposit or Cancellation of Trip

Maximum Limit per Insured Person

<table>
<thead>
<tr>
<th>Class</th>
<th>VIP</th>
<th>Classic</th>
</tr>
</thead>
<tbody>
<tr>
<td>$50,000</td>
<td>$25,000</td>
<td></td>
</tr>
</tbody>
</table>

We will pay the loss of deposits or charges paid in advance or contracted to be paid for the benefit of the Insured Person, in the event that the following is occurring after this insurance has been effected:

(i) any terrorist outbreak of strike, riot, civil commotion, terrorism, hijack, natural disasters or adverse weather conditions at the planned destination arising within 7 days before the departure date of the Journey.
(ii) serious injury or serious illness of the Insured Person on whom the Journey has begun due to: (a) the failure to board the Insured Person’s principal home in Hong Kong arising from fire, flood or burglary within 7 days before the departure date of the planned Journey which requires the Insured Person’s presence in Hong Kong on the departure date of the Journey for the purpose of police investigation.
(iii) the Government of the Hong Kong Special Administrative Region issuing a “Red” or “Black” alert for the planned destination, according to the "Outbound Travel Alert System" within 7 days before the departure date of the Journey (including General Exclusions 5A(iii)).
(iv) death, serious physical injury or serious illness of the Insured Person, Immediate Family Member, Close Business Partner or Travel Companion.
(v) bankruptcy of a travel agent licensed by the Registrar of Travel Agents and who is a member of the Travel Industry Council of Hong Kong to whom the Insured and/or the Insured Person have made travel deposits or travel fares to.

EXCLUDING
Refer to EXCLUDING (Applicable to Section 9 and 10) stated under Section 10 - Trip Curtailment.

Section 10 – Trip Curtailment

Maximum Limit per Insured Person

<table>
<thead>
<tr>
<th>Class</th>
<th>VIP</th>
<th>Classic</th>
</tr>
</thead>
<tbody>
<tr>
<td>$50,000</td>
<td>$25,000</td>
<td></td>
</tr>
</tbody>
</table>

We will pay for the proportional return of relevant irrecoverable prepaid cost of the booked itinerary as shown on the booking invoice, calculated at pro-rata for each complete day of the Journey, loss in the event that an Insured Person has arranged to travel with the Travel Industry Council of Hong Kong to whom the Insured and/or the Insured Person have made travel deposits or travel fares to.

 Claims arising directly or indirectly from, in respect of or due to:
1. Any government’s regulations control or act, bankruptcy, liquidation, error, omission or default of any travel agency, tour operator, Public Common Carrier or other provider of service forming part of the booked itinerary.
2. Any unlawful act or criminal proceedings of any Insured Person on whom the Journey has begun due to: (a) Failure of the Insured Person to check in according to the itinerary supplied to him/her, and failure to obtain written confirm Carriers (or their handling agents) of the number of hours of delay and the reason for such delay.
3. Any loss in relation to cancellations or curtailments to schedules that is not verified by the Public Common Carrier, travel agency or any other relevant organizations.
4. Any circumstances covered by other insurance scheme, government programme or which will be paid or refunded by travel agency, tour operator or other provider of any service forming part of the booked itinerary.
5. Any losses claimed under Section 9 – Loss of Deposit or Cancellation of Trip.
11 Any loss if the Insured Person refuses to follow the recommendation of the Qualified and Licensed/Registered Medical Practitioner and to return to Hong Kong on Insured Person’s own decision, or refuses to continue the Journey whilst the Insured Person’s physical condition at the time of recommending is fit for travel (Applicable to Section 10 – Trip Curtailment only).

12 In respect of losses claimed under Section 8 – Travel Delay, Trip Re-routing, Missed Journey and Overbooking arising from the same cause (Applicable to Section 10 – Trip Curtailment only).

13 Any training or studying courses fee and/or deposits.

**Section 11 – Home Care Benefit**

<table>
<thead>
<tr>
<th></th>
<th>VIP</th>
<th>Classic</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maximum Limit per Insured Person</td>
<td>$20,000</td>
<td>$10,000</td>
</tr>
</tbody>
</table>

We will, in the event of any accidental fire and/or burglary, provide indemnity to Insured Person by cash payment, repair or reinstatement, at Our option, against physical loss of or damage to the Contents within Insured Person’s principal residence in Hong Kong which was left vacant when Insured Person is on a Journey.

"Contents" means household furniture and furnishings, clothing and personal effects belonging to or in the possession of Insured Person or to Insured Person’s Family members or domestic helpers permanently residing with Insured Person and fixtures and fittings Insured Person owns (for which Insured Person is responsible) for being landed or fixtures and fittings. Contents also includes the following: deeds, bonds, bills of exchange, promissory notes, cheques, trading cheques, securities for money, documents of any kind, cash, currency notes, articles of gold, silver or other precious metal, jewellery articles, watches, antiques or semi-precious gems.

In the event of loss of or damage to any property insured forming part of a pair or set, Our liability shall not exceed a proportionate part of the value on the pair or set. We shall not be liable for more than $10,000 in respect of any one article or part of set articles.

