



SafeTrip

Policy Wording

This insurance coverage applied for shall only take effect when the relevant Policy has been issued and the first PREMIUM duly paid during the INSURED PERSON'S lifetime and good health.

The PERIOD OF INSURANCE shall begin and end at the date and time as stated in the POLICY INFORMATION PAGE, where this Policy is effected.

PART I

DEFINITIONS

In this Policy, unless the context otherwise requires:

1. ACCIDENT shall mean a sudden, unintentional, unexpected, unusual, and specific event that occurs at an identifiable time and place which shall, independently of any other cause, be the sole cause of ACCIDENTAL BODILY INJURY.
2. ACCIDENTAL BODILY INJURY shall mean a bodily injury occurring during the PERIOD OF INSURANCE which is the direct result of accidental, external, violent and visible means and which solely and independently of any other cause results in a claim for death or disablement. This is extended to bodily injury as a result of exposure to the elements of natural perils. This does not include any sickness, disease, bacterial or viral infection, (unless this is the direct result of an ACCIDENTAL BODILY INJURY) naturally occurring condition or degenerative process or the result of any gradually operating cause.
3. ACTIVITIES OF DAILY LIVING are as follows:
 - (a) Transfer : Getting in and out of a chair without requiring physical assistance.
 - (b) Mobility : The ability to move from room to room without requiring any physical assistance.
 - (c) Continence : The ability to voluntarily control bowel and bladder functions such as to maintain personal hygiene.
 - (d) Dressing : Putting on and taking off all necessary items of clothing without requiring assistance of another person.
 - (e) Bathing/Washing : The ability to wash in the bath or shower (including getting in or out of the bath or shower) or wash by any other means.
 - (f) Eating : All tasks of getting food into the body once it has been prepared.
4. AIRWORTHINESS CERTIFICATE is defined as an 'N' Standard of 'NC' Airworthiness Certificate issued by the Civil Aeronautics Administration of the United States of America, or any equivalent certificate issued by the jurisdictional agency or authority of the recognized government of any nation anywhere in the world.
5. AUTHORISED SERVICE PROVIDER shall refer to OUR business partner who provides the services as stated under Benefit 6 of Part II Section A.
6. CLOSE ASSOCIATE means any individual closely connected to the ENTITY, either socially or professionally.
7. COMMON CARRIER shall mean a duly licensed and registered operator providing regular scheduled transportation services to fare-paying passengers in the following vehicles:
 - (a) Airport limousine, bus, coach, taxi, ride-hailing services, ferry, hovercraft, hydrofoil, ship, train, tram or underground train;
 - (b) any fixed-wing aircraft operated by a licensed airline or chartered flights, and helicopter operating only between established commercial airport or licensed commercial heliports.
8. CONFINEMENT shall mean admission in a HOSPITAL as a registered in-patient due to a medical necessity and on the recommendation of a REGISTERED MEDICAL PRACTITIONERS and continuously stay in a



HOSPITAL prior to the INSURED's discharge. One day of CONFINEMENT shall mean a continuous twenty-four (24) hour period for which the HOSPITAL makes a charge for room and board for the treatment of ACCIDENTAL BODILY INJURY or SICKNESS or COVID-19. CONFINEMENT shall be evidenced by HOSPITAL admission certificate.

9. COVID-19 shall mean 2019 Novel Coronavirus or subsequent iteration by World Health Organization (WHO).
10. CURTAILMENT shall mean abandonment of the TRIP by returning to Malaysia after arrival at the scheduled TRAVEL DESTINATION as stated in the POLICY INFORMATION PAGE.
11. DOMESTIC TRIP shall apply to TRIP within territorial limits of Malaysia, which are undertaken by the INSURED PERSON and which TRAVEL DESTINATION is beyond fifty (50) kilometers from his/her normal place of residence, excluding any daily commute to and from his/her place of regular employment.
12. ENDORSEMENT shall mean a written alteration to the terms, conditions and limitations of this POLICY.
13. ENTITY shall mean any individual, body, organisation, institution, establishment, operation that is:-
 - (a) sanctioned, prohibited or restricted under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, United Kingdom or United States of America, or any of its states, and/or any other applicable economic or trade sanction laws or regulations ("Sanctioned Entity"); or
 - (b) employed, employs, trades, or conducts business with a Sanctioned Entity in any manner whatsoever.
14. EFFECTIVE DATE or POLICY DATE is the date of departure of the TRIP as declared by YOU and shown on the POLICY INFORMATION PAGE that begin at 12:00:00 a.m. (00:00:00) or when the TRIP begins in actual, whichever is later.
15. EXPIRY DATE is the date of return of the TRIP as declared by YOU and shown on the POLICY INFORMATION PAGE that ends at 11:59:59 p.m. (23:59:59) or when the TRIP ends in actual, whichever is earlier.
16. FULLY VACCINATED shall mean the administration of complete doses of the COVID-19 vaccine(s) as recommended, prescribed and approved by the Ministry of Health, Malaysia (MOH) or World Health Organisation (WHO) on the date YOU purchase this Policy, provided that the INSURED PERSON must have received the last dose of the said COVID-19 vaccine at least fourteen (14) days prior to the TRIP.
17. HAZARDOUS ACTIVITY refers to mountaineering or abseiling necessitating the use of ropes and other climbing equipment, offshore activities beyond five (5) kilometers off any coastline and including rafting or canoeing involving white water rapids, bungee jumping, flying or other aerial activities (unless as a fare-paying passenger in a fully licensed aircraft), underwater activities involving the use of any artificial breathing apparatus to a depth of more than eighteen (18) metres, horseback polo playing, steeple chasing, any form of martial arts, racing (other than on foot or swimming) or trial of speed or reliability, ski-jumping, ski-bob racing, freestyle skiing including the use of bob sleighs, professional sporting activities and competitions of any kind, any organised sporting holiday and any other activities that require a degree of skill.
18. HIJACK or HIJACKING shall mean unlawful seizure and control of a COMMON CARRIER by violent or threat of violent means.
19. HOSPITAL shall mean only an institution licensed as a HOSPITAL and operates pursuant to law for the care and treatment of sick and injured persons as registered bed patients, with facilities for diagnosis and major surgery, which is under the supervision of one (1) or more REGISTERED MEDICAL PRACTITIONERS and which has 24-hour a day professional nursing service. "HOSPITAL" does not include any institution or that portion of any institution which is operated as a convalescent or nursing home, rest home, home for the aged, a place for alcoholics or drug addicts or for any similar purpose.
20. IMMEDIATE FAMILY MEMBER shall mean the INSURED PERSON's legal spouse, children (natural or adopted), sibling, sibling-in-law, parents, parents-in-law, grandparents, grandchildren, legal guardian, or



stepparents.

21. **INFECTIOUS DISEASE** shall mean easily transmitted disease that is diagnosed by a REGISTERED MEDICAL PRACTITIONER, using internationally accepted medical diagnostic criterion, with acceptable clinical, radiological, histological and laboratory evidence.
22. **INSURED PERSON** shall mean the person(s) covered described in the POLICY INFORMATION PAGE whom must meet the following eligibility and has/have successfully applied for this insurance:
 - (a) Age last birthday at the time of policy issuance is between thirty (30) days and seventy (70) years old; and
 - (b) Malaysian, or foreigner who is permanent resident of Malaysia, work permit holder, pass holder or otherwise legally employed or legally residing in Malaysia;
 - (c) Each INSURED PERSON is only allowed to be covered with an in-force Policy per TRIP at any point of time.
23. **INTERNATIONAL TRIP** shall apply to TRIP to any TRAVEL DESTINATION outside of Malaysia.
24. **ISSUE DATE** is the date and time when the Policy is purchased and issued as shown on the POLICY INFORMATION PAGE. The ISSUE DATE shall not longer than ninety (90) days before the EFFECTIVE DATE starts. For avoidance of doubt, some benefits may be applicable after ISSUE DATE but before EFFECTIVE DATE, subject to the descriptions under Part II of this Policy.
25. **LAPTOP COMPUTER** shall mean the Laptop, Notebook or Sub-Notebook. Personal Digital Assistant (PDA) and Hand-Held Computer are excluded from this category.
26. **LOSS OF HEARING** shall mean PERMANENT and total irrecoverable LOSS OF HEARING in both ears confirmed by an Ear, Nose & Throat (ENT) Specialist with supporting medical evidence in the form of audiometry and sound-threshold tests.
27. **LOSS OF LIMB** shall mean loss by physical severance of a hand at or above the wrist or of a foot at or above the ankle.
28. **LOSS OF SPEECH** shall mean the inability of articulating any three (3) of the four (4) 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.
29. **LOSS OF SIGHT** shall mean the entire, total and irrecoverable LOSS OF SIGHT.
30. **LOSS OF USE** shall mean total and functional disablement and is treated like the total loss of said limb, finger or toe.
31. **MEDICALLY NECESSARY** shall mean a medical service which is:
 - (a) consistent with the diagnosis and customary medical treatment for a covered disability, ACCIDENTAL BODILY INJURY, SICKNESS and/or COVID-19 ;
 - (b) in accordance with standards of good medical practice, consistent with current standard of professional medical care, and of proven medical benefits;
 - (c) not for the convenience of the INSURED PERSON or the PHYSICIAN, and unable to be reasonably rendered out of HOSPITAL (if admitted as an in-patient);
 - (d) not of an experimental, investigational or research nature, preventive or screening nature; and
 - (e) for which the charges are fair and REASONABLE AND CUSTOMARY for the disability, ACCIDENTAL BODILY INJURY, SICKNESS and/or COVID-19.
32. **MOUNTAIN SICKNESS** shall mean Acute Mountain Sickness (AMS), altitude illness, hypobaropathy or soroche, caused by rapid exposure to low amounts of oxygen at high elevation.



