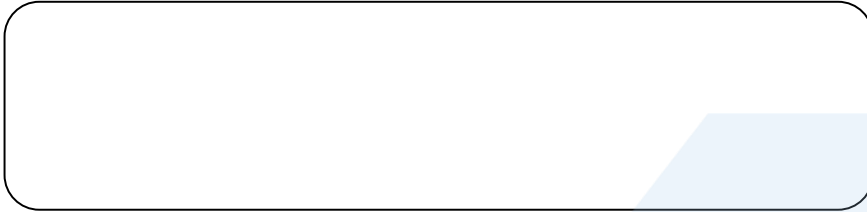




## SMART TRAVELLER INSURANCE

CHARTER PING AN INSURANCE CORPORATION  
Under the Trade Names of AXA Philippines, Philippine AXA or AXA

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### IMPORTANT NOTICE

The Insurance Commission, with offices in Manila, Cebu and Davao, is the government office in charge of the enforcement of all laws related to insurance and has supervision over insurance providers and intermediaries. It is ready at all times to assist the general public in matters pertaining to insurance. For any inquiries or complaints please contact the Public Assistance and Mediation Division (PAMeD) of the Insurance Commission at 1071 United Nations Avenue, Manila with telephone numbers +632-5238461 to 70 and email address [publicassistance@insurance.gov.ph](mailto:publicassistance@insurance.gov.ph). The official website of the Insurance Commission is [www.insurance.gov.ph](http://www.insurance.gov.ph).

Documentary Stamps to the value stated inside have been affixed and properly cancelled on office copy of this Policy.

In consideration of the statements in the enrolment method used, which shall be the basis of this contract and whose original proof is filed with the Charter Ping An Insurance Corporation (hereinafter called “**We/ Our/ Us**”) and made a part of this Policy, the payment of premium in advance and subject to all the exclusions, provisions and other terms of this Policy, Charter Ping An Insurance Corporation hereby insures the persons named (hereinafter called the “**You/ Your/ Insured Person**”) against loss indicated as covered in the **Policy Schedule**.

In witness whereof, Charter Ping An Insurance Corporation has caused this Policy to be executed and commenced on the Effective Date stated in the **Policy Schedule**, provided that no insurance shall be in force unless the **Policy Schedule** is signed by an authorized representative of Charter Ping An Insurance Corporation.

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## SUMMARY OF BENEFITS

The following provides an overview of all the benefits and their respective **Sum Insured**. For details on how each benefit be available, refer to the Description of Benefits.

### Legends

Domestic	A <b>Trip</b> taken within the Philippines
International	A <b>Trip</b> with destination outside the Philippines
Pre-Trip	The period before <b>You</b> leave for <b>Your Trip</b>
<b>On-Trip</b>	The period <b>You</b> are travelling during <b>Your Trip</b>
Post-Trip	The period after <b>You</b> have completed <b>Your Trip</b>
☑	Means <b>You</b> are covered for the period indicated (Pre-Trip, <b>On-Trip</b> , Post-Trip)

Core Benefits (in PHP)						Benefits applicable		
SECTION 1 – PERSONAL ACCIDENT BENEFITS		Domestic	International			Pre-Trip	On-Trip	Post-Trip
			Essential	Classic	Elite			
1 (a)	Accidental Death and Permanent Disablement	Up to 500,000 (Adult)	Up to 1,000,000 (Adult)	Up to 2,500,000 (Adult)	Up to 5,000,000 (Adult)		☑	
		Up to 250,000 (Child)	Up to 500,000 (Child)	Up to 1,250,000 (Child)	Up to 2,500,000 (Child)			
1 (b)	Burial Assistance	Up to 5,000	Up to 5,000	Up to 10,000	Up to 20,000		☑	
SECTION 2 – TRAVEL INCONVENIENCES BENEFITS		Domestic	International			Pre-Trip	On-Trip	Post-Trip
			Essential	Classic	Elite			
2 (a) i	Trip Cancellation	Up to 20,000	Up to 50,000	Up to 100,000	Up to 200,000	☑		
2 (a) ii	Trip Postponement	Up to 20,000	Up to 50,000	Up to 100,000	Up to 200,000	☑		
2 (b)	Trip Curtailment	Up to 20,000	Up to 50,000	Up to 100,000	Up to 200,000		☑	
2 (c)	Trip Delay	Up to 5,000 (500 per 6 hours)	Up to 10,000 (1,000 per 6 hours)	Up to 20,000 (2,000 per 6 hours)	Up to 50,000 (5,000 per 6 hours)	☑		
2 (d)	Baggage Delay	Up to 5,000 (500 per 6 hours)	Up to 10,000 (1,000 per 6 hours)	Up to 20,000 (2,000 per 6 hours)	Up to 50,000 (5,000 per 6 hours)		☑	