**EXCLUDING**

We will not pay for claims arising directly or indirectly from, in respect of, or due to:

1. Wear, tear, depreciation, the process of cleaning, dyeing repairing or restoring any article,
2. Any loss or damage occasioned through the willful act of the Insured Person or the company whose property is lost or damaged,
3. Any loss (whether temporary or permanent) of the Insured Person or any part thereof by reason of confiscation, requisition, detention or illegal or illegal occupation of such property or of any premises, vehicle or property containing the same by any government authorities.
4. Electrical or mechanical breakdown.
5. Business or professional use in respect of photographic and sporting equipment and sports or travel equipment.
6. Any condition under the influence of alcohol or drugs of the Insured Person who is controlling a motor vehicle, boat, bicycle or any equipment or accessory relating thereto.
7. Electrical or mechanical breakdown
8. Inability to enter or leave Hong Kong
9. Any fire, explosion, or lightning in a transport or travel vehicle
10. Any fire, explosion or lightning in a transport or travel vehicle
11. Any loss if the Insured Person refuses to follow the recommendation of the Qualified and Licensed/Registered Medical Practitioner and to return to Hong Kong on Insured Person’s own decision, or refuses to continue the Journey whilst the Insured Person’s physical condition at the time of recommending is fit for travel (Applicable to Section 10 – Trip Curtailment only).
5 Company’s Rights after a Claim
We shall be entitled to conduct, in the name and on behalf of the Insured or Insured Person, the defence of any action of any legal action and take proceedings at Our own expense and for Our own benefit but in the name of the Insured or Insured Person to recover compensation from any third party in respect of any benefit covered by this Policy and to institute solicitors, fund out-of-pocket expenses, appoint agents or instruct any other person or body to act on Our behalf or in Our name and at Our expense and to bring proceedings in any Court of competent jurisdiction and apply for security for costs, and to make a claim under this Policy in the name of and on behalf of any person named in the Policy Schedule who is under an insurance obligation under this Policy to the Insured or the Insured Person, We shall have the right to have a post mortem at Our own expense.

6 Arbitration
If any difference shall arise as to the amount to be paid under this Policy (liability being otherwise admissible), such difference shall be referred to an arbitrator to be appointed by the parties in accordance with the statutory provisions for the time being in force in Hong Kong in any dispute or difference that arises under this Policy, the making of an award shall be a condition precedent to any right of action against Us.

7 Premium
No refund of premium is allowed once the Policy Schedule/Certificate of Insurance has been issued (except for Annual Cover).

8 Payment of Claim
Indemnity for loss of life will be payable in accordance with the beneficiary designation and the provisions respecting such payment which may be prescribed herein and effective at the time of payment. If no such designation or provision is then effective, such indemnity shall be payable to the Insured or the Insured Person. Any other indemnities unpaid at the Insured or the Insured Person’s death, may, at Our option, be paid to such beneficiary or, if none, to such estate. All other indemnities will be payable to the Insured or the Insured Person.

Payment to the designated beneficiary or, if none or if such beneficiary cannot be found after reasonable inquiry, any Insured Person’s executors or personal representatives shall discharge Our all further liability hereunder and We shall in no circumstances be liable to see the application or distribution of any amount so paid pursuant to this Policy.

Payment of the claim will be made on the exchange rate prevailing at the date of loss.

This policy shall be governed and construed in accordance with the laws of Hong Kong and any dispute or difference that arises under this Policy shall be settled in accordance with the laws of Hong Kong.

10 Applicable to Annual Cover Only
(a) Cancellation
We may cancel this Policy by sending 30 days notice by registered letter to the Insured at his/her last known address and, in such event, the Insured shall be entitled to the return of the unexpired portion of the premium corresponding to the unexpired portion of the period of insurance.

The Insured may also cancel the Policy by sending 30 days written notice to Us. We shall then refund to the Insured 90% of the unexpired period of insurance and We will retain the unexpired portion of premium of the period of insurance to the Insured subject to a minimum premium of 50% of the annual premium paid.

(b) Addition of Insured Person
No person added to any group in the Policy Schedule shall be covered by this Policy unless such person is specifically named as an Insured Person and evidenced by a written endorsement to this Policy.

(c) Additional Premium
Additional premium will be charged on a pro-rata basis for each additional Insured Person included under the added Insured Person to the unexpired portion of the period of insurance or at the time of renewal of this Policy (except for Family Plan).

(c) Renewal
Before renewal of this Policy, the Insured must give notice to Us of any sickness or physical defect or infirmity of which the Insured has become aware during the period of insurance.

11 Age Limit
Insured Person must be aged between 30-85 years old. For annual cover, the Insured must be at or below 75 years of age on the first day of the period of insurance, and renewal is allowed up to the age of 80 years old. All benefits would be payable according to the age of the Insured Person on the commencement date of the period of insurance.

12 Duplicate Cover
If the Insured Person is insured with Us by more than one travel insurance (except all group travel insurance which is actually paid by any company, group or association to insure the Insured Person) for the same Journey, then We will be only liable to pay for the loss up to the limit of the highest coverage.

13 Contracts (Rights of Third Parties) Ordinance
Any contract entered into by the Company to Policy shall have no rights under the Contracts (Rights of Third Parties) Ordinance (Cap 526 of the Laws of Hong Kong) to enforce any terms of this Policy.