33. NATIONAL PUBLIC HOLIDAY shall refer to the holiday declared by the legislation governing public holidays of Malaysia which include the Holidays Act 1951 (Act 369) in Peninsular Malaysia and Labuan, the Holidays Ordinance (Sabah Cap. 56) in Sabah and the Public Holidays Ordinance (Sarawak Cap. 8) in Sarawak. NATIONAL PUBLIC HOLIDAY is fixed by the federal government and are observed nationwide with some exceptions. They are any of the following:
- (a) Birthday of Prophet Muhammad (s.a.w.);
 - (b) Chinese New Year;
 - (c) Labour Day;
 - (d) Wesak Day;
 - (e) Birthday of the Yang di-Pertuan Agong;
 - (f) Hari Raya Puasa;
 - (g) National Day;
 - (h) Malaysia Day;
 - (i) Hari Raya Haji;
 - (j) Awal Muharram;
 - (k) Deepavali;
 - (l) Christmas Day; or
 - (m) any other NATIONAL PUBLIC HOLIDAY in Malaysia that is declared by the Government of Malaysia.
34. PARALYSIS shall mean the occurrence of a complete loss or total impairment of motor function due to a lesion of neural origin which directly and independently of all other causes, results from an ACCIDENT occurring within three hundred and sixty-five (365) days from the date of such ACCIDENT.
35. PERIOD OF INSURANCE is the time period the INSURED PERSON is given coverage as stated in the POLICY INFORMATION PAGE.
36. PERMANENT shall mean lasting twelve (12) consecutive calendar months from the date of the ACCIDENT and at the expiry of the twelve (12) months period being beyond any hope of improvement or recovery.
37. PERMANENT TOTAL DISABILITY shall mean when as a result of ACCIDENTAL BODILY INJURY and commencing within three-hundred and sixty-five (365) days from the date of ACCIDENT, the INSURED PERSON is totally, continuously and PERMANENTLY disabled for a period of twelve (12) consecutive months after the date of ACCIDENT and prevented from:
- (a) engaging in each and every occupation or employment for compensation or profit for which the INSURED PERSON is reasonably qualified by reason of his/her education, training or experience; or
 - (b) performing 3 or more of the ACTIVITIES OF DAILY LIVING, if the INSURED PERSON has no occupation at the time of ACCIDENTAL BODILY INJURY.
38. POLICY shall refer to Basic Policy and any ENDORSEMENT which may be attached to it.
39. POLICY INFORMATION PAGE shall mean the document where the benefits and amount of benefit are stated. It is issued in favour of the INSURED PERSON after payment of the applicable PREMIUM has been made, which payment shall be deemed proof of the insurance cover provided to the INSURED PERSON under this Policy.
40. PHYSICIAN or REGISTERED MEDICAL PRACTITIONER or SURGEON shall mean any person qualified by degree in western medicine who has legally registered with the government of the geographical area of his/her practice to render medical or surgical services, but other than the INSURED PERSON, an insurance agent, authorized insurance intermediary, business partner(s), employer/employee of the INSURED PERSON, or a member of the INSURED PERSON's immediate family or related in similar fashion to the INSURED PERSON's spouse.
41. PRE-EXISTING CONDITION with reference to an INSURED PERSON's insurance of this Policy shall mean any illness or condition occurring before the effectiveness or the last reinstatement of his/her cover, whichever is later. For this purpose, an illness or condition has occurred when it has been investigated, diagnosed or



- treated or when its signs or symptoms have manifested which would cause an ordinary prudent person to seek diagnosis, care or treatment.
42. PREMIUM shall mean any amount the COMPANY requires YOU to pay under the Policy and it is exclusive of any TAX.
 43. PUBLIC BUILDING shall mean a building that is accessible to the public but limited to theatre, public auditorium, hotel, registered school and HOSPITAL.
 44. PUBLIC CONVEYANCE shall refer to:
 - (a) a bus, coach, taxi, airport limousine, ferry, hovercraft, hydrofoil, ship, train (including Light Rail Transit and Monorail), tram or underground train provided and operated by a carrier duly licensed for the regular transportation of fare-paying passengers;
 - (b) any e-hailing vehicle facilitated through an electronic mobile application provided by a registered intermediation business, which must be duly licensed for transportation of fare-paying passengers and regulated under the Commercial Vehicle Licensing Board Act 1987 and Land Public Transport Act 2010 (including any re-enactments and/or amendments made thereof for the time being in force) or any prevailing or future laws or regulations;
 - (c) a fixed-wing aircraft provided and operated by an airline or an air charter company which is duly licensed for the regular transportation of fare-paying passengers, and a helicopter provided and operated by an airline which is duly licensed for the regular transportation of fare-paying passengers and operating only between established commercial airports or licensed commercial heliports; or
 - (d) a lift or elevator car (lifts and elevators in mines and on construction sites are excluded) duly certified to carry passengers.
 45. QUARANTINE shall mean compulsory detention in isolation to stop the spread of an INFECTIOUS DISEASE.
 46. QUARANTINE FACILITIES shall mean only a centre designated by Ministry of Health (MOH) for individuals who diagnosed with COVID-19 in Malaysia with laboratory confirmation of infection and required QUARANTINE.
 47. REASONABLE AND CUSTOMARY shall mean any medical fee or expense which is charged for treatment, supplies or medical services MEDICALLY NECESSARY to treat an INSURED PERSON's condition under the care, supervision or order of a PHYSICIAN; does not exceed the usual level of charges for similar treatment, supplies or medical services in the locality where the expense is incurred; and does not include charges that would not have been made if no insurance existed. For medical report fees, specialist report fees, postmortem report fees, and ambulance fees, the REASONABLE AND CUSTOMARY expenses shall mean the actual expenses incurred.
 48. RELATIVE shall mean spouse, partner, sibling, child, parent or parent of the spouse or partner of the ENTITY. Sibling, child, parent or parent of the spouse or partner includes both biological and non-biological relationship.
 49. SERIOUS ACCIDENTAL BODILY INJURY or SERIOUS SICKNESS whenever applied to the INSURED PERSON, is one which is dangerous to life and requires treatment by a REGISTERED MEDICAL PRACTITIONER and which results in the INSURED PERSON being certified by that REGISTERED MEDICAL PRACTITIONER as unfit to travel or continue with his/her original TRIP. When applied to the IMMEDIATE FAMILY MEMBER, it shall mean ACCIDENTAL BODILY INJURY or SICKNESS certified as being dangerous to life by a REGISTERED MEDICAL PRACTITIONER and which results in the INSURED PERSON's discontinuation or cancellation of his/her original TRIP.
 50. SICKNESS shall mean any noticeable change in the physical health of the INSURED PERSON occurring during the TRIP, which requires the INSURED PERSON to seek the care of a REGISTERED MEDICAL PRACTITIONER acting within the scope of his/her license to treat the SICKNESS for which the claim is made provided the nature of the illness is not excluded from this Policy.



51. TAX is defined as any present or future, direct or indirect, tax including sales tax, service tax, any other tax of similar nature, levy, impost, duty, charge, fee, deduction or withholding of any nature, and any interest or penalties in respect thereof imposed by the Government of Malaysia.

52. TRAVEL DESTINATION shall mean INSURED PERSON's arrival Destination Country(ies) and/or Area of Coverage as stated in the POLICY INFORMATION PAGE.

Area of Coverage	Destination Country(ies)
Domestic	Malaysia (including Sabah and Sarawak)
Area 1	Australia, Brunei, Cambodia, China (exc. Mongolia, Nepal and Tibet), Hong Kong, Macau, India, Indonesia, Japan, South Korea, Laos, Myanmar (Burma), New Zealand, Pakistan, Philippines, Singapore, Sri Lanka, Taiwan-Province of China, Thailand, Vietnam only
Area 2	Worldwide excluding USA, Canada and Excluded Countries
Area 3	Worldwide excluding Excluded Countries
Excluded Countries	Mongolia, Nepal and Tibet, Iran, Syria, Belarus, Cuba, Democratic Republic of Congo, North Korea, Somalia, Sudan, South Sudan, Crimea (including Sevastopol), Russia, Ukraine, Zimbabwe

53. TRAVELLING COMPANION shall mean a person who has reservation or confirmation of travel to accompany INSURED PERSON on the same TRIP.

54. TRIP shall mean the return TRIP commencing from the time the INSURED PERSON leaves his/her normal place of residence or place of regular employment in Malaysia or starts from the PERIOD OF INSURANCE as specified in the POLICY INFORMATION PAGE (whichever is later) until the time he/she returns, and ceases on whichever of the following occurs first:

- (a) the end of the PERIOD OF INSURANCE as specified in the POLICY INFORMATION PAGE;
- (b) the INSURED PERSON's arrival at his/her normal place of residence or place of regular employment (whichever is earlier) in Malaysia; or
- (c) twenty-four (24) hours after the INSURED PERSON's scheduled arrival time in Malaysia (not applicable for DOMESTIC TRIP).

The duration of each TRIP shall not exceed ninety (90) consecutive days from the commencement date of the TRIP.

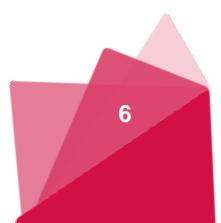
55. POLICYHOLDER , OWNER, YOU or YOUR shall mean the person effecting this Policy, who must have an insurable interest on the INSURED PERSON.

56. VACCINATION shall mean a COVID-19 vaccine intended to provide acquired immunity against severe acute respiratory syndrome coronavirus2 (SARS-CoV-2) that is causing COVID-19, including the first dose, subsequent doses and booster doses. The vaccine must be officially approved, endorsed or authorised by Ministry of Health (MOH) of Malaysia and prescribed by a REGISTER MEDICAL PRACTITIONER in any HOSPITAL in Malaysia. For avoidance of doubt, VACCINATION performed in Malaysia at locations other than HOSPITAL as allowed by MOH, with the prescription of a REGISTER MEDICAL PRACTITIONER, are also accepted.

57. VALUABLES shall mean personal effects or items of high value including but not limited to antiques, works of art, items made of precious metals or precious stones, including precious and semi-precious gems, jewellery, watches or furs.