2 (e)	Loss / Damage to Baggage	Up to 10,000 (2,500 per item)  Deductible 500 per claim	Up to 20,000 (5,000 per item)  Deductible 500 per claim	Up to 30,000 (7,500 per item)  Deductible 500 per claim	Up to 50,000 (10,000 per item)  Deductible 500 per claim		☑		
2 (f)	Loss of Travel Documents	Not Covered	Replacement cost: Up to 5,000  Other expenses: Up to 10,000	Replacement cost: Up to 7,500  Other expenses: Up to 15,000	Replacement cost: Up to 10,000  Other expenses: Up to 20,000		☑		
2 (g)	Hijacking	Up to 10,000 (1,000 per 12 hours)	Up to 10,000 (1,000 per 12 hours)	Up to 20,000 (2,000 per 12 hours)	Up to 50,000 (5,000 per 12 hours)		☑		
2 (h)	Kidnap and Hostage	Up to 10,000 (1,000 per 24 hours)	Up to 10,000 (1,000 per 24 hours)	Up to 20,000 (2,000 per 24 hours)	Up to 50,000 (5,000 per 24 hours)		☑		
<b>SECTION 3 – MEDICAL AND EVACUATION EXPENSES</b>		<b>Domestic</b>	<b>International</b>			<b>Pre-Trip</b>	<b>On-Trip</b>	<b>Post-Trip</b>	
			<b>Essential</b>	<b>Classic</b>	<b>Elite</b>				
3 (a) i	Emergency Medical Expense due to Accident	due to Accident (excluding Dental)	Up to 250,000  Deductible 2,000	Up to 500,000  Deductible 5,000	Up to 2,500,000  Deductible 5,000	Up to 3,500,000  Deductible 5,000		☑	☑
		Dental due to Accident	Not Covered	Up to 20,000  Deductible 5,000	Up to 100,000  Deductible 5,000	Up to 200,000  Deductible 5,000		☑	☑
3 (a) ii	Emergency Medical Expense due to Illness	Up to 25,000  Deductible 2,000	Up to 500,000  Deductible 5,000	Up to 2,500,000  Deductible 5,000	Up to 3,500,000  Deductible 5,000		☑	☑	
3 (a) iii	Hospital Allowance	Up to 10,000  1,000 per day min of 3 days	Up to 30,000  1,000 per day min of 3 days	Up to 60,000  2,000 per day min of 3 days	Up to 150,000  5,000 per day min of 3 days		☑		
3 (b)	Hospital Visit Benefit (If <b>Hospitalized</b> for more than 5 consecutive days)	Up to 10,000	Up to 50,000	Up to 100,000	Up to 200,000		☑		

3 (c)	Emergency Medical Evacuation and Repatriation	Up to 50,000	Covered	Covered	Covered		☑	
3 (d)	Repatriation of Mortal Remains	Up to 50,000	Covered	Covered	Covered		☑	
3 (e)	Compassionate Visit Benefit	Up to 10,000	Up to 50,000	Up to 100,000	Up to 200,000		☑	
<b>SECTION 4 – PERSONAL LIABILITY</b>		<b>Domestic</b>	<b>International</b>			<b>Pre-Trip</b>	<b>On-Trip</b>	<b>Post-Trip</b>
			<b>Essential</b>	<b>Classic</b>	<b>Elite</b>			
		Up to 500,000	Up to 500,000	Up to 1,000,000	Up to 2,000,000		☑	
<b>SECTION 5 – 24-HOUR TRAVEL ASSISTANCE</b>		<b>Domestic</b>	<b>International</b>			<b>Pre-Trip</b>	<b>On-Trip</b>	<b>Post-Trip</b>
			<b>Essential</b>	<b>Classic</b>	<b>Elite</b>			
		Covered	Covered	Covered	Covered	☑	☑	☑

SPECIMEN COPY

## POLICY DEFINITIONS

The words listed below have these special meanings when they appear in this Policy with the first letter capitalized.