14 The total amount payable under each section shall not exceed the maximum limit as stated in the Policy respectively.

Personal Information Collection Statement
AVA General Insurance Hong Kong Limited (referred to hereafter as the “Company”) recognises its responsibilities in relation to the collection, holding, processing, use and/or transfer of personal data under the Personal Data (Privacy) Ordinance (Cap. 486) (“PDPO”). Personal data will be collected for lawful purposes and all practical steps will be taken to ensure that personal data held by the Company is accurate. The Company will take all practicable steps to ensure that personal data is held in a secure manner. The Company will retain personal data for as long as it is necessary for the purpose for which it is held or as required by law. Please note that if you do not provide us with your personal data, we may not be able to provide the information, products or services you need or process your request.

Purpose:
We use your personal data to provide the Company’s products and services, conduct market research for statistical or other purposes; making disclosure as required by any applicable law, rules, regulations, codes of practice or guidelines to or assist in law enforcement purposes, investigations by police or other government or regulatory authorities in Hong Kong or elsewhere; conducting identity and/or credit checks and/or debt collection; complying with the laws of any applicable jurisdiction; carrying out other services in connection with the operation of the Company’s business; and other purposes directly relating to any of the above.

Transfer of personal data: Personal data will be kept confidential but, subject to the provisions of any applicable law, may be transferred to any affiliates or any of our business associates, our business partners or any third party and/or from or to any of your product/services providers to the Company and/or our affiliates in Hong Kong or Hong Kong elsewhere and who has a duty of confidentiality to the same; credit reference agencies or, in the event of default, debt collection agencies; any agent, contractor or third party who provides administrative, technology or other services to the Company; the Company’s business partner, our affiliates, our co-branding partners and our business partners may offer: (a) insurance, banking, provident fund or scheme, financial services, securities and related products and services; (b) products and services on health, wellness and medical, food and beverage, sporting activities and membership fees, event or competition, entertainment, spa and similar relaxation activities, travel and transportation, household, apparel, education, social networking, media and high-end consumer products; the above products and services may be provided by the Company and/or any of the above listed entities.

Access and correction of personal data: Under the PDPO, you have the right to request access and correction to your personal data, access or correction of personal data held by the Company is accurate. If you think that any data held by the Company is inaccurate, you may request the Company to correct your personal data. Requests for access and correction or for information regarding policies and practices and kinds of data held by the Company should be addressed in writing to:

Data Privacy Officer
AVA General Insurance Hong Kong Limited
9/F, Montgomery House, 38 Wong Chuk Hang Road, Wong Chuk Hang, Hong Kong
A reasonable fee may be charged to offset the Company’s administrative and actual costs incurred in complying with your data access requests.

Caring for Our Customers
We at AXA General Insurance Hong Kong Limited make every effort to provide a good standard of service to all Our Policyholders. Our service for the complaints you would expect Us to meet, the procedure below explains what you should do
• Your first point of contact should always be your insurance agent or broker. Alternatively, you can find your details or submit your feedback to Us by calling our Customer Relationship Management (CRM) number 3810.1888.
• If, following contact with the above, you feel that you require further assistance then write to

Chief Executive Officer
AVA General Insurance Hong Kong Limited
9/F, Montgomery House, 38 Wong Chuk Hang Road, Wong Chuk Hang, Hong Kong

An acknowledgement that your complaint has been received will be sent to you within two working days following when your complaint will be investigated. If you have your telephone number We will call you.

AVA General Insurance Hong Kong Limited is a member of the Insurance Complaints Bureau (ICB). If your complaint is not resolved to your satisfaction, you may write to the Insurance Complaints Bureau at the following address:

Insurance Complaints Bureau
29/F, Sunshine Plaza
353 Lockhart Road
Wanchai, Hong Kong

If the Insurance Complaints Bureau decides that Our handling of your claim has been unreasonable or technically incorrect, their decision is binding on Us by the terms of an agreement We have signed.

Important - Please remember to quote your Policy reference in any communication.

Note: All amounts are in Hong Kong Dollars.
ENDORSEMENT – Enhanced Personal Accident benefit
(only applicable if mentioned in the Certificate of Insurance or Policy Schedule)

It is hereby noted and agreed that in consideration of the additional premium paid, the Compensation Table and Provisions under Section 3 – Personal Accident; are deemed to be deleted and replaced by the following.