58. WE, OUR, US or COMPANY shall mean AIA General Berhad.

Whenever the context requires, masculine form shall apply to feminine and singular term shall include the plural.





PART II INSURING AMOUNT AND BENEFITS

While this Policy is in force, the COMPANY shall provide the INSURED PERSON the benefits of Part II of this Policy as shown in the Schedule of Benefits below according to the plan specified in the POLICY INFORMATION PAGE of this Policy or any ENDORSEMENT attached to this Policy, where the loss(es) is/are sustained by such INSURED PERSON while travelling on an INSURED PERSON bona fide business or leisure TRIP and provided that the country of his/her normal place of residence and place of regular employment must be Malaysia, subject to the provisions, conditions and limitations of this Policy.

SCHEDULE OF BENEFITS

No.	Benefits	Amount of Cover (RM)	
		International Plan	Domestic Plan
(A) Travel Inconvenience			
1	Travel Cancellation or Loss of Deposits	10,000	5,000
2	Travel Curtailment	10,000	-
3	Travel Delay (RM100 for every 6 consecutive hours)	1,000	-
4	Baggage Delay (RM100 for every 6 consecutive hours)	1,000	-
5	Loss or Damage of Baggage and Personal Effects <ul style="list-style-type: none"> Any one article limit Portable Computers 	3,000	-
		500	
		2,000	
6	Travel Assistance Service	Included	-
(B) Medical			
7	Medical Expenses	100,000	100,000
8	Follow-up Treatment in Malaysia	10,000	-
9	Emergency Evacuation and Repatriation	Unlimited	-
10	Repatriation of Mortal Remains	Unlimited	-
(C) Personal Accident			
11	Accidental Death and Dismemberment	100,000	100,000
12	Double Indemnity on Public Conveyance	-	100,000
13	Double Indemnity on National Public Holidays	-	100,000
(D) Covid-19			
14	Death due to Covid-19	20,000	10,000
15	Cash assistance upon hospitalisation due to diagnosed with Covid-19 (up to maximum 10 days)	100 per day	100 per day
16	Quarantine Allowance due to Covid-19 while overseas (up to maximum 10 days)	100 per day	-
(E) Optional Benefit			
17	Top-up Medical Expenses for Covid-19	150,000	-

DESCRIPTION OF BENEFITS

SECTION A: TRAVEL INCONVENIENCE



BENEFIT 1: TRAVEL CANCELLATION OR LOSS OF DEPOSITS

WE will reimburse the INSURED PERSON up to the limit as stated in the Schedule of Benefits, for loss of travel fare and/or accommodation expenses paid in advance and are not recoverable from any other source consequent upon the cancellation of the TRIP necessitated by the following and occurring within thirty (30) days before the date of commencement of the TRIP as a result of:



- (a) Death or SERIOUS ACCIDENTAL BODILY INJURY or SERIOUS SICKNESS of the INSURED PERSON, or IMMEDIATE FAMILY MEMBER;
- (b) Natural disasters at INSURED PERSON's scheduled TRAVEL DESTINATION;
- (c) Witness summons or jury service which were not made known to the INSURED PERSON prior to the purchase of this Policy;
- (d) Unexpected outbreak of strike, riot or civil commotion at the scheduled TRAVEL DESTINATION;
- (e) Serious damage to the INSURED PERSON's principal residence from fire, flood, or similar natural disaster (typhoon, earthquake and the like) within one (1) week before the departure date which requires the INSURED PERSON's presence on the premise on the departure date.

Benefit 1 under Part II Section A is effective from the ISSUE DATE and terminates on the commencement of the TRIP from Malaysia.

If a claim is paid under this Benefit, no other benefits shall be payable to the INSURED PERSON under Section A Benefit 2 for any one (1) event.

Exclusions applicable to Benefit 1 under Part II Section A :

WE will not pay for any loss:

- (a) caused directly or indirectly by Government regulations or control, bankruptcy, liquidation or default of travel agencies, or carrier caused cancellation;
- (b) covered by any other existing insurance scheme, government program or which shall be paid or refunded by a hotel, airline, travel agent or any other provider of travel and/or accommodation;
- (c) if this Policy is purchased less than fourteen (14) days before commencement of the TRIP;
- (d) INSURED PERSON or IMMEDIATE FAMILY MEMBER staying in the same household in Malaysia, or TRAVELLING COMPANION, is diagnosed and tested positive for COVID-19; and/or
- (e) if INSURED PERSON postpones the scheduled TRIP solely due to epidemic or pandemic-related travel advisories, including but not limited to border closures, QUARANTINE orders, government orders issued by government or the World Health Organization for the TRAVEL DESTINATION country or home country.



BENEFIT 2: TRAVEL CURTAILMENT

WE will reimburse the INSURED PERSON up to the limit as stated in the Schedule of Benefits (not applicable for DOMESTIC TRIP), for the proportional return of the irrecoverable prepaid costs of the TRIP as shown on the booking invoice, calculated on a pro-rata basis from the date of INSURED PERSON's early return to Malaysia to the scheduled return date of the TRIP or PERIOD OF INSURANCE (whichever is earlier), necessarily and unavoidably incurred, resulting in CURTAILMENT due to:

- (a) SERIOUS ACCIDENTAL BODILY INJURY or SERIOUS SICKNESS of the INSURED PERSON;
- (b) Death, SERIOUS ACCIDENTAL BODILY INJURY or SERIOUS SICKNESS of IMMEDIATE FAMILY MEMBER or TRAVELLING COMPANION;
- (c) HIJACKING of the aircraft in which the INSURED PERSON is travelling;
- (d) Natural disasters at INSURED PERSON's scheduled TRAVEL DESTINATION;
- (e) Serious damage to the INSURED PERSON's principal residence from fire, flood, or similar natural disaster (typhoon, earthquake and the like) which requires the INSURED PERSON's presence on the premise;



- (f) Unexpected outbreak of strike, riot or civil commotion at the scheduled TRAVEL DESTINATION that risks danger to INSURED PERSON's life.

If the prepaid costs are confined to air tickets, WE will reimburse INSURED PERSON for the unused sector of the air tickets.

A medical certificate must be obtained from the REGISTERED MEDICAL PRACTITIONER treating INSURED PERSON, IMMEDIATE FAMILY MEMBER or the TRAVELLING COMPANION, confirming the advisability to return to Malaysia due to SERIOUS ACCIDENTAL BODILY INJURY or SERIOUS SICKNESS.

For HIJACKING or death, proportional return of the irrecoverable prepaid cost shall be calculated from the date of occurrence to the EXPIRY DATE.

Benefit 2 under Part II Section A is effective only if the Policy is purchased before INSURED PERSON became aware of any circumstances which could lead to CURTAILMENT.

If a claim is paid under this Benefit, no other benefits shall be payable to the INSURED PERSON under Section A Benefit 1 for any one (1) event.

Exclusions applicable to Benefit 1 and 2 under Part II Section A :

WE will not pay for any loss arising directly or indirectly from:

- (a) Government regulation of Act, delay or amendment of the booked itinerary, or failure in provision of any part of the booked TRIP (including error, omission or default) by the provider of any service forming part of the booked TRIP as well as the agent or tour operator through whom the TRIP was booked.
- (b) bankruptcy, insolvency, liquidation or default of travel agencies or COMMON CARRIER;
- (c) INSURED PERSON or TRAVELLING COMPANION's business, financial or contractual obligations;
- (d) disinclination to travel or financial circumstances of the INSURED PERSON;
- (e) unlawful act, or criminal proceedings of any person on whom the TRIP plans depend, other than witness summons or jury service of the INSURED PERSON;
- (f) failure to notify travel agent/ tour operator or provider of transportation or accommodation immediately upon discovery of any event requiring cancellation or CURTAILMENT of the TRIP;
- (g) any additional expenses incurred if any part of the TRIP is deferred or postponed;
- (h) INSURED PERSON or TRAVELLING COMPANION being diagnosed with COVID-19 whilst on INTERNATIONAL TRIP or IMMEDIATE FAMILY MEMBER is diagnosed with COVID-19 and INSURED PERSON need to cut short the TRIP to return to Malaysia; and/or
- (i) INFECTIOUS DISEASES including COVID-19, which is declared or notified as an epidemic by the applicable health authority in the covered TRAVEL DESTINATION or a pandemic by the World Health Organisation (WHO) until such declaration or notification is lifted by the WHO or the applicable health authority in the covered TRAVEL DESTINATION.



BENEFIT 3: TRAVEL DELAY

In the event of the departure time of the COMMON CARRIER is different from the time specified in the itinerary supplied by the INSURED PERSON due to inclement weather, equipment failure or strike or hijack or other job action by the employees of the COMMON CARRIER during the TRIP, WE will reimburse the INSURED PERSON for each consecutive six (6) complete hours of delay, up to the limit as stated in the Schedule of Benefits (not applicable for DOMESTIC TRIP).

The period of delay shall be calculated from the original scheduled departure time of the COMMON CARRIER until the commencement of the first available alternative transportation offered by the COMMON CARRIER management. If the INSURED PERSON is entitled to a refund or compensation from the COMMON CARRIER, WE will only be liable for the losses not covered.



Exclusions applicable to Benefit 3 under Part II Section A:

WE will not pay for any loss arising from:

- (a) failure of the INSURED PERSON to check in according to the itinerary supplied to him/her;
- (b) failure to obtain written confirmation from the COMMON CARRIER of their handling agents of the number of hours delayed and the reason for such delay;
- (c) strike, riot or industrial action publicly known to be existing on the date of purchasing this Policy;
- (d) the late arrival of the INSURED PERSON at the airport or port (except for the late arrival due to strike or industrial action);
- (e) any delay, reschedule or cancellation by the COMMON CARRIER which was notified to the INSURED PERSON at least twenty-four (24) hours prior to the original departure time of the TRIP; and/or
- (f) additional expenses incurred, if any part of the TRIP is cancelled, deferred or postponed.