<b>Accident or Accidental</b>	A sudden, unforeseen and fortuitous event which occurs during the <b>Period of Insurance</b> which solely results in <b>Injury</b> and which is not caused by <b>Illness</b> or naturally occurring medical conditions; or loss of or damage to property, whichever applies.
<b>Adult</b>	Any person who is at least 18 years old during the policy period.
<b>Authorized Assistance Partner</b>	The assistance company appointed by <b>Us</b> as stated in the <b>Policy Schedule</b> .
<b>Bodily Injury</b>	<b>Injury</b> or death suffered by the <b>Insured Person</b> caused solely by <b>Accident</b> .
<b>Child(ren)</b>	An unmarried and unemployed person who is below 18 years old.
<b>Civil War</b>	Armed opposition between two or more parties belonging to the same country where the opposing parties are of different ethnic, religious or ideological groups.
<b>Compulsory quarantine</b>	Apprehension, detention or surveillance for the purpose of preventing the introduction, transmission or spread of such public health emergencies of international concern.
<b>Dental Treatment</b>	Treatment that is medically necessary to restore sound and natural teeth due solely to an <b>Accident</b> and is carried out by a qualified and licensed dentist.
<b>Doctor</b>	A person legally qualified by a medical degree in western medicine who is licensed to provide medical treatment and practicing within the scope of his license according to the laws of the country in which such practice is maintained. The <b>Doctor</b> cannot be <b>You</b> , <b>Your</b> business partner or agent, <b>Your</b> employer or employee, <b>Your Travel Companion</b> or a person related to <b>You</b> by blood, marriage, or adoption. Any reference to " <b>Doctor</b> " in this Policy shall mean, wherever appropriate, a general practitioner and / or specialist.
<b>Emergency</b>	Refers to a sudden, unexpected acute medical condition which constitutes a serious or life-threatening <b>Emergency</b> which requires immediate surgical or medical attention to avoid death or permanent and irreversible total loss of function.
<b>Endorsement</b>	An authorized amendment to the terms of <b>Your</b> Policy.
<b>Epidemic</b>	Any contagious disease outbreak which is classified as such or pandemic by the World Health Organization or Department of Health of the Philippines.
<b>Extreme Sports</b>	Any sports activity that presents a high level of inherent danger (that is, involving exceptional speed and height, high level of expertise, exceptional physical exertion or highly specialized gear or stunts) including but not limited to big wave surfing, canoeing down rapids, cliff jumping, horse jumping, racing or motor rallies, off-piste skiing, potholing, ultra-marathons, biathlons, triathlons, and stunt riding. This does not include sporting activities that are open to the general public without restriction (other than height or general health or fitness warnings) and which are provided by recognized local tour operators but always providing that <b>You</b> are participating under the supervision of qualified guides.
<b>Hijack</b>	Changing the course or destination of an aircraft, or to seize or usurp the control thereof, while it is <b>On-Trip</b> .
<b>Hospital</b>	Refers to any establishment which is licensed as a medical or surgical <b>Hospital</b> or provider in the country where it operates and which is recognized by <b>Us</b> and it meets all the following requirements: <ul style="list-style-type: none"> <li>• it operates primarily for the reception, care and treatment of sick, ailing, or injured persons as in-patients;</li> <li>• it provides 24 hours a day nursing service by nurses;</li> <li>• it has a staff of one or more licensed medical practitioners available at all times;</li> <li>• it provides organized facilities for diagnosis and major surgical facilities;</li> <li>• it is not primarily a nursing home, rest home, convalescent home or similar establishment, geriatric ward, an institution for treatment of substance abuse, such as, but not limited to, alcoholic or drug rehabilitation or similar purposes.</li> </ul>

<b>Hospitalized</b>	Being confined in a <b>Hospital</b> as a registered in-patient under the care of a <b>Doctor</b> because of medical necessity (and not merely for any form of nursing, convalescence, rehabilitation or extended care). One day of being <b>Hospitalized</b> means a continuous 24-hour period and for which room and board have been charged.
<b>Illness</b>	Worsening of physical health for which <b>You</b> need medical treatment by a <b>Doctor</b> , commencing and manifesting itself while travelling and within the <b>Period of Insurance</b> and shall exclude any <b>Pre-Existing Medical Condition</b> .
<b>Injury</b>	Damage or harm caused to the body by an external force sustained during the <b>Period of Insurance</b> and which is caused solely by an <b>Accident</b> .
<b>Kidnap and Hostage</b>	An event of kidnapping or detention of another, or in any other manner deprivation of his liberty. This includes kidnapping for ransom.
<b>Loss of Hearing</b>	Total and irrecoverable <b>Loss of Hearing</b> which is beyond the remedy by surgical or other treatment.
<b>Loss of Limb</b>	Complete severance of, or irrecoverable loss of use of, hand at or above the wrist or a foot at or above the ankle.
<b>Loss of Sight</b>	Total and irrecoverable <b>Loss of Sight</b> beyond remedy by surgical or other treatment.
<b>Loss of Speech</b>	The disability in articulating any three of the four sounds which contribute to the speech such as the labial sounds, the alveolar sounds, the palatal sounds and the velar sounds or total loss of vocal cord or damage of speech center in the brain resulting in aphasia.
<b>Medical Expenses</b>	<p>a. Expenses necessarily and reasonably incurred for medical treatment of <b>Bodily Injury</b> or <b>Illness</b> covered under this Policy; or</p> <p>b. Medical equipment and aids (such as prostheses, crutches), prescribed by the attending <b>Doctor</b>.</p> <p>Any treatment by a specialist must be referred by the attending <b>Doctor</b> and shall not exceed the usual level of charges for similar treatment or medical supplies in the location where the expenses are incurred had this insurance not existed.</p>
<b>Money</b>	Legal tender currency notes.
<b>Natural Disaster</b>	Any event or force of nature that has catastrophic consequences such as avalanche, earthquake, flood, forest fire, hurricane, lightning, tornado, tsunami, and volcanic eruption.
<b>On-Trip</b>	<p>This refers to the period during which <b>You</b> are travelling from <b>Your Residence</b> to the <b>Travel Destination</b> and back in case of return <b>Trip</b>:</p> <ul style="list-style-type: none"> <li>• Commences from the <b>Time You</b> leave <b>Your</b> place of <b>Residence</b> or work in the Philippines, but not more than three (3) hours prior to <b>Your</b> scheduled <b>Time</b> of departure to the intended destination; and</li> <li>• Ceases on whichever of the following occurs first: <ul style="list-style-type: none"> <li>a. Three (3) hours after <b>Your</b> arrival at the terminal of <b>Your</b> last <b>Public Transport</b>, as indicated in <b>Your Trip</b> itinerary;</li> <li>b. Expiry date of the <b>Period of Insurance</b> as shown in the <b>Policy Schedule</b>;</li> <li>c. <b>Your</b> return to <b>Your Residence</b> or place of work in the Philippines.</li> </ul> </li> </ul>
<b>Period of Insurance</b>	The policy period as specified in the <b>Policy Schedule</b> . 'From' is the Effective Date, while 'To' is the Expiry Date.
<b>Permanent Disablement</b>	Is an uninterrupted disability for at least 6 months which prevents <b>You</b> from engaging in any gainful occupation, employment or business, or if in the opinion of the medical examiner appointed by <b>Us</b> , the disability is deemed permanent.
<b>Policy Schedule</b>	An outline that indicates <b>Your</b> personal details and schedule of benefits provided in this Policy; the electronic confirmation of this Policy.
<b>Pre-Existing Medical Condition</b>	<p>Any <b>Injury</b> or <b>Illness</b> which:</p> <ol style="list-style-type: none"> <li>1. <b>You</b> have received medical treatment, diagnosis, consultation or prescribed drugs within 182 days prior to the commencement of <b>Your Trip</b>; or</li> <li>2. Symptoms or manifestations have existed, whether treatment was actually received within 182 days prior to the commencement of <b>Your Trip</b>; or</li> <li>3. A reasonable person in the circumstances would be expected to be aware of within 182 days prior to the commencement of <b>Your Trip</b>.</li> </ol>