COMPENSATION TABLE

<table>
<thead>
<tr>
<th>Benefit</th>
<th>VIP</th>
<th>Classic</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maximum Benefit per Insured Person</td>
<td>$1,000,000</td>
<td>$500,000</td>
</tr>
<tr>
<td>(1) Accidental Death</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>(2) Permanent Total Disablement</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>(3) Permanent and incurable paralysis of all Limbs</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>(4) Permanent total Loss of Sight of both Eyes</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>(5) Permanent total Loss of Sight of one Eye</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>(6) Loss of or the Permanent total Loss of Use of two Limbs</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>(7) Loss of or the Permanent total Loss of Use of one Limb</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>(8) Permanent Loss of Speech and Loss of Hearing</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>(9) Permanent and incurable insanity</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>(10) Permanent total Loss of Hearing in (a) both ears (b) one ear</td>
<td>75%</td>
<td>20%</td>
</tr>
<tr>
<td>(11) Permanent Loss of Speech</td>
<td>50%</td>
<td></td>
</tr>
<tr>
<td>(12) Permanent total loss of the lens of one eye</td>
<td>50%</td>
<td></td>
</tr>
<tr>
<td>(13) Loss of or the Permanent total Loss of Use of four Fingers and thumb of (a) right hand (b) left hand</td>
<td>70% 50%</td>
<td></td>
</tr>
<tr>
<td>(14) Loss of or the Permanent total Loss of Use of four Fingers of (a) right hand (b) left hand</td>
<td>40% 30%</td>
<td></td>
</tr>
<tr>
<td>(15) Loss of or the Permanent total Loss of Use of one thumb (a) both right joints (b) one right joint (c) both left joints (d) one left joint</td>
<td>30% 15% 20% 10%</td>
<td></td>
</tr>
<tr>
<td>(16) Loss of or the Permanent total Loss of Use of Fingers (a) three right joints (b) two right joints (c) one right joint (d) three left joints (e) two left joints (f) one left joint</td>
<td>15% 10% 7.5% 10% 7.5% 5%</td>
<td></td>
</tr>
<tr>
<td>(17) Loss of or the Permanent total Loss of Use of Toes (a) all - one foot (b) great - both joints (c) great - one joint (d) any other toe</td>
<td>20% 7.5% 5% 3%</td>
<td></td>
</tr>
<tr>
<td>(18) Fractured Leg or Patella with Established Non-Union</td>
<td>15%</td>
<td></td>
</tr>
<tr>
<td>(19) Shortening of leg by at least 5cm</td>
<td>10%</td>
<td></td>
</tr>
<tr>
<td>(20) Permanent disablement not falling under Disability (2) to (19) inclusive.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

DEFINITIONS

“Disability/Disabilities” means any of the Disability(ies) (including accidental death) listed in the Compensation Table as above which must be resulted from an Injury of the Insured Person.

“Loss of Fingers or Toes” means complete severance through or above the metacarpophalangeal joints or metacarpophalangeal joints.

PROVISIONS

(i) In respect of an Insured Person who is aged under 18, the Sum Insured of benefit (1) will be limited to $100,000 irrespective of the plan selected.

(ii) In respect of an Insured Person who is aged over 70, the maximum amount We will pay under this Section will be limited to 50% of the above benefits (1) to (20).

(iii) No claims will be payable:

(a) Under benefits (1) and (2) unless such benefits occurs within 12 months from the date of Accident;

(b) Under benefits (3) to (20), except on proof to Us that the disablement has continued for 12 months from the date of Injury and in all probability, will continue for the remainder of the Insured Person’s Life.

(iv) Compensation payable in respect of “right hand” and “left hand” under benefit (13) to (18) inclusive of the Compensation Table shall be reversed in the Insured person is left-handed.

(v) If the Insured Person suffered from a loss of or the Permanent total Loss of Use of Limb and a Toe(s) or a Finger(s) of the same Limb which gives rise to compensate being payable under the Compensation Table, the Insured Person will only be entitled to the compensation in respect of the loss of or the Permanent total Loss of Use of one Limb under the Compensation Table.

(vi) Where the aggregate amount of compensation paid in respect of the Insured Person is equal or exceed to the maximum benefit per Insured Person, We shall be under no further liability under this Policy in respect of the same Insured Person for Injury sustained thereafter. Where the aggregate amount of compensation paid in respect of the Insured Person is less than the maximum benefit per Insured Person, the Disability as stated in the Compensation Table applicable to that Insured Person shall be reduced to the amount of original sum insured that remains unpaid.

(vii) When a Limb or organ which had been partially dysfunctional or disabled prior to an Injury covered under this Policy and which becomes totally dysfunctional or disabled as a result of such Injury, the percentage of sum insured payable shall be determined by Us in its sole discretion having regard to the extent of disablement caused by the Injury. No payment however shall be made in respect of the loss of or the Permanent total Loss of Use of one Limb or organ which was totally dysfunctional or disabled prior to the Injury.

(viii) The amount of all benefits (1) to (19) and extension (a) payable for one or more Injuries sustained by an Insured Person during the Journey shall not exceed $1,000,000 and $500,000 for VIP and Classic Plan respectively.

(ix) No interest accrued or financial charges shall be covered under extension (c) – credit card protection.

(x) We will not pay for extension (c) – credit card protection if the Insured Person is entitled to this benefit under any other source.

(xi) Extension (c) – credit card protection is not applicable to Insured Persons aged under 18 years of age.

(xii) This section exclude cover for illness, sickness, disease, any pre-existing physical or mental defect or infirmity, bacterial or viral infections even if contracted by Accident. This does not exclude bacterial infection that is the direct result of an accidental cut or wound.

Subject otherwise to the terms, conditions and exclusions of this policy.