BENEFIT 4: BAGGAGE DELAY

In the event of the INSURED PERSON's checked-in baggage is delayed, misdirected or temporary misplaced by the COMMON CARRIER, WE will reimburse the INSURED PERSON for each consecutive six (6) complete hours of delay, up to the limit as stated in the Schedule of Benefits (not applicable for DOMESTIC TRIP).

The period of delay shall be calculated from the time of INSURED PERSON's arrival at the TRAVEL DESTINATION until the time of receipt by the INSURED PERSON or a person authorised by the INSURED PERSON to receive his/her baggage.

If a claim is paid under this Benefit, no other benefits shall be payable to the INSURED PERSON under Section A Benefit 5 for any one (1) event.

Exclusions applicable to Benefit 4 under Part II Section A:

WE will not pay for any loss arising from:

- (a) baggage delay not reported immediately upon discovery to the COMMON CARRIER;
- (b) baggage legally delayed, held, detain or confiscated by customs, immigration and/or other public authorities;
- (c) baggage delay on INSURED PERSON's return journey to Malaysia; and/or
- (d) INSURED PERSON failure to obtain a written confirmation from the operator of COMMON CARRIER on the baggage delivery time.



BENEFIT 5: LOSS OR DAMAGE OF BAGGAGE AND PERSONAL EFFECTS

WE will reimburse the INSURED PERSON up to the sub-limit and limit as stated in the Schedule of Benefits (not applicable for DOMESTIC TRIP), for the loss, damage or repair of INSURED PERSON's baggage and personal effects occurred during the TRIP (including clothing worn or carried on the person), less deduction for any wear and tear, depreciation or any compensation paid by the COMMON CARRIER. The baggage and personal effects must be owned by the INSURED PERSON or on person, and includes suitcase, trunks, hand luggage and the like receptacles as well as their contents.

WE will pay the original purchase price of any lost item purchased by the INSURED PERSON during the TRIP if he/she provides the original receipt, otherwise reimbursement will be based on OUR assessment of the available evidence. If as a result of an ACCIDENT that any article is proven to be beyond economical repair, a claim shall be dealt with under this Policy as if the article had been lost.

For loss or damage due to COMMON CARRIER or hotel, INSURED PERSON should lodge a claim with the COMMON CARRIER or hotel first before lodging a claim with US together with proof of compensation received from



or claim rejected by the COMMON CARRIER or hotel.

If a claim is paid under this Benefit, no other benefits shall be payable to the INSURED PERSON under Section A Benefit 4 for any one (1) event.

Exclusions applicable to Benefit 5 under Part II Section A:

WE will not pay for claims in respect of the following:

1. Loss or damage exceeding:
 - (a) RM500.00 in respect of every single article, pair or set of articles other than LAPTOP COMPUTER;
 - (b) the proportionate part of the value of an article belonging to a pair or set;
 - (c) RM2,000.00 in respect of LAPTOP COMPUTER; and
 - (d) RM3,000.00 in total for VALUABLES.
2. Loss or damage to:
 - (a) animals, live or ornamental plants, seeds of the plants or any of its derivatives;
 - (b) bonds, stamps, identity documents, credit and payment cards, travel document, cash, stocks, negotiable instruments and securities or documents or any kind;
 - (c) contact or corneal lenses, glasses, china marble, earthenware, tortoise shells, bulbs or valves, hearing aids, prosthetic limbs, artificial teeth or dental bridges or dentures;
 - (d) cosmetics or any kind;
 - (e) accessories of any kind including fashion accessory;
 - (f) information or data stored in tapes, cards, discs or other storage medium;
 - (g) traditional herbs, perishable and consumable goods or bottles or any subsequent damages caused as a result thereof;
 - (h) pedal cycles, wheelchairs, prams, pushchairs or baby buggies other than while they are being conveyed by public transport services or carrier;
 - (i) property more specifically insured elsewhere;
 - (j) VALUABLES unless at all times they are attended by the INSURED PERSON or deposited in a hotel safe or hotel safety box;
 - (k) fragile articles, musical instruments, sculptures and household goods;
 - (l) handphones, tablets, pagers, portable computer equipment (other than LAPTOP COMPUTER), including digital assistant and its accessories. However, WE will cover loss or damage of handphones and tablets due to theft, attempted theft, robbery, attempted robbery, or the negligence of the COMMON CARRIER;
 - (m) any item that is loaned, rented or hired;
 - (n) baggage that is sent in advance, mailed or shipped separately.
3. Loss or damage due to atmospheric or climatic conditions, wear and tear or depreciation, moth or vermin, gradual deterioration, mechanical or electrical breakdown or derangement, inherent vice;
4. Loss or damage to baggage not kept in INSURED PERSON's travel accommodation unless it is at all times attended by the INSURED PERSON;
5. Loss or theft of INSURED PERSON's personal effects left unattended in a public place or unattended vehicle unless stored completely out of view in the trunk of the vehicle, the vehicle is fully locked with all windows shut at all time of the incident and there is visible proof of forced entry;
6. Loss or damage arising from delayed, held, detain or confiscated by customs, immigration and/or other public authorities;
7. Loss or damage due to INSURED PERSON's negligence;
8. Unexplained and mysterious disappearance;
9. Losses not reported to the police or authorities within twenty-four (24) hours of discovery.



BENEFIT 6: TRAVEL ASSISTANCE SERVICE

This Policy provides free information on a full range of 24-hour worldwide Travel Assistance Service by OUR AUTHORISED SERVICE PROVIDER to the INSURED PERSON (not applicable for DOMESTIC TRIP). The services included are:

1. **Pre-Trip Assistance Service** provides current visa and weather information virtually about every destination around the world and updates on known health hazards and immunization requirements of a remote destination;
2. **Medical Assistance Service:**
 - (a) provides directions on how to obtain medical care overseas and coordinate communications with local PHYSICIANS and INSURED PERSON's own REGISTERED MEDICAL PRACTITIONER back home;
 - (b) keeps INSURED PERSON's family and employer informed with medical and travel information if he/she is hospitalized;
 - (c) arranges for payment of medical services using funds from INSURED PERSON's credit card, family or employer if necessary.
3. **Emergency Ticket Service:**
 - (a) operates twenty-four (24) hours a day and six hundred and sixty-five (365) days a year;
 - (b) provides emergency travel agent services for airline and hotel reservation;
 - (c) arranges ticket payment using INSURED PERSON's credit card facilities and for the INSURED PERSON to pick up at airline ticket counters.
4. **General Assistance Service** provides advice on contacting and using services from consulates, translation services and other sources of travel related services, and arranges international shipment of personal and business items.
5. **Evacuation and Repatriation Service:**
 - (a) arranges transportation and medical care enroute when an emergency (or even non-emergency) medical evacuation is required;
 - (b) arranges the repatriation of the remains of a deceased traveller;
 - (c) arranges escort services and transportation home for family member, TRAVELLING COMPANIONS or minor children.
6. **Baggage Service** provides instant telephone advice to travellers whose baggage has been delayed or lost by the COMMON CARRIER.
7. **Legal Service** assists in locating legal counsel and helps to arrange bail bonds and payment for legal expenses using INSURED PERSON's own cash or credit resources, or by forwarding funds from INSURED PERSON's family or employer.

The arrangement for the services as stated above under this Benefit is free. However, the INSURED PERSON is responsible for all cost and expenses for medical, evacuation and repatriation, legal, transport and other services not stated above used, unless specifically mentioned in this Policy.

SECTION B: MEDICAL



BENEFIT 7: MEDICAL EXPENSES

In the event the INSURED PERSON suffers ACCIDENTAL BODILY INJURY, sudden and unexpected SICKNESS and/or COVID-19 during the TRIP and requires treatment by a REGISTERED MEDICAL PRACTITIONER or SURGEON, CONFINEMENT in a HOSPITAL or the employment of a LICENSED OR GRADUATE NURSE, WE



will pay the REASONABLE AND CUSTOMARY fees, charges or expenses incurred during the PERIOD OF INSURANCE for such medical treatment, emergency dental treatment following a damage to sound and natural teeth caused by ACCIDENT (excluding replacement of dentures or crowns), surgery, HOSPITAL charges, nursing fees, medical/ specialist/ post-mortem report fees and ambulance fees, up to the limit as stated in the Schedule of Benefits.

DOMESTIC TRIP does not cover any Medical Expenses due to COVID-19.

However, in the event the INSURED PERSON becomes entitled to a refund of all or part of such expenses from any other source, WE shall only be liable for the excess of the amount recoverable from such other sources. All claims must be supported by the original medical bill(s).

WE will reimburse eligible expenses directly to the INSURED PERSON upon the INSURED PERSON's return to Malaysia, or his/her normal place of residence, provided that sufficient proof of claim is provided as described in this Policy.



BENEFIT 8: FOLLOW-UP TREATMENT IN MALAYSIA

In the event the INSURED PERSON required continuation of medical attention sought for the said ACCIDENTAL BODILY INJURY, sudden and unexpected SICKNESS and/or COVID-19 within ninety (90) days following the INSURED PERSON's return to Malaysia from his/her INTERNATIONAL TRIP, WE will reimburse for follow-up Medical Expenses incurred, up to the limit as stated in the Schedule of Benefits (not applicable for DOMESTIC TRIP).



BENEFIT 9: EMERGENCY MEDICAL EVACUATION AND REPATRIATION

When as a result of an ACCIDENTAL BODILY INJURY sustained, sudden and unexpected SICKNESS and/or COVID-19 commencing while the INSURED PERSON is travelling on his/her INTERNATIONAL TRIP, which causing life threatening medical emergencies (such as death or serious impairment to health), and it is judged medically appropriate to move the INSURED PERSON to another location for medical treatment, or to return the INSURED PERSON to Malaysia or his/her normal place of residence as advised and approved by OUR AUTHORISED SERVICE PROVIDER or its authorised representative, OUR AUTHORISED SERVICE PROVIDER shall arrange for the evacuation and/or repatriation utilizing the means to do so based on the medical severity of the INSURED PERSON's condition (not applicable for DOMESTIC TRIP).