<b>Public Place</b>	Any place to which the public has access to (e.g. shops, airports, train stations, bus stations, streets, hotel foyers and grounds, restaurants, beaches, and public toilets).
<b>Public Transport</b>	Any conveyance by air, land, or sea that has fixed and established routes and is operated under license by the respective country for the transportation of fare paying passengers. This excludes rental vehicles, taxis, and all modes of transportation that are chartered or arranged as part of a tour.
<b>Residence</b>	The residence address stated on the application for this insurance.
<b>Residing Location</b>	Any location within the 100 km radius from <b>Your Residence</b> .
<b>Robbery</b>	Taking of any personal property belonging to another, by means of violence against or intimidation of any person or using force upon anything.
<b>Scheduled Flight</b>	Commercial flights scheduled by <b>Public Transport</b> .
<b>Selected Plan</b>	The choice of plan that <b>You</b> or <b>Your</b> representative made at the <b>Time</b> of application as indicated in the <b>Policy Schedule</b> .
<b>Serious Injury or Serious Illness</b>	<ol style="list-style-type: none"> <li>When applied to <b>You</b>, refers to any <b>Injury</b> or <b>Illness</b> that resulted to confinement or admission to a <b>Hospital</b> as a registered patient and is certified by a <b>Doctor</b> that <b>You</b> are unfit to continue with <b>Your Trip</b>.</li> <li>When applied to a family member, it refers to any <b>Injury</b> or <b>Illness</b> that is certified as being life threatening and requires immediate medical treatment by a <b>Doctor</b>.</li> </ol>
<b>Strike, Riot or Civil Commotion</b>	Disturbance of public peace with the presence of violence or threats of violence created by a gathering of civilians (organized or unorganized) usually against a governing body or the policies thereof and including any action of government authority to suppress such gathering.
<b>Sum Insured</b>	The maximum limit that the relevant Section will pay as stated under the schedule of benefits, based on the <b>Selected Plan</b> shown on <b>Your Policy Schedule</b> .
<b>Theft</b>	Taking of personal property of another without the latter's consent without any violence or intimidation.
<b>Time</b>	Any reference to Philippine Standard Time or date.
<b>Travel Companion</b>	The person who has a travel reservation or confirmation to accompany <b>You</b> on the entire <b>Trip</b> . This excludes a tour leader who is travelling together as part of a tour group and receiving remuneration in payment or in kind.
<b>Travel Destination</b>	The place to which <b>You</b> are travelling as specified in <b>Your Trip</b> itinerary, which is located outside <b>Your Residing Location</b> , but within the geographical zone that <b>You</b> or <b>Your</b> representative have chosen at <b>Time</b> of application.
<b>Travel Documents</b>	Passport, visa and / or travel tickets which is required during <b>Your Trip</b> .
<b>Trip</b>	The period between the Effective Date and Expiry Date as specified in the <b>Policy Schedule</b> .
<b>Trip Disruption Cause</b>	<p>Any of the following causes:</p> <ol style="list-style-type: none"> <li>Unexpected <b>Death, Serious Injury or Serious Illness</b> occurring to <b>You, Your</b> family member or <b>Travel Companion</b>;</li> <li>Unexpected outbreak of <b>Strike, Riot, or Civil Commotion</b> at the planned destination;</li> <li>Sudden invitation by the court of law to serve as a witness that is not made known to <b>You</b> prior to the booking of the <b>Trip</b>;</li> <li>Serious damage to <b>Your Residence</b> in the Philippines from fire or <b>Natural Disaster</b> occurring within one (1) week before the commencement of the <b>Trip</b> which requires <b>Your</b> presence on the premises;</li> <li>An <b>Epidemic</b> or <b>Natural Disaster</b> at the planned destination which prevents <b>You</b> from proceeding with the <b>Trip</b>.</li> </ol>
<b>We/ Our/ Us</b>	Charter Ping An Insurance Corporation
<b>You/ Your/ Insured Person</b>	The person(s) insured and named in the <b>Policy Schedule</b> .