Note: All amounts are in Hong Kong Dollars.
附錄於保險保單並構成其一部份的保單承保條款

保單
「卓越」優遊樂

定義

保單內所載明之用語將乎有其特別涵義。於本保單保明書內所述保單承保條款「卓越」之用語所具之特別涵義列明如下:

受傷 - 指擁有有關保險保單的個別人士或商業實體/投保人/保單持有人。

永久完全傷殘 - 保單上原本聲明的受保期屆滿以較早者為準。

傷患 - 指由於受傷緣故,並且於發生意外當日起計連續 12 個月內於香港境外必須支付所引致的醫療、住院及治療費用,包括牙科治療 (只因意外導致的)

旅遊 - 指由保人安排之任何旅程,為由 24 小時全球緊急援助熱線 尊貴計劃 典雅計劃

學校 - 指一所符合下列所有條件的機構:

12, - 指由意外發生當日起計連續 12 個月,於此段時間終結時,受傷情況沒有

受傷 - 指經常性住院或需要住院於下列任何機構內之治療:

100% - 指安盛保險有限公司。

保單 - 指安盛保險有限公司

受傷 - 指受保人被安排入住在一所醫院的隔離病房或政府安排的隔離地點最少 24 小時,並連續地因該隔離護理而被限制於隔離病房內,惟若該隔離病房內之隔離護理期間期間,受保人於醫院內的住處原為

保單 - 指保單上原本聲明的受保期屆滿以較早者為準。

疾病 - 指未經醫生診斷、不可預見及偶然的事件。

保單 - 指與受保人一同購買附約或組合保單平盤而獲保單保障的人士。

安盛 - 指安盛保險有限公司。

保單 - 指扭受保人於酒店內接受的治療、護理及康復服務。但不包括由保人支付的所有護理費用。保人支付的護理費用將乎有關於保單保明書內所述有關規定所定的賠償額。

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不受保範圍
不受保範圍包括：
(a) 假如受保人在旅程中意外受傷或感染疾病而需要到海外醫院求診的額外交通費用
(必須提供收據以作證明), 最高賠償額為HK$5000。
(b) 受保人在海外並非由於任何醫療費用，但可獲賠償其在香港連續一個月
接受治療及篩查後被註冊醫生批准於治療期間所提供所有醫生的必須
醫療費用，惟受保人必須於旅程期間感染有關傳染病，而該名合格及獲得牌照
或註冊醫生的診斷證明受保人於旅途期間患有關傳染病，及受保人在回港7
日內確診，最高賠償額不會超過上述第(9)分項的限額。

不受保範圍
(1) 在香港接受的治療或協助(上述第7、(8)、(9)分項及附加保障(b)明確規定
的保障除外)。
(2) 診治受保人的有關合格及獲得牌照/註冊醫生認為，受保人可合理地延遲至返
香港後才進行的手術或治療，或只安排單程旅程的受保人可合理地延遲至
抵達最終目的地後才接受手術或治療。
(3) 除非受保人有獲得牌照及獲得牌照/註冊醫生認為受保人需要入住醫院、
診所或療養院的單人或私人病房，否則本公司不會賠償受保人在住陝有關的房費額外的費用。
(4) 由作為跌打中醫師、針灸師、物理治療師或脊醫的受保人自己或受保人的親
屬或受保人的直系親屬所提供的任何治療。
(5) 假如受保人在旅程中因跌打、針灸、物理治療或脊椎治療以外的)治療。
(6) 受保人因於旅程中意外受傷或感染疾病而導致其原定的旅程日期/行程中斷
或被禁止進入重新編排旅程日期/行程及/或與原來的旅遊安排會合而
招致的必須及合理的額外住宿及交通費用。
(7) 受保人從外地返回香港後連續3个月内在香港必須支付的合理醫療、住院及治療費
用(包括因必需的護理及手術費用，或非因跌打中醫、針灸、物理治療或脊椎治療以外)
而有關費用是由受保人於海外的旅程中意外受傷或染病而必須在海外接受
治療所致。
(8) 每名受保人在海外住院期間所支付的合理護理費用，但受保人在香港的
理護理費用，除非為本地合格及獲發牌照/註冊醫生提供的醫療診察或
註冊醫生的診斷證明受保人於旅途期間患有關傳染病，及受保人在回港7
日內確診，最高賠償額不會超過上述第(6)分項的限額。
(9) 每日住院醫療費用，惟受保人必須於旅程期間患上有關傳染病，而該名合格及
獲得牌照或註冊醫生的診斷證明受保人於旅途期間患有關傳染病，及受保人在回港7
日內確診，最高賠償額不會超過上述第(6)分項的限額。

第二節 - 海外緊急援助服務

本公司免費為受保人提供下列服務：

(1) 24小時緊急援助熱線服務

緊急醫療救援

當受保人一旦遇上緊急醫療問題或情況，而有關問題或情況並非屬本保單保
範圍內，本公司將會為受保人提供24小時緊急援助熱線服務，以作出協助及提
供意見。

(2) 緊急醫療救援

假如受保人在海外需要緊急醫療援助，而醫療援助機構/註冊醫生認為，受保人可合理地延遲至返
香港後才進行的手術或治療，或只安排單程旅程的受保人可合理地延遲至
抵達最終目的地後才接受手術或治療。

(3) 附加保障

附加保障包括：

(a) 每日住院醫療費用，惟受保人必須於旅程期間患上有關傳染病，而該名合格及
獲得牌照或註冊醫生的診斷證明受保人於旅途期間患有關傳染病，及受保人在回港7
日內確診，最高賠償額不會超過上述第(6)分項的限額。