WE will pay directly to OUR AUTHORISED SERVICE PROVIDER on the covered expenses for such evacuation and/or repatriation. The means of evacuation and repatriation arranged by the AUTHORISED SERVICE PROVIDER 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 shall be made by OUR AUTHORISED SERVICE PROVIDER and shall be based solely upon medical necessity.

Covered expenses are expenses for services provided and/or arranged by OUR AUTHORISED SERVICE PROVIDER for the transportation, medical services and medical supplies necessarily to the INSURED PERSON as a result of an emergency evacuation and/or repatriation of the INSURED PERSON as described herein.



BENEFIT 10: REPATRIATION OF MORTAL REMAINS

When as a result of an ACCIDENTAL BODILY INJURY sustained, sudden and unexpected SICKNESS and/or COVID-19 commencing while the INSURED PERSON is travelling on his/her INTERNATIONAL TRIP, the INSURED PERSON passed away during the TRIP (not applicable for DOMESTIC TRIP), OUR AUTHORISED



SERVICE PROVIDER shall make the necessary arrangements for the return of the INSURED PERSON's mortal remains to Malaysia or his/her normal place of residence. WE will pay direct to OUR AUTHORISED SERVICE PROVIDER on the covered expenses for such repatriation.

Exclusions applicable to Part II Section B:

WE will not pay for all benefits under Section B arising directly or indirectly from:

- (a) MOUNTAIN SICKNESS (applicable to Benefit 9 and 10 only);
- (b) INFECTIOUS DISEASES excluding COVID-19, which is declared or notified as an epidemic by the applicable health authority in the covered TRAVEL DESTINATION or a pandemic by the World Health Organisation (WHO) until such declaration or notification is lifted by the WHO or the applicable health authority in the covered TRAVEL DESTINATION;
- (c) If the INSURED PERSON is tested positive with COVID-19 from the COVID-19 polymerase chain reaction (PCR) test or any COVID-19 equivalent test approved by the Malaysian authorities within seventy-two (72) hours prior to the TRIP;
- (d) Any circumstances regarding COVID-19 if the INSURED PERSON is not FULLY VACCINATED.

INSURED PERSON must contact OUR 24-Hour Worldwide Travel Assistance Service Hotline at **603-2163 4088** as soon as possible to obtain approval in advance of any evacuation/ repatriation and to make the necessary transportation arrangements or such claim for such costs will be rejected.

SECTION C: PERSONAL ACCIDENT



BENEFIT 11: ACCIDENTAL DEATH AND DISMEMBERMENT

When by reason of ACCIDENTAL BODILY INJURY the INSURED PERSON suffers any of the events stipulated below within three hundred and sixty-five (365) days from the date of ACCIDENT during the TRIP, WE will pay the amount of benefit according to the Schedule of Indemnities below:

Schedule of Indemnities

Events	% of the amount of benefit as stated in the Schedule of Benefits
Death	100%
PERMANENT TOTAL DISABILITY	100%
PERMANENT total LOSS OF SIGHT of both eyes	100%
PERMANENT total LOSS OF SIGHT of one (1) eye	100%
Loss of or the PERMANENT total LOSS OF USE of two (2) limbs	100%
Loss of or the PERMANENT total LOSS OF USE of one (1) limb	100%
PERMANENT total LOSS OF SPEECH and HEARING	100%
PERMANENT total PARALYSIS	100%
PERMANENT total LOSS OF HEARING in <ul style="list-style-type: none"> • both ears • one (1) ear 	75% 25%
PERMANENT total LOSS OF SPEECH	50%

In the event that a series of events shall arise out of the same ACCIDENT, WE shall only pay for one event, that being the greatest amount of indemnity to be payable under this Benefit. The maximum liability under this Benefit



shall not exceed one hundred percent (100%) of the amount of benefit as stated in the Schedule of Benefits for this Benefit. In no event shall the COMPANY pay for any loss caused by ACCIDENTAL BODILY INJURY which is a consequence of any kind of disease or SICKNESS.

If a death claim is paid under this Benefit, no other benefits under Section D Benefit 14 shall be payable.

Exposure And Disappearance: When by reason by any ACCIDENT covered by this Policy the INSURED PERSON is exposed to the elements and as the result of such exposure suffers and event for which compensation is otherwise payable hereunder such event shall be covered under the terms of this Policy. If the body of the INSURED PERSON has not been found within one (1) year after the date of disappearance, sinking or wrecking of the aircraft or other conveyance either on the ground or at sea, in which the INSURED PERSON was travelling at the time of the ACCIDENT causing the ACCIDENTAL BODILY INJURY and under such circumstances as would otherwise be covered hereunder, it would be presumed that the INSURED PERSON suffered loss of life resulting from ACCIDENTAL BODILY INJURY caused by an ACCIDENT covered by this Policy at the time of such disappearance, sinking or wrecking.



BENEFIT 12: DOUBLE INDEMNITY ON PUBLIC CONVEYANCE

When by reason of ACCIDENTAL BODILY INJURY the INSURED PERSON suffers death and/or dismemberment within three hundred and sixty-five (365) days from the date of ACCIDENT during the DOMESTIC TRIP, WE will pay the amount of benefit according to the Schedule of Indemnities (under Benefit 11 of Part II Section C), provided that the ACCIDENTAL BODILY INJURY is sustained by the INSURED PERSON while travelling in a PUBLIC CONVEYANCE or as a result of burning of the PUBLIC BUILDING (not applicable for INTERNATIONAL TRIP).

In the event that a series of events shall arise out of the same ACCIDENT, WE shall only pay for one event, that being the greatest amount of indemnity to be payable under this Benefit. The maximum liability under this Benefit shall not exceed one hundred percent (100%) of the amount of benefit as stated in the Schedule of Benefits for this Benefit. In no event shall the COMPANY pay for any loss caused by ACCIDENTAL BODILY INJURY which is a consequence of any kind of disease or SICKNESS.

This Benefit is payable in addition to Section C Benefit 11 if Section C Benefit 11 has been specifically elected as indicated in the POLICY INFORMATION PAGE.

If a claim is paid under this Benefit, no other benefits shall be payable to the INSURED PERSON under Section C Benefit 13 for any one (1) event.

If a death claim is paid under this Benefit, no other benefits under Section D Benefit 14 shall be payable.



BENEFIT 13: DOUBLE INDEMNITY ON NATIONAL PUBLIC HOLIDAYS

When by reason of ACCIDENTAL BODILY INJURY the INSURED PERSON suffers death and/or dismemberment due to an ACCIDENT occurring during a NATIONAL PUBLIC HOLIDAY within the PERIOD OF INSURANCE and such death and/or dismemberment is within three hundred and sixty-five (365) days from the date of ACCIDENT during the DOMESTIC TRIP (not applicable for INTERNATIONAL TRIP), WE will pay the amount of benefit according to the Schedule of Indemnities (under Benefit 11 of Part II Section C).

In the event that a series of events shall arise out of the same ACCIDENT, WE shall only pay for one event, that being the greatest amount of indemnity to be payable under this Benefit. The maximum liability under this Benefit shall not exceed one hundred percent (100%) of the amount of benefit as stated in the Schedule of Benefits for this Benefit. In no event shall the COMPANY pay for any loss caused by ACCIDENTAL BODILY INJURY which is a consequence of any kind of disease or SICKNESS.



This Benefit is payable in addition to Section C Benefit 11 if Section C Benefit 11 has been specifically elected as indicated in the POLICY INFORMATION PAGE.

If a claim is paid under this Benefit, no other benefits shall be payable to the INSURED PERSON under Section C Benefit 12 for any one (1) event.

If a death claim is paid under this Benefit, no other benefits under Section D Benefit 14 shall be payable.

SECTION D: COVID-19



BENEFIT 14: DEATH DUE TO COVID-19

If the INSURED PERSON has been diagnosed as a person with laboratory confirmation of infection with the COVID-19 whilst on his/her TRIP within the PERIOD OF INSURANCE, which shall within three hundred and sixty-five (365) days of diagnosis result in death, WE will pay the amount as stated in the Schedule of Benefits.

If a claim is paid under this Benefit, no other benefits under Section C Benefit 11, 12 and 13 shall be payable, and shall forthwith terminate this Policy.



BENEFIT 15: CASH ASSISTANCE UPON HOSPITALISATION DUE TO DIAGNOSED WITH COVID-19

If the INSURED PERSON has been diagnosed as a person with laboratory confirmation of infection with the COVID-19 whilst on his/her TRIP and requires CONFINEMENT in a HOSPITAL or QUARANTINE FACILITIES, WE will pay the INSURED PERSON for each twenty-four (24) complete hours of hospitalisation, up to a maximum of ten (10) days in respect of one (1) CONFINEMENT. Consecutive hospitalisation resulting from COVID-19 shall be considered as one (1) CONFINEMENT. The maximum amount payable shall not exceed the limit as stated in the Schedule of Benefits.



BENEFIT 16: QUARANTINE ALLOWANCE DUE TO COVID-19 WHILE OVERSEAS

If the INSURED PERSON has been diagnosed as a person with laboratory confirmation of infection with the COVID-19 whilst on his/her INTERNATIONAL TRIP and is required to observe mandatory QUARANTINE by any government or relevant health authorities, WE will pay the INSURED PERSON for each twenty-four (24) complete hours of QUARANTINE, up to a maximum of ten (10) days in respect of one (1) QUARANTINE (not applicable for DOMESTIC TRIP). Consecutive QUARANTINE resulting from COVID-19 shall be considered as one (1) QUARANTINE. The maximum amount payable shall not exceed the limit as stated in the Schedule of Benefits. This Benefit is only payable once (1) per TRIP.