## ELIGIBILITY AND SCOPE OF COVERAGE

### Eligibility of Cover:

1. **You** are eligible for an **Adult** cover under this Policy if:
  - a. **You** hold a valid Philippine identification document such as but not limited to Birth Certificate, Employment Pass, Work Permit, Long Term Visit Pass, Dependent Pass or Student Pass; and
  - b. **You** are at least 18 years old but not more than 70 years old on the effective date of the Policy.
2. **You** are eligible for a **Child** cover under this Policy if:
  - a. **You** hold a valid Philippine identification document such as but not limited to Birth Certificate, Long Term Visit Pass, Dependent Pass or Student Pass; and
  - b. **You** are below 18 years old on the effective date of the Policy.
3. For any **Child**, the application must be made in the name of a parent or an **Adult** authorized by the parent. The benefit limits under '**Child** Cover' will apply.

### Single Trip:

Maximum duration per **Trip** is 182 days.

### Annual Multi-Trip:

1. Any **Adult** insured under the same Policy can travel separately. Any of the **Children** covered must be accompanied by a covered **Adult** for each **Trip**.
2. There is no limit on the number of **Trips** that **You** may make per policy year to the selected geographical zone as long as each **Trip** does not exceed 92 days within the **Period of Insurance**.

### For this Policy to be effective:

1. **You** must purchase the Policy in the Philippines; and
2. The original point of departure of **Your Trip** must be from the **Philippines**.

**The Period of Insurance under this Policy will be automatically extended without any additional premium for:**

1. Up to 30 days if **You** are **Hospitalized** (or placed under **Compulsory quarantine**) during **Your Trip** upon the written advice of a **Doctor**.
2. Up to 72 hours if the **Public Transport** in which **You** are travelling in is unavoidably delayed through no fault of **Yours** and results in **You** not completing **Your Trip** when the **Period of Insurance** expires.

## DESCRIPTION OF BENEFITS

### SECTION 1 – PERSONAL ACCIDENT BENEFITS

1 (a) ACCIDENTAL DEATH AND PERMANENT DISABLEMENT	Domestic	International			Pre-Trip	On-Trip	Post-Trip																								
		Essential	Classic	Elite																											
		✓	✓	✓	✓	✓																									
When We will pay	<p>If <b>You</b> suffer death or <b>Permanent Disablement</b> arising from an <b>Accident</b> while <b>On-Trip</b>.</p> <p>The benefits are payable provided that:</p> <ol style="list-style-type: none"> <li><b>Accidental</b> death occurs within 180 days from the date of <b>Accident</b>;</li> <li><b>Permanent Disablement</b> occurs within 365 days from the date of <b>Accident</b>;</li> <li>The <b>Permanent Disablement</b> is listed in the scale of compensation table.</li> </ol> <p>The benefit payable under <b>Accidental</b> death will be reduced by any benefit already paid under <b>Permanent Disablement</b> in respect of the same <b>Injury</b>.</p> <p><b>Our</b> maximum liability is 100% of the specified limit and <b>We</b> shall have no further liability under the Policy in respect of any <b>Injury</b> sustained thereafter.</p> <p>If the <b>Public Transport</b> in which <b>You</b> are traveling in sank, wrecked or disappeared, <b>We</b> will presume that <b>You</b> suffered death resulting from <b>Injury</b> at the <b>Time</b> of such sinking, wrecking or disappearance if <b>Your</b> body has not been found within 365 days from that date. If at any time after settlement of claims <b>You</b> were found to be alive, all amounts paid by <b>Us</b> will be refunded.</p>																														
What We will pay	<p><b>We</b> will pay the relevant percentage as set out in the scale of compensation below, up to the specified limit applicable to the <b>Selected Plan</b>.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;">Scale of Compensation</th> <th style="text-align: center;">% of specified limit under this benefit</th> </tr> </thead> <tbody> <tr> <td>1. <b>Accidental</b> Death</td> <td style="text-align: center;">100%</td> </tr> <tr> <td>2. Permanent Total Disablement</td> <td style="text-align: center;">100%</td> </tr> <tr> <td>3. Total and <b>Permanent Disablement</b> of:</td> <td></td> </tr> <tr> <td>    (a) Total <b>Loss of</b> (two) <b>Limbs</b></td> <td style="text-align: center;">100%</td> </tr> <tr> <td>    (b) Total <b>Loss of</b> (one) <b>Limb</b></td> <td style="text-align: center;">50%</td> </tr> <tr> <td>    (c) Total <b>Loss of Sight</b> in both eyes</td> <td style="text-align: center;">100%</td> </tr> <tr> <td>    (d) Total <b>Loss of Sight</b> in one eye</td> <td style="text-align: center;">50%</td> </tr> <tr> <td>    (e) Total <b>Loss of Speech</b> and <b>Hearing</b></td> <td style="text-align: center;">100%</td> </tr> <tr> <td>    (f) Total <b>Loss of Speech</b></td> <td style="text-align: center;">50%</td> </tr> <tr> <td>    (g) Total <b>Loss of Hearing</b> in both ears</td> <td style="text-align: center;">50%</td> </tr> <tr> <td>    (h) Total <b>Loss of Hearing</b> in one ear</td> <td style="text-align: center;">15%</td> </tr> </tbody> </table>							Scale of Compensation	% of specified limit under this benefit	1. <b>Accidental</b> Death	100%	2. Permanent Total Disablement	100%	3. Total and <b>Permanent Disablement</b> of:		(a) Total <b>Loss of</b> (two) <b>Limbs</b>	100%	(b) Total <b>Loss of</b> (one) <b>Limb</b>	50%	(c) Total <b>Loss of Sight</b> in both eyes	100%	(d) Total <b>Loss of Sight</b> in one eye	50%	(e) Total <b>Loss of Speech</b> and <b>Hearing</b>	100%	(f) Total <b>Loss of Speech</b>	50%	(g) Total <b>Loss of Hearing</b> in both ears	50%	(h) Total <b>Loss of Hearing</b> in one ear	15%
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What is not covered	<p>In addition to the Specific Provisions and Exclusions (page 21), any one eye, ear or limb that is impaired before the <b>Trip</b> will not be paid based on the total loss percentage indicated in the scale of compensation in the "What We will pay" section.</p>																														
1 (b) BURIAL ASSISTANCE	Domestic	International			Pre-Trip	On-Trip	Post-Trip																								
		Essential	Classic	Elite																											
		✓	✓	✓	✓	✓																									
When We will Pay	<p>If <b>You</b> suffer death while <b>On-Trip</b> as result of:</p> <ol style="list-style-type: none"> <li>An <b>Injury</b> during the <b>Trip</b>;</li> <li>An <b>Illness</b> during or after having received medical treatment in a <b>Hospital</b> while <b>On-Trip</b>.</li> </ol>																														
What We will Pay	<p><b>We</b> will pay the maximum benefit amount for burial expenses as financial assistance to <b>Your</b> bereaved family.</p>																														