不受保範圍

不受保範圍包括：

- 任何其他現有的保障計劃。政府計劃所保障的費用或將會獲豁免、酒店、
  公共交通工具、旅行社或任何其他旅遊及/或住宿所提供的賠償或退款，
  或預定旅程費用當中已經包括的費用。

(4) 任何導致旅行被打斷的狀況，及有關情況在本保單的申請日期當天或
  之前，(單次保障)，或在受保人的申請日期前(對於已訂購有保障
  旅程的申請前)已發生的，已確立。(5) 任何未經批准的緊急醫療救援
  服務或緊急醫療救援的費用。(6) 任何旅遊援助或護理服務或緊急
  護理服務或護理服務的費用。

本節所指列的服務必須因醫療上的緊急情況而必須使用，並由本公司委託的協助
公司統籌。此「援助公司」及/或其授權代表批准及安排的緊急醫療救援或遣返回國/ 遺體運
回香港的合理費用或將每名受保人遺體或骨灰運返香港的合理費用。

不受保範圍

除第(1)節列明的不受保範圍外，下列各項亦適用：

(1) 非由本公司委託的協助公司或其授權代表批准及安排的緊急醫療救援或遣返回國/ 遺體運
回香港的費用，除非本公司已完全負擔其的情況及決定權在有關情況下
不受保範圍。

在香港妥為遺體的費用。

第三節 - 人身意外

受保人在旅程中意外受傷或治療，受保人已就上述及下列各項向每一受保人作出賠償。

賠償表

<table>
<thead>
<tr>
<th>每名受保人的最高賠償額</th>
<th>尊貴計劃</th>
<th>典雅計劃</th>
</tr>
</thead>
<tbody>
<tr>
<td>HK$1,000,000</td>
<td>HK$500,000</td>
<td></td>
</tr>
</tbody>
</table>

保障

(1) 意外死亡
  100%

(2) 永久完全傷殘
  100%

(3) 永久及無法治癒之四肢癱瘓
  100%

(4) 雙眼永久完全失明
  100%

(5) 一隻眼睛永久完全失明
  100%

(6) 丧失一肢或一肢永久完全喪失功能
  100%

(7) 丧失一肢或一肢永久完全喪失功能
  100%

(8) 永久及無法治癒之四肢癱瘓
  100%

(9) 永久完全喪失聽力
  (a) 雙耳
    75%
  (b) 一隻耳朵
    20%

(10) 永久完全喪失聽力
    50%
附加保障

附加保障範圍包括：

（三）三級程度傷

假如受保人因意外受傷，並被一名合格及獲授權註冊醫生診斷受下列任何一項事故，本公司會就下列事故賠償給予受保人。

事故

賠償限額

三級程度傷

45%或以上身體表面

$200,000

27%或以上身體表面

$120,000

18%或以上身體表面

$100,000

5%或以上身體表面

$60,000

4.5%或以上身體表面

$40,000

本公司不會就同一宗意外而引起的燒傷事故，作出超過一項以上的賠償，本公司會就下列事故賠償給予受保人。

（四）死亡及喪標

假如在旅程中受保人因意外受傷或死亡，本公司會賠償任

（c）信用咭保障

三級程度燒傷

1. 本公司不會就同一宗意外而引起的燒傷事故，作出超過一項以上的賠償，本公司會就下列事故賠償給予受保人。
2. 假如在旅程中受保人因意外受傷而直接造成或導致其死亡，本公司會賠償任

3. “三級程度燒傷”指整個皮膚層的損害或破壞及對皮膚層下面組織的損害。

（b）死亡及喪標

1. 本公司會賠償受保人因航空公司或運輸公司的處理不當或劫持事件而從抵達海外目的地後最後6小時至自抵達時起的行程而需購買基本物品或衣物或必

2. 負責支付賠償楊家一項的事故，本公司會就下列註明的事故賠償給受保人。

（vi）附加保障

本公司會賠償受保人因航空公司或運輸公司的處理不當或劫持事件而從抵達海外目的地後最後6小時至自抵達時起的行程而需購買基本物品或衣物或必

（vii）支付賠償

本公司會賠償受保人於旅程中所造成的損失，惟賠償額以本保單於此節的規定金額為限。

（viii）支付賠償

本公司會賠償受保人於旅程中所造成的損失，惟賠償額以本保單於此節的規定金額為限。
第八節 - 旅程延誤、更改行程、行程誤點及超額訂票

(a) 旅程延誤
假如受保人在申請登記的公共交通工具的原定出發時間或抵步時間延誤了最少6小時, 假如本公司作出賠償。

延誤的時間將由以下其中一個情況開始計算：
- 出發時間的延誤 - 受保人原定的出發時間與實際出發時間的差異;
- 抵步時間的延誤 - 受保人原定的抵步時間與實際抵步時間的差異。

受保人只可就同一公共交通工具的出發時間延誤或抵步時間延誤的其中一項提出索償。

(b) 因旅程延誤而需額外支付的費用或已繳付而不能取回的訂金或費用

本公司會賠償受保人在申請登記的公共交通工具的出發時間延誤或抵步時間延誤時, 除受保人已就預訂行程繳付而未經使用及不能取回的有關旅費, 或需額外支付的合理交通費用 (只限經濟客位) 及住宿費。