Exclusions application to Benefit 16 under Part II Section D :

WE will not pay for Benefit 16:

- (a) If the QUARANTINE period is not within the PERIOD OF INSURANCE;
- (b) If the QUARANTINE orders are mandated by the government for all travellers arriving into the TRAVEL DESTINATION and the INSURED PERSON is not tested positive with COVID-19; and/or
- (c) If the TRIP is a DOMESTIC TRIP.

Exclusions applicable to Part II Section D:

WE will not pay for all Benefits under Section D arising directly or indirectly from:

- (a) PRE-EXISTING CONDITIONS;



- (b) Pre-existing COVID-19 diagnosis and/or pending COVID-19 test results when the TRIP commences;
- (c) INFECTIOUS DISEASES excluding COVID-19, which is declared or notified as an epidemic by the applicable health authority in the covered TRAVEL DESTINATION or a pandemic by the World Health Organisation (WHO) until such declaration or notification is lifted by the WHO or the applicable health authority in the covered TRAVEL DESTINATION;
- (d) If the INSURED PERSON is tested positive with COVID-19 from the COVID-19 polymerase chain reaction (PCR) test or any COVID-19 equivalent test approved by the Malaysian authorities within seventy-two (72) hours prior to the TRIP; and/or
- (e) Any circumstances regarding COVID-19 if the INSURED PERSON is not FULLY VACCINATED.

Conditions applicable to Part II Section D:

- (a) INSURED PERSON is entitled to claim if the COVID-19 tests conducted within the PERIOD OF INSURANCE during the TRIP that lead to positive diagnosis result regardless of the result's release date provided a proof of test date is submitted for claim.

SECTION E: OPTIONAL BENEFIT



BENEFIT 17: TOP-UP MEDICAL EXPENSES FOR COVID-19

This Benefit provides additional limit for the Medical Expenses as per stated in Benefit 7 under Part II Section B in the event the INSURED PERSON has been diagnosed as a person with laboratory confirmation of infection with the COVID-19. WE will pay the REASONABLE AND CUSTOMARY fees, charges or expenses incurred relevant and necessary for the treatment of COVID-19 during the PERIOD OF INSURANCE, up to the limit as stated in the Schedule of Benefits.

This Benefit is payable if this Benefit has been specifically elected as indicated in the POLICY INFORMATION PAGE. For avoidance of doubt, this Benefit is only payable when the limit as per stated in Section B Benefit 7 is exhausted.

PART III

GENERAL EXCLUSIONS

The COMPANY shall not be liable for any payment of any Benefits under Sections of Part II of the Policy or any ENDORSEMENTS, or amendments attached thereto for any loss caused directly or indirectly, in whole or in part by any of the following:

1. any PRE-EXISTING CONDITION;
2. any gradually operating cause, naturally occurring or degenerative process;
3. any injury which shall result in hernia;
4. suicide or self-destruction or any attempt thereat or self-inflicted injury while sane or insane, self-exposure to needless peril (except in an attempt to save human life);
5. pregnancy, childbirth, abortion, or miscarriage, or any complications therefrom (except miscarriage due to ACCIDENTAL BODILY INJURY as a direct result of an ACCIDENT);
6. the INSURED PERSON engaging in a sport in a professional capacity or where the INSURED PERSON would or could earn income or remuneration from engaging in such sport;
7. mental or nervous disorders, treatment of alcoholism, or drug abuse or any other complications arising therefrom or any drug ACCIDENT (other than drugs taken in accordance with treatment prescribed and directly by a REGISTERED MEDICAL PRACTITIONER but not for the treatment of drug addiction);



8. any congenital anomalies and conditions arising out of or resulting therefrom;
9. Acquired Immunodeficiency Syndrome (AIDS) or any complications associated with infection by any Human Immunodeficiency Virus (HIV) (For the purpose of this Policy, the definition of AIDS shall be that used by the World Health Organisation 1987, or any subsequent revision by the World Health Organisation, or any subsequent revision by the World Health Organisation of that definition; infection shall be deemed to have occurred where blood or other relevant test(s) indicate in the opinion of the COMPANY either the presence of any Human Immunodeficiency Virus, Antigens or Antibodies to such a Virus) or any venereal disease;
10. entering, operating, or servicing, riding in or on, ascending or descending from or with any aerial device or conveyance as an pilot/operator or crew member, except while an INSURED PERSON is riding solely as a passenger in an aircraft operated by i) a commercial passenger airline on a regular schedule passenger trip over its established passenger route, ii) any aircraft having a current and valid AIRWORTHINESS CERTIFICATE and iii) any transport type aircraft operated by the Military Air Transport Service (MATS) of United States of America or by the similar authority of the recognized government of any nation anywhere in the world;
11. racing of any kind;
12. engaging in any HAZARDOUS ACTIVITY;
13. the INSURED PERSON is travelling on or against medical advice, or where the TRIP is made solely for the purpose of obtaining treatment, non-emergency medical check-up or routine medical check-up;
14. any event that occurs if this Policy is purchased after the TRIP is commenced;
15. any event that has occurred resulting in the INSURED PERSON not being able to or incapable to travel and such event was made known to the INSURED PERSON or which the INSURED PERSON was aware of at the time he/she took the Policy or when the TRIP was booked (whichever is later);
16. any illegal or unlawful act(s) by the INSURED PERSON or confiscation, seizure, detention, destruction, restriction by customs or other public authorities;
17. violation or attempt of violation of the law or resistance to arrest;
18. any prohibition or regulations by any government;
19. the INSURED PERSON is engaging in any kind of labour work, offshore of diving, mining, oil rigging, or aerial photography, handling explosive, hitchhiking;
20. while the INSURED PERSON is serving in the armed forces of any country or international authority, whether in peace or war;
21. employment on merchant vessels or as a manual labour, naval, military or air force service or operations, regular or temporary, military or police duties; overseas secondment as part of the INSURED PERSON's occupation; manual work in connection with any trade, employment or profession;
22. survey of offshore installations or facilities under construction including survey from aerial conveyance;
23. loss or damage to hired or leased equipment, or testing of any kind of conveyance;
24. any loss, ACCIDENTAL BODILY INJURY, damage or legal liability arising directly or indirectly from travel in, to, or through Belarus, Crimea (including Sevastopol), Cuba, Democratic Republic of Congo, Iran, Mongolia, Nepal and Tibet, North Korea, Russia, Somalia, Sudan, South Sudan, Syria, Ukraine or Zimbabwe;
25. any loss, ACCIDENTAL BODILY INJURY, damage or legal liability sustained directly or indirectly by any terrorist



or member of a terrorist organization, narcotics trafficker, or purveyor of nuclear, chemical or biological weapons using substance of Nuclear, Biological and Chemical;

26. war, declared or undeclared; invasion, act of foreign enemy hostilities or warlike operations, mutiny, civil war, rebellion, revolution, insurrection, conspiracy, military or usurped power, martial law, or state of emergency, or any of the causes which determine the proclamation or maintenance of martial law or state of emergency, seizure, quarantine, or customs regulations or nationalization by or under the order of any government or public or local authority;
27. any loss or expenses in connection with or is contributed by the INSURED PERSON undertaking any TRIP following the warning of any outbreak of disease, intended strike, riot or civil commotion, or impending natural disaster through or by general mass media;
28. ionising radiations or contamination by radioactivity from any irradiated nuclear fuel or from any nuclear waste or from the combustion of nuclear fuel;
29. the radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly, or of its nuclear component;
30. the INSURED PERSON's direct participation in terrorist acts;
31. consequential loss or damage of any kind.

PART IV

GENERAL PROVISIONS

1. THE CONTRACT :

This Policy is issued in consideration of the payment of PREMIUM as specified in the Policy and pursuant to the answers given in YOUR proposal form (or when YOU applied for this insurance) and any other disclosures made by YOU between the time of submission of YOUR proposal form (or when YOU applied for this insurance) and the time this contract is entered into. The answers and any other disclosures given by YOU shall form part of this contract of insurance between YOU and the COMPANY. However, in the event of any pre-contractual misrepresentation made in relation to YOUR answers or in any disclosures given by YOU, only the remedies in Schedule 9 of the Financial Services Act 2013 will apply.

This Policy reflects the terms and conditions of the contract of insurance as agreed between YOU and the COMPANY.

This Policy sets out what YOU are insured for as shown on the Policy and the circumstances where YOU are covered and not covered.

Some words and expressions have been printed out in capital letters because they have been given specific meaning in the Policy. YOU will find their meaning in the Definition.

2. PAYMENT OF PREMIUM – CASH BEFORE COVER :

YOU must pay the PREMIUM before the coverage under this Policy is effective.

3. MODIFICATIONS :

No change in this Policy shall be valid unless approved by US and evidenced by ENDORSEMENT.

4. RENEWAL :

This Policy is non-renewable.



Consumer Insurance Contract

Pursuant to Paragraph 5 of Schedule 9 of the Financial Services Act 2013, if YOU are applying for this Insurance wholly for purposes unrelated to YOUR trade, business or profession, YOU have a duty to take reasonable care not to make a misrepresentation when confirming or amending any information previously disclosed. If YOU are unsure whether a change will affect YOUR Policy cover, please ask the COMPANY.

Failure to take reasonable care in confirming or amending any information previously disclosed may result in avoidance of YOUR contract of insurance, refusal or reduction of YOUR claim(s), change of terms or termination of YOUR contract of insurance.

The above duty of disclosure shall continue until the time YOUR contract is entered into, varied or renewed with the COMPANY.

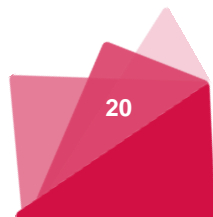
In addition to confirming or amending any information previously disclosed, YOU are required to disclose any other matter that YOU know to be relevant to the COMPANY’s decision in accepting the risks and determining the rates and terms to be applied.

YOU also have a duty to tell the COMPANY immediately if at any time after YOUR contract of insurance has been entered into, varied or renewed with the COMPANY any of the information contained in the renewal notice and/or YOUR previous proposal form is inaccurate or has changed.