What is not covered	Refer to General Exclusions (page 20)
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## SECTION 2 – TRAVEL INCONVENIENCES BENEFITS

2 (a) TRIP CANCELLATION / POSTPONEMENT	Domestic	International			Pre-Trip	On-Trip	Post-Trip
		Essential	Classic	Elite			
		☑	☑	☑	☑		
When We will Pay	If <b>You</b> have to unavoidably cancel or postpone <b>Your Trip</b> within 30 days before the commencement of the <b>Trip</b> as a direct result of <b>Trip Disruption Cause</b> .						
What We will Pay	<p><b>We</b> will reimburse <b>You</b>, up to the specified limit applicable to the <b>Selected Plan</b> for the “Cancellation Expenses” or “Postponement Expenses”.</p> <p>“Cancellation Expenses” are the non-refundable portion of the tour, travel and accommodation expenses, tickets or booking activities such as theme park, theater show, concerts, train ticket, and others paid in advance due to the cancellation of the <b>Trip</b> which are not recoverable from any other source.</p> <p>“Postponement Expenses” are the reasonable administrative charges incurred to the postponement of the <b>Trip</b>.</p> <p>For any same event, <b>We</b> will only pay the highest claim from one of these Sections:</p> <ol style="list-style-type: none"> <li>Section 2 (a) i – Trip Cancellation</li> <li>Section 2 (a) ii – Trip Postponement</li> </ol>						
What is not covered	<ol style="list-style-type: none"> <li>Any event mentioned above which is publicly known at the <b>Time You</b> book <b>Your Trip</b> or purchased this Policy, whichever occurs later.</li> <li>This Policy which was purchased less than three (3) days before the commencement of the <b>Trip</b>.</li> <li>The <b>Trip</b> which was cancelled / postponed before the purchase of this Policy.</li> <li>For loss of used frequent flyer rewards points or holiday points that <b>You</b> have used, in part or full, to pay for any part of the <b>Trip</b>.</li> <li>Any refund <b>You</b> receive from the companies <b>You</b> have paid in advance.</li> </ol>						
2 (b) TRIP CURTAILMENT	Domestic	International			Pre-Trip	On-Trip	Post-Trip
		Essential	Classic	Elite			
		☑	☑	☑	☑	☑	
When We will Pay	If <b>You</b> have to unavoidably curtail or alter the itinerary of any part of the planned <b>Trip</b> after it has commenced as the direct result of <b>Trip Disruption Cause</b> .						
What We will Pay	<p><b>We</b> will reimburse <b>You</b>, up to the specified limit applicable to the <b>Selected Plan</b> for:</p> <ol style="list-style-type: none"> <li>Any pre-paid and unutilized travel fare and/or accommodation costs that is non-refundable. The reimbursement will be pro-rated for each complete 24 hours of the unused <b>Trip</b>; or</li> <li>Any additional accommodation (but excluding cost of meals, room service) and direct economy fare for air, rail or sea travel that are necessarily incurred to extend <b>Your</b> stay at the same or alternative location. The accommodation provided shall be similar or equivalent to the room type that <b>You</b> have originally stayed in.</li> </ol> <p>“Curtail/Curtailment” shall mean abandonment of the <b>Trip</b> as shown on the booking invoice and/or shortening of the <b>Trip</b> and returning to the departing place.</p> <p>For the same event, <b>We</b> will only pay the highest claim from one of these Sections:</p> <ol style="list-style-type: none"> <li>Section 2 (b) – Trip Curtailment</li> <li>Section 2 (c) – Trip Delay</li> </ol>						