受保人所受的分項賠償額

<table>
<thead>
<tr>
<th>每名受保人的分項限額</th>
<th>尊貴計劃</th>
<th>典雅計劃</th>
</tr>
</thead>
<tbody>
<tr>
<td>每次旅程</td>
<td>$10,000</td>
<td>$5,000</td>
</tr>
<tr>
<td>每小時</td>
<td>$300</td>
<td>$150</td>
</tr>
</tbody>
</table>

(c) 因旅程延誤而需更改行程的額外支付費用

假如受保人在旅程中發現其申請登記的公共交通工具的出發時間或抵步時間延誤了最少6小時而

受保人只可就上述(i)或(ii)其中一項提出索償。

(d) 行程轉換

假如受保人在申請登記的公共交通工具的出發時間或抵步時間延誤了最少6小時而

受保人只可就上述(i)至(iii)其中一項提出索償。

(e) 超額訂票

假如受保人在申請登記的公共交通工具的出發時間或抵步時間延誤了最少6小時而

受保人只可就上述(i)至(iii)其中一項提出索償。

不受保範圍

因下列情況引致索償：
- 1. 受保人未能按照原定的行程辦理登記手續, 亦未能取得有關商務交通工具 (或他們負責處理有關事務的代表) 有關確認時限及理由提出的書面確認。
- 2. 任何導致該旅程延誤, 有關登記在有關類型的申請日期或前 (「單次旅程」) 已經存在或已宣佈。
第十一節 - 家庭財物保障

每名受保人的最高賠償額

<table>
<thead>
<tr>
<th>计划</th>
<th>典雅計劃</th>
<th>尊貴計劃</th>
</tr>
</thead>
<tbody>
<tr>
<td>每日賠償限額</td>
<td>$20,000</td>
<td>$50,000</td>
</tr>
<tr>
<td>每次賠償限額</td>
<td>$10,000</td>
<td>$25,000</td>
</tr>
</tbody>
</table>

第十二節 - 前期輔助

在保單上列明保單持有人居住國家在香港報名以便享有有關保障。

第十三節 - 租用自負額

每名受保人的最高賠償額

<table>
<thead>
<tr>
<th>计划</th>
<th>典雅計劃</th>
<th>尊貴計劃</th>
</tr>
</thead>
<tbody>
<tr>
<td>每日賠償限額</td>
<td>$5,000</td>
<td>$15,000</td>
</tr>
<tr>
<td>每次賠償限額</td>
<td>$3,000</td>
<td>$9,000</td>
</tr>
</tbody>
</table>

第十四節 - 中國住院按金保證

(只適用於列明在保障明細或附約除外)

假如受保人於旅途中因受傷或染病而住院中國大陸任何一家醫院，只要受保人向醫院出示中國住院按金保證書（下稱「中國住院按金保證書」），由協辦公司或親自代表受保人向列明的中國大陸醫院提出住院按金保證。

有關規定

(i) 此保證書只適用於中國大陸地區居住及受保人的相關關係人。
(ii) 受保人必須向醫院出示中國住院按金保證書，並同意在出院時全額清償住院費用。
(iii) 受保人必須確保在住院期間，受保人或其代表在醫院所選用的醫院所提供之診療及護理服務。
(iv) 如受保人於中國大陸地區住院期間，必須於出院時全額清償住院費用。
(v) 受保人必須確保在住院期間，受保人或其代表在醫務單位所提供之診療及護理服務。
(vi) 受保人必須確保在住院期間，受保人或其代表在醫務單位所提供之診療及護理服務。
(vii) 受保人必須確保在住院期間，受保人或其代表在醫務單位所提供之診療及護理服務。
(viii) 受保人必須確保在住院期間，受保人或其代表在醫務單位所提供之診療及護理服務。

一般不受保範圍

1. 本保單不會對下列情況作出賠償：

   A. 誤報或誤列導致或引致，因下列情況而發生或由於下列情況而致的損害：
      (i) 假如於有關旅程期中受傷或染病。
      (ii) 假如於有關旅程期中負傷或染病。
      (iii) 假如於有關旅程期中失業或染病。
      (iv) 假如於有關旅程期中失業或染病。
      (v) 假如於有關旅程期中失業或染病。
      (vi) 假如於有關旅程期中失業或染病。
      (vii) 假如於有關旅程期中失業或染病。
      (viii) 假如於有關旅程期中失業或染病。

2. 受保人可於中國大陸地區申請住院按金保證。

3. 受保人須於中國大陸地區申請住院按金保證。

4. 受保人可於中國大陸地區申請住院按金保證。

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91. 受保人須於中國大陸地區申請住院按金保证。
為客戶設計產品 / 服務；
與就本公司和 / 或安盛關聯方提供的任何產品 / 服務而由閣下或針對閣下提出
向閣下提供後續服務 , 包括但不限於執行 / 管理已發出的保單 ;
處理和評估閣下就本公司及安盛關聯方所提供之產品 / 服務提出的任何申請

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為客戶設計產品 / 服務；
與就本公司和 / 或安盛關聯方提供的任何產品 / 服務而由閣下或針對閣下提出
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處理和評估閣下就本公司及安盛關聯方所提供之產品 / 服務提出的任何申請

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向閣下提供後續服務 , 包括但不限於執行 / 管理已發出的保單 ;
處理和評估閣下就本公司及安盛關聯方所提供之產品 / 服務提出的任何申請
簽注 - 人身意外升級保障
（只適用於已列明在保險證明書或保險附表內）