5. CLAIMS NOTIFICATION, PROCEDURE AND SETTLEMENT :

- (a) Written notice of any event likely to give rise to a claim should be submitted to the COMPANY as soon as reasonably possible and in any case not later than 30 days of the occurrence causing such claim.
- (b) YOU shall procure and act upon medical or surgical advice as soon as practicable.
- (c) YOU may be required, at the COMPANY expense to undergo further medical examination.
- (d) The COMPANY will only pay the benefits if any medical certificates and other evidence which the COMPANY may require are provided on request at YOUR expenses.
- (e) Proof of loss must be furnished to the COMPANY at the COMPANY’s home office within ninety (90) days after the date of such loss.
- (f) YOU shall provide the following details and supporting documents for each claim:

Type of Claim	What must I do or submit?
Compulsory for all types of claims	(a) Airline ticket, flight itinerary or boarding pass; (b) Copy of Malaysian Identity Card with front and back (for Malaysians); (c) Copy of Passport (for Non-Malaysians); and (d) Proof of INSURED PERSON being FULLY VACCINATED with COVID-19 VACCINATION.





Additional documents required depending on type of claim:	
Travel Cancellation or Loss of Deposits	<ul style="list-style-type: none"> (i) Medical report, death certificate, proof of relationship etc. as the case may be; (ii) Original receipts for payment of the TRIP; (iii) TRIP operator's booking and cancellation/ refund invoices, terms & conditions; (iv) Proof of home address (e.g. water/electricity bill); (v) Newspaper cutting or report from local authorities to confirm the incident (if due to natural disaster, strike, riot or civil commotion of the TRAVEL DESTINATION); (vi) Official document from public authority (if due to witness summons or jury service by INSURED PERSON is required); (vii) Police/ local authorities report to confirm the incident (if INSURED PERSON presence is required due to his/her principal residence damaged from fire, flood, or similar natural disaster).
Travel Curtailment	<ul style="list-style-type: none"> (a) A written confirmation from the attending REGISTERED MEDICAL PRACTITIONER that it is necessary to return home; (b) Medical report, death certificate, proof of relationship etc. as the case may be; (c) Boarding pass to confirm the actual date of arrival back to Malaysia; (d) Original receipts of payment made for the TRIP (e.g. accommodation confirmation receipts etc.); (e) Newspaper cutting or report from local authorities to confirm the incident (if due to HIJACKING, natural disaster, strike, riot or civil commotion of the TRAVEL DESTINATION); (f) Police/ local authorities report to confirm the incident (if INSURED PERSON presence is required due to his/her principal residence damaged from fire, flood, or similar natural disaster).
Travel Delay	<ul style="list-style-type: none"> (a) COMMON CARRIER written confirmation on delay reason & delayed hours; (b) Proof of compensation offer by the COMMON CARRIER; (c) Original receipt for payment of the COMMON CARRIER.
Baggage Delay	<ul style="list-style-type: none"> (a) COMMON CARRIER written confirmation on delay reason & delayed hours/ delayed baggage report; (b) COMMON CARRIER written confirmation on the date and time of baggage delivery; (c) Proof of checked-in baggage.
Loss or Damage of Baggage and Personal Effects	<ul style="list-style-type: none"> (a) Original receipts of all items claimed or credit card statement to support the value of the damaged/ lost items. If not available, please provide the description of the items (brand/model) and the date, place and price of purchase; (b) Police report detailing the circumstances and list of items stolen; (c) If the item(s) is in the custody of third party, i.e. COMMON CARRIER, transporter, hotel etc., obtain official written report from them on the description of incident, their offer and decision for compensation on their responsibility for the loss; (d) Property Irregularity Report that describes the damaged items;
Medical Expenses	<ul style="list-style-type: none"> (a) Medical report from attending REGISTERED MEDICAL PRACTITIONER for any injury, SICKNESS or COVID-19 (where applicable); (b) Original medical bills and receipts for all amount claimed (itemized); (c) Copy of PCR test result or any COVID-19 equivalent test result approved by local authorities (if applicable).
Follow-up Treatment in Malaysia	



Emergency Evacuation and Repatriation	Must contact OUR AUTHORISED SERVICE PROVIDER hotline at 603-2163 4088 to obtain approval in advance. Failure to do so will invalidate a claim for such costs.
Repatriation of Mortal Remains	
Accidental Death and Dismemberment	(a) For death: death certificate, post-mortem report, police report and proof of relationship;
Double Indemnity on Public Conveyance	(b) For dismemberment: medical report, police report, X-ray film/ report, photograph of injury/ amputation, Visual Acuity Report (for vision loss), Audiogram Report (for hearing loss);
Double Indemnity on National Public Holidays	(c) For PUBLIC CONVEYANCE related: proof of carrier ticket (e.g. train/ bus ticket).
Death due to Covid-19	(a) Copy of PCR test result or any COVID-19 equivalent test result approved by local authorities; (b) Death certificate; (c) Post-mortem report; (d) Proof of relationship.
Cash assistance upon hospitalisation due to diagnosed with Covid-19	(a) Copy of PCR test result or any COVID-19 equivalent test result approved by local authorities; (b) HOSPITAL Admission Letter.
Quarantine Allowance due to Covid-19 while overseas	(a) Copy of PCR test result or any COVID-19 equivalent test result approved by local authorities; (b) Written confirmation from overseas HOSPITAL/ authorities confirming the details such as dates and reason(s) for such QUARANTINE.

Please note that WE may request additional information and/or supporting documents when required; YOUR early response will expedite the processing of YOUR claim.

- (g) On payment of the benefits, for which once YOU give the COMPANY a receipt or discharge, the COMPANY liability in that respect will reduce by the sum paid or cease if full benefits have been paid.
- (h) The COMPANY reserves the right to request further medical reports from locally REGISTERED MEDICAL PRACTITIONER if necessary.
- (i) Any foreign bills or documents written in language other than English, Bahasa Melayu and Chinese need to be translated to English by certified translator at INSURED PERSON's own expenses.
- (j) The COMPANY reserves the right to repudiate a claim where the COMPANY is reasonably not satisfied with the evidence available to validate either:
 - i. YOUR identity or
 - ii. The circumstance of the loss.
- (k) In the event of ACCIDENTAL BODILY INJURY or COVID-19 diagnosis resulting in death, the COMPANY shall be entitled to have a post-mortem examination at the COMPANY's expenses.
- (l) INSURED PERSON who is insured with more than one (1) Policy for the same TRIP is only entitled to claim once.

6. MEDICAL EXAMINATION :

The COMPANY shall have the right and authority to examine an INSURED PERSON when and as often as it may reasonably require during the pendency of a claim hereunder and also the right and opportunity to make an autopsy in case of death where it is not forbidden by law.

**7. IMMEDIATE PAYMENT OF INDEMNITIES :**

All indemnities provided in this Policy for loss shall be paid immediately after receipt and approval of due proof of loss.

8. OWNERSHIP OF POLICY :

Unless otherwise expressly provided for by ENDORSEMENT in the Policy, WE shall be entitled to treat YOU as the absolute OWNER of the Policy. We shall not be bound to recognise any equitable or other claim to or interest in the Policy. Receipt of the payment of proceeds payable under the Policy or a benefit by YOU (or by YOUR legal or authorised representative) alone shall be an effective discharge of all of COMPANY obligations and liabilities.

9. TO WHOM INDEMNITIES PAYABLE :

Indemnity for loss of life of the INSURED PERSON is payable to the Nominee if surviving the INSURED PERSON, otherwise to the Estate of the INSURED PERSON. All other indemnities of this insurance are payable to the INSURED PERSON, except under Emergency Medical Evacuation and Repatriation (Benefit 9) and Repatriation of Mortal Remains (Benefit 10) under Part II Section B of the Policy. If any, where benefits shall be paid directly to the AUTHORISED SERVICE PROVIDER as indicated in those Benefits.

10. RIGHT OF NOMINEE :

Consent of the Nominee shall not be required to surrender or assign this insurance cover, or to change of Nominee, or to any other changes in this Policy, unless the said Nominee is a Trustee or where a Trustee has been appointed, in which event the written consent of the Trustee shall be required. No change of any Nominee under this Policy shall bind the COMPANY, unless consent thereto is formally endorsed hereon subject to clause 3 of Part IV of this Policy.

11. LIMITATION OF TIME FOR BRINGING SUIT :

No action at law or in equity shall be brought to recover on this Policy prior to the expiration of sixty (60) days after proof of loss has been filed in accordance with the requirements of this Policy. No such action shall be brought after the expiration of six (6) years after the time written proof of loss is required to be furnished.

12. CONFORMITY WITH LAW :

Any provision of the Policy, which on its ISSUE DATE, is in conflict with the law of the country in which the Policy was delivered or issued for delivery is hereby amended to the minimum requirements of such laws.

13. CUMULATIVE INSURANCES :

If at the time of occurrence of any loss, except in respect of the Personal Accident coverage (Part II Section C) and Covid-19 coverage (Part II Section D), there is other valid and collectible insurance in place, the COMPANY shall be liable only for the excess of the amount of loss, over the amount of such other insurance and any applicable deductible.

14. FITNESS TO TRAVEL :

At the time of effecting this insurance, and prior to the commencement of the TRIP the INSURED PERSON must be fit to travel (including FULLY VACCINATED with COVID-19 VACCINATION) and not be aware of any circumstances which can lead to cancellation or disruption of the particular TRIP, otherwise any claims filed will be invalidated.

**15. RIGHT OF RECOVERY :**

In the event authorisation of payment and/or payment is made by the AUTHORISED SERVICE PROVIDER for a medical claim which is not covered under the Policy, or when the limit of liability of this insurance is exceeded, the COMPANY or the AUTHORISED SERVICE PROVIDER reserves the right to recover the said exceeded sum from the INSURED PERSON.