What You must do	Refer to Claims Procedure (page 22)						
What is not covered	Refer to General Exclusions (page 20)						
2 (c) TRIP DELAY	Domestic	International			Pre-Trip	On-Trip	Post-Trip
		Essential	Classic	Elite	☑		
	☑	☑	☑	☑			
When We will pay	If <b>Your</b> scheduled departure of a <b>Public Transport</b> is delayed for at least six (6) consecutive hours from the original scheduled <b>Time</b> due to inclement weather, equipment failure or <b>Strike</b> or <b>Hijack</b> or other industrial action by any employee of <b>Public Transport</b> .						
What We will pay	The delay shall be calculated from the original scheduled departure <b>Time</b> of the <b>Public Transport</b> until the commencement of the first available schedule offered by the <b>Public Transport</b> operator or the alternative transportation <b>You</b> travel in, whichever is earliest.  If the <b>Trip</b> delay occurs from <b>Your Residing Location</b> , <b>We</b> will pay <b>You</b> for a maximum of six (6) hours up to the specified limit applicable to the <b>Selected Plan</b> .						
What You must do	Refer to Claims Procedure (page 22)						
What is not covered	In addition to the General Exclusions (page 20), <b>We</b> will also not pay any claims under this section due to the following: 1. <b>Your</b> failure to check in according to the itinerary or ticket; 2. <b>Your</b> failure to board the next available scheduled trip offered by the <b>Public Transport</b> ; 3. <b>Your</b> failure to obtain written confirmation from the <b>Public Transport</b> or its handling agents of the number of hours delayed and the reason for such delay; 4. Airport closure, airport curfew, <b>Strike</b> , air traffic flow management restrictions in existence on the date of the <b>Scheduled Flight</b> ; 5. <b>Your</b> late arrival at an airport (except for late arrival caused by a <b>Strike</b> ); 6. Any rescheduling or delay which <b>You</b> have been made aware of 24 hours prior to the first scheduled departure <b>Time</b> in the travel itinerary; 7. Cancellation or rescheduling of the scheduled departure <b>Time</b> (unless due to <b>Natural Disaster</b> or equipment failure of <b>Public Transport</b> ); 8. If the Policy was purchased less than three (3) hours before the commencement of the <b>Trip</b> ; 9. <b>Trips</b> outside the Philippines via land or sea conveyance.						
2 (d) BAGGAGE DELAY	Domestic	International			Pre-Trip	On-Trip	Post-Trip
		Essential	Classic	Elite		☑	
	☑	☑	☑	☑			
When We will pay	In the event that <b>Your</b> baggage arrived late from the <b>Time</b> of <b>Your</b> arrival at <b>Your Travel Destination</b> due to the fault of <b>Public Transport</b> during the <b>Trip</b> , <b>We</b> will pay <b>You</b> , according to the <b>Selected Plan</b> .						
What We will Pay	<b>We</b> will pay <b>You</b> up to the amount specified under the schedule of benefits in the <b>Policy Schedule</b> for every six (6) continuous hours of delay of the baggage.  For the same event, <b>We</b> will only pay the highest claim from one of these Sections: a. Section 2 (d) – Baggage Delay b. Section 2 (e) – Loss / Damage to Baggage						
What You must do	Refer to Claims Procedure (page 22)						
What is not covered	In addition to the General Exclusions (page 20), <b>We</b> will not pay when the baggage delay occurs during <b>Your</b> return to <b>Your</b> point of origin as indicated in <b>Your Trip</b> itinerary.						