雙方謹此注意到及同意，鑒於額外保費的支付，「第三節 - 人身意外」所列的「賠償表」及「有關規定」已被刪除並被下列代替。

賠償表

<table>
<thead>
<tr>
<th>保障</th>
<th>尊貴計劃</th>
<th>典雅計劃</th>
</tr>
</thead>
<tbody>
<tr>
<td>每名受保人的最高賠償額</td>
<td>$1,000,000</td>
<td>$500,000</td>
</tr>
</tbody>
</table>

賠償表

<table>
<thead>
<tr>
<th>保障</th>
<th>賠償能力 (每名受保人的最高賠償百分率)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td>意外死亡 100%</td>
</tr>
<tr>
<td>(2)</td>
<td>永久完全傷殘 100%</td>
</tr>
<tr>
<td>(3)</td>
<td>永久及永久治癒之四肢癱瘓 100%</td>
</tr>
<tr>
<td>(4)</td>
<td>雙眼永久完全失明 100%</td>
</tr>
<tr>
<td>(5)</td>
<td>一雙眼睛永久完全失明 100%</td>
</tr>
<tr>
<td>(6)</td>
<td>永久喪失或永不失常之四肢 100%</td>
</tr>
<tr>
<td>(7)</td>
<td>傷生一肢或一肢永久完全喪失功能 100%</td>
</tr>
<tr>
<td>(8)</td>
<td>永久喪失說話能力及喪失聽力 100%</td>
</tr>
<tr>
<td>(9)</td>
<td>永久喪失之精神錯亂 100%</td>
</tr>
<tr>
<td>(10)</td>
<td>永久且喪失聽力 (a) 雙耳 75% (b) 一隻耳朵 20%</td>
</tr>
<tr>
<td>(11)</td>
<td>永久喪失之精神錯亂 50%</td>
</tr>
<tr>
<td>(12)</td>
<td>永久喪失一雙眼睛的晶體 50%</td>
</tr>
<tr>
<td>(13)</td>
<td>每名受保人的最高賠償額</td>
</tr>
<tr>
<td>(14)</td>
<td>每名受保人的最高賠償額</td>
</tr>
<tr>
<td>(15)</td>
<td>每名受保人的最高賠償額</td>
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<tr>
<td>(16)</td>
<td>每名受保人的最高賠償额</td>
</tr>
<tr>
<td>(17)</td>
<td>每名受保人的最高賠償額</td>
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<td>(18)</td>
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<td>(19)</td>
<td>每名受保人的最高賠償額</td>
</tr>
<tr>
<td>(20)</td>
<td>每名受保人的最高賠償額</td>
</tr>
</tbody>
</table>

定義

「傷殘」是指列於上述「賠償表」的任何一項或多項傷殘情況（包括意外死亡）而有關傷殘情況必須因受保人遭受的傷害而導致。

「喪失手指或腳趾」是指掌骨與指骨關節之間或以上被完全切除或距骨與趾骨關節之間或以上被完全切除。

有關規定

1. 就 18 歲以下的受保人而言，無論選擇任何計劃，其保障 (1) 的最高賠償額為 $1,000,000。
2. 就 70 歲以上的受保人而言，本公司就本節支付的最高賠償額為上述保障 (1) 至 (20) 的 50%。
3. 本公司不會就下列情況支付賠償：
   (a) 除非保單 (1) 及 (2) 於意外日期起計 12 個月內生效，否則本公司不會就這兩項保障作出賔諭；
   (b) 除非受保人向本公司證明其傷殘情況從受傷日起計已連續存在 12 個月及受保人很可能會在餘生繼續傷殘，否則本公司不會就保障 (3) 至 (20) 作出賔諭。
4. 如支付給受保人的賠償金額等同或超過每名受保人的最高賠償額，本公司將不會再就同一名受保人於未來遭受的傷害根據本保單支付賔諭。如支付給受保人的賠償金額少於每名受保人的最高賠償額，列出於「賠償表」適用於該名受保人之傷殘情況的賔諭額應減少至仍未繳付的原本投保金額。
5. 保費在受保人於遭受本保單保障的傷害之前一肢或一個器官已經有傷害而導致的傷殘，否則本公司不會就這兩項保障作出賔諭；
6. 本公司不會支付賔諭於本保單保障的傷害之前一肢或一個器官已經有傷害而導致的傷殘，否則本公司不會就保障 (3) 至 (20) 作出賔諭。
7. 本節保障不賠償因疾病、病患、任何既存身體或精神缺陷或衰弱、細菌傳染或病毒性感染，即使受保人因意外切傷或傷口導致細菌感染除外。
8. 附屬保障 (c) - 信用咭保障的保障範圍並不包括累算利息或財務費用。
9. 本節保障不適用於 18 歲以下受保人。
10. 本節保障不賠償因疾病、病患、任何既存身體或精神缺陷或衰弱、細菌傳染或病毒性感染，即使受保人因意外切傷或傷口導致細菌感染除外。
11. 除以上規定亦須符合本保單的條件、條款及受保範圍條款。
12. 註：所有金額均以港元計算。此中文譯本只供參考之用，如有歧異，概以英文版本為準。