16. TERMINATION OF INSURANCE :

This Policy shall automatically terminate on the earliest of the following:

- a) The date the Policy is terminated or cancelled; or
- b) The date claim is made on which 100% of the amount of benefit of Benefit 11 or 14 has been paid; or
- c) The date of death of the INSURED PERSON; or
- d) The Policy EXPIRY DATE.

Termination of this Policy shall be without prejudice to any claim arising prior to such termination. The payment to or acceptance of any PREMIUM hereunder subsequent to termination of the Policy shall not create any liability but the COMPANY shall refund any such PREMIUM.

17. CANCELLATION :

- a) YOU have the right to cancel this Policy at any time by giving written notice to the COMPANY stating the intended effective date of cancellation. In the event the intended effective date of cancellation precedes the date of the COMPANY's receipt of the notice, the cancellation shall be effective on the date the said notice is received by the COMPANY. YOU are entitled to a refund of eighty-five percent (85%) of pro-rata PREMIUM equal to the unexpired PERIOD OF INSURANCE if the cancellation is triggered by YOU.
- b) COMPANY may at any time reasonably cancel this Policy by sending (14) fourteen days' notice in writing to YOUR last known address. If no claims have been made and admitted to the COMPANY before the cancellation, the COMPANY may refund the pro-rated premium to YOU for the unexpired PERIOD OF INSURANCE if the cancellation is triggered by the COMPANY.
- c) Cancellation refund is not applicable if:
 - (i) this Policy is paid under monthly PREMIUM payment mode;
 - (ii) the amount to be refunded is less than Ringgit Malaysia ten (RM10) (inclusive of the applicable government TAX);
 - (iii) there has been any claim prior to the cancellation.

18. REGULATORY IMPOSED TAX, CHARGES, FEES ETC:

The PREMIUM to be paid by YOU to the COMPANY under this Policy is exclusive of any TAX. In the event the COMPANY is required by any applicable law to remit any TAX on the PREMIUM paid by YOU, the COMPANY shall calculate and collect from YOU any amount paid or payable under this Policy on account of such TAX. Such amount as calculated by the COMPANY, shall be paid by YOU as additional to and without any deduction or set-off from the PREMIUM payable under this Policy to the COMPANY.

19. SANCTION LIMITATION AND EXCLUSION CLAUSE :

- (1) The COMPANY shall not provide cover for any risk and/or activity and shall not be liable to pay any claim or pay any benefit hereunder to the extent that the provision of such cover, payment of such claim or provision of such benefit would expose the COMPANY to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, United Kingdom or United States of America, or any of its states, and/or any other applicable



economic or trade sanction laws or regulations.

- (2) The COMPANY shall not provide cover for any risk and/or activity and shall not be liable to pay any claim or pay any benefit hereunder to the extent that the provision of such cover, payment of such claim or provision of such benefit is for and/or to any ENTITY and/or RELATIVE/CLOSE ASSOCIATE of any ENTITY.
- (3) The COMPANY may terminate this Policy with immediate effect and shall not thereafter be required to transact any business with YOU in connection with this Policy, including but not limited to, making or receiving any payments under this Policy. The COMPANY shall inform YOU in writing for the reason of such termination.

20. DUTY OF DISCLOSURE BEFORE THIS INSURANCE IS GRANTED :

Where YOU have applied for this Insurance wholly for purposes unrelated to YOUR trade, business or profession, YOU have a duty to take reasonable care not to make a misrepresentation in answering the questions in the proposal form (or when YOU applied for this insurance) that is YOU should have answered the questions fully and accurately. Failure to have taken reasonable care in answering the questions may result in avoidance of YOUR contract of insurance, refusal or reduction of YOUR claim(s), change of terms or termination of YOUR contract of insurance in accordance with the remedies in Schedule 9 of the Financial Services Act 2013. YOU are also required to disclose any other matter that YOU know to be relevant to the COMPANY's decision in accepting the risks and determining the rates and terms to be applied.

YOU also have a duty to tell the COMPANY immediately if at any time after YOUR contract of insurance has been entered into, varied or renewed with the COMPANY any of the information given in the proposal form (or when YOU applied for this insurance) is inaccurate or has changed.

21. DUTY OF DISCLOSURE DURING THIS INSURANCE :

During this Insurance INSURED PERSON is required to immediately inform the COMPANY of any changes in INSURED PERSON's contact details such as phone number, email address or home address or any relevant information that may increase the risk.

The COMPANY may :

- i) require YOU/ INSURED PERSON to pay an additional PREMIUM for the increased risk;
- ii) make changes to the terms and conditions of this POLICY;
- iii) leave the POLICY terms, conditions and PREMIUM unaltered.

YOU will only be covered for any increased risk if agreed in writing by the COMPANY.

22. A DUTY TO COMPLY WITH THE CONDITION :

The COMPANY will only be liable to make any payment under this POLICY if YOU have at all times complied with the terms, provisions, conditions and ENDORSEMENT of this POLICY.

23. GOVERNING LAW :

This POLICY shall be governed by the laws of Malaysia and the Courts of Malaysia shall have the exclusive jurisdiction in respect of any claims arising out of or in relation to this POLICY.

24. COMMUNICATION :

All communication to the COMPANY must be in writing. ENDORSEMENT to this POLICY contract must be issued and signed by the COMPANY.

**25. MISREPRESENTATION / FRAUD :**

The COMPANY may void this POLICY and refuse all claims made in any of the following cases:

- (a) If any claim made shall be fraudulent or exaggerated; or
- (b) If any false declaration or statement shall be made in support of any claim, however, if the misrepresentation was careless or innocent, the COMPANY reserves the right to:
 - (i) void this POLICY and refuse all claims, in which case the COMPANY shall return the PREMIUMs paid without interest. This payment shall be a complete and valid discharge of any liability under this POLICY; or
 - (ii) take any necessary remedies in accordance with the Financial Services Act 2013.

26. NOMINATION :

Pursuant to Paragraph 5(1) of Schedule 10 of the Financial Services Act 2013, a nomination made by a non-Muslim OWNER shall create a trust in favour of the nominee of the policy moneys that is death benefit payable upon the death of the OWNER, if :-

- (a) the nominee is his/her spouse or child; or
- (b) the nominee is his/her parent (if there is no spouse or child living at the time of making the nomination).

A nominee of a Muslim OWNER upon receipt of the policy moneys shall distribute the policy moneys in accordance with Islamic law.

27. DISAPPEARANCE :

If, after the COMPANY has examined all available evidence, the COMPANY is satisfied that the disappearance of INSURED PERSON can be presumed to be due to the INSURED PERSON's death as the result of an ACCIDENTAL BODILY INJURY, COMPANY will pay the accidental death benefit. If at any time after the COMPANY has paid the benefit, INSURED PERSON is found to be living, the payment must be refunded to the COMPANY.

28. COMPLAINT PROCEDURES :

The COMPANY believes YOU deserve a courteous, fair and prompt service. If there is any circumstance when the COMPANY'S service does not meet YOUR expectations, please contact the COMPANY using the appropriate contact details below and provide the POLICY Number/Claim Number and INSURED PERSON'S Name:

1. Firstly with the department or person YOU dealt with the COMPANY on how YOU would like the problem to be solved.
2. Secondly if the problem is not solved to YOUR satisfaction, then make a formal written complaint to the Customer Relations Unit at:

Telephone : 1300 88 1899
Facsimile : +603 2056 2291
Email : my.customer@aia.com
Website : www.aia.com.my
Address : Menara AIA
99 Jalan Ampang
50450 Kuala Lumpur

The COMPANY will acknowledge the complaints via email within five (5) working days, and complaints via correspondences within ten (10) working days, and keep YOU informed of the progress. The COMPANY will do the best to resolve the matter to YOUR satisfaction within fourteen (14) working days or such time period needed, in complex cases, which the COMPANY will keep YOU informed.



3. Thirdly, if there are disputes on Our final decision relating to this POLICY involving the amounts below RM250,000 and subject to the Ombudsman for Financial Services' ("OFS") jurisdiction which is available at www.ofs.org.my, You may refer the dispute to OFS at the address stated below to resolve the dispute within six (6) months from the date of Our final decision.

Chief Executive Officer
Ombudsman for Financial Services
(Formerly known as Financial Mediation Bureau)
Level 14, Main Block, Menara Takaful Malaysia
No. 4, Jalan Sultan Sulaiman, 50000 Kuala Lumpur
Tel: 03-2272 2811
Fax: 03-2272 1577
E-mail: enquiry@ofs.org.my

If the dispute exceeds RM250,000 or if it does not come within OFS's jurisdiction, You or Insured Member may refer to Bank Negara Malaysia for further enquiries at the following address:

Pengarah
Jabatan LINK & Pejabat Wilayah
Bank Negara Malaysia
P.O Box 10922
50929 Kuala Lumpur
Tel: 1-300-88-5465
Fax: 03-2174 1515
E-mail: bnmtelelink@bnm.gov.my

29. PERSONAL DATA PROTECTION ACT 2010 :

By giving personal Information YOU give the COMPANY permission for its use as described below:-

- I. To process YOUR personal data with the intention of entering into the contract of insurance.
- II. YOU consent and allow the COMPANY to retain the data and share the data with the COMPANY service provider namely:
 - a. Registered licensed adjuster,
 - b. Solicitors, and any other professional body(ies) for the purpose of fulfillment of the insurance contract,
 - c. Insurer and reinsurer,
 - d. ISM Insurance Services Malaysia Berhad.
- III. Data Subject (proposer) should be informed of his/her rights to obtain access to and to request correction of his/her personal data.

Notice

In accordance to the provision of the Personal Data Protection Act 2010, YOU may contact the COMPANY for the details of YOUR personal data. Such information will only be granted after verification. YOU may update/correct the data by providing in writing to the COMPANY the request for change.



AIA General Berhad 201001040438 (924363-W)
WhatsApp: 019 629 9660
E-mail: my.aiaonline@aia.com

For 24-Hour Worldwide Travel Assistance Service, contact : **603-2163 4088**
Authorised Service Provider : **Aspire Lifestyle Malaysia**