2 (e) LOSS / DAMAGE TO BAGGAGE	Domestic	International			Pre-Trip	On-Trip	Post-Trip
		Essential	Classic	Elite			
	☑	☑	☑	☑		☑	
When We will pay	In the event of loss of or damage to <b>Your</b> baggage during the <b>Trip</b> .						
What We will pay	<p><b>We</b> will pay <b>You</b> up to the specified limit applicable to the <b>Selected Plan</b> based on the following:</p> <ol style="list-style-type: none"> <li>Repair or replace the damaged item/s; or</li> <li>Replace the lost item/s</li> </ol> <p>provided that the articles must be owned by <b>You</b> or entrusted to <b>You</b>.</p> <p><b>Our</b> compensation to <b>You</b> is subject to:</p> <ol style="list-style-type: none"> <li><b>Our</b> discretion on whether to repair or replace the lost or damaged item/s;</li> <li>Wear and tear and depreciation;</li> <li>A maximum limit for any one (1) item or pair or set of item/s;</li> </ol> <p>For any item that forms part of a pair or set, <b>Our</b> maximum liability will be a proportionate part of the value of the pair or set. A pair or set of items is treated as one (1) item (e.g. a pair of shoes, a camera and its accompanying lens and any accessories even if purchased separately and are of different brands).</p> <p>For the same event, <b>We</b> will only pay the highest claim from one of these Sections:</p> <ol style="list-style-type: none"> <li>Section 2 (d) – Baggage Delay</li> <li>Section 2 (e) – Loss/Damage to Baggage</li> </ol>						
What You must do	<b>You</b> must provide proof of purchase (e.g. receipts or credit card statements). If no proof of purchase is provided, <b>We</b> may decline the claim or accept it at a reduced value.						
What is not covered	<p>In addition to the General Exclusions (page 20), <b>We</b> will also not pay any claims under this section in respect of:</p> <ol style="list-style-type: none"> <li>Any item that is left unattended in a <b>Public Place</b>, even if left in any locked vehicle unless kept in the locked glove compartment or rear boot of the vehicle and not visible from the outside, and there is evidence of forcible and violent entry;</li> <li>Willful act, omission, negligence or carelessness;</li> <li>Unexplained and mysterious disappearance of <b>Your</b> baggage;</li> <li>Baggage that is sent in advance, mailed or shipped separately;</li> <li>Normal wear and tear (including scratches, discoloration, stains, tears or dents to the surface of the item which does not affect how it works);</li> <li>The following classes of property are excluded from coverage: <ol style="list-style-type: none"> <li>Business goods or samples of any kind;</li> <li>Animals; Perishables, consumables or fragile articles (e.g. chinaware, glassware), antiques, artifacts, documents or manuscripts, paintings, jewelry, keys, medicine;</li> <li>Contact or corneal lenses or hearing aids or dentures;</li> <li>Computers including software and accessories</li> <li>Portable Business Equipment such as but not limited to laptops, mobile phones, tablets, digital cameras, DSLR's, video equipment, hand-held mobile technology, portable computer equipment, visual display equipment;</li> <li>Information stored in tapes, cards, discs or other storage devices;</li> <li>Any motorized vehicle including the accessories or remote controlled motorized device while in use;</li> <li>Musical Instruments; any sports or golf equipment; bicycles;</li> <li><b>Money</b>, securities, debit or credit cards or any cards or vouchers with a stored value;</li> <li>Identity card, passport, driver's license, employment passes or any type of passes.</li> </ol> </li> </ol>						

2 (f) LOSS OF TRAVEL DOCUMENTS	Domestic	International			Pre-Trip	On-Trip	Post-Trip
		Essential	Classic	Elite			
		☑	☑	☑		☑	
When We will pay	If <b>You</b> suffer loss of passport, visa and/or travel tickets that are in <b>Your</b> custody while travelling, due to <b>Robbery, Theft</b> or <b>Natural Disaster</b> .						
What We will pay	<b>We</b> will reimburse <b>You</b> up to the specified limit applicable to the <b>Selected Plan</b> for: a. The replacement cost of the lost travel document obtained upon return to <b>Your Residence</b> ; b. Other expenses such as travel and accommodation expenses incurred while <b>On-Trip</b> .						
What You must do	Refer to Claims Procedure (page 22)						
What is not covered	In addition to the General Exclusions (page 20), <b>We</b> will also not pay any claims under this section in respect of: a. Any item that is left unattended in a <b>Public Place</b> , even if left in any locked vehicle unless kept in the locked glove compartment or rear boot of the vehicle and not visible from the outside, and there is evidence of forcible and violent entry; b. Any shortage due to exchange rate or depreciation of value; c. The local transportation cost incurred in obtaining the replacement of travel document upon return to <b>Your Residence</b> .						
2 (g) HIJACKING	Domestic	International			Pre-Trip	On-Trip	Post-Trip
		Essential	Classic	Elite			
		☑	☑	☑		☑	
When We will pay	If <b>You</b> are forcibly detained when the <b>Public Transport</b> in which <b>You</b> are travelling in is being <b>Hijacked</b> .						
What We will pay	<b>We</b> will pay <b>You</b> the relevant benefit amount for every 12 hours and up to the specified limit, applicable to the <b>Selected Plan</b> .						
What You must do	Refer to Claims Procedure (page 22)						
What is not covered	Refer to General Exclusions (page 20)						
2 (h) KIDNAP AND HOSTAGE	Domestic	International			Pre-Trip	On-Trip	Post-Trip
		Essential	Classic	Elite			
		☑	☑	☑		☑	
When We will pay	If <b>You</b> are <b>Kidnapped</b> and held <b>Hostage</b> while <b>On-Trip</b> .						
What We will pay	<b>We</b> will pay <b>You</b> the relevant benefit amount for every 24 hours and up to the specified limit, applicable to the <b>Selected Plan</b> .  Provided that: a. The <b>Kidnap</b> and <b>Hostage</b> event is not carried out by <b>Your</b> spouse, <b>Your</b> business partner or agent, <b>Your</b> employer or employee, <b>Your Travel Companion</b> or a person related to <b>You</b> by blood, marriage or adoption; b. Such incident did not occur in a country located in Central or South America, Africa or any country in which United Nations security forces are present and active.						
What You must do	Refer to Claims Procedure (page 22)						
What is not covered	Refer to General Exclusions (page 20)						

### SECTION 3 – MEDICAL AND EVACUATION EXPENSES

3 (a) i EMERGENCY MEDICAL EXPENSE DUE TO ACCIDENT	Domestic	International			Pre-Trip	On-Trip	Post-Trip
		Essential	Classic	Elite			
	✓	✓	✓	✓		✓	✓
When We will pay	If <b>You</b> suffer <b>Injury</b> and seek medical and/or <b>Dental Treatment</b> during the <b>Trip</b> .						
What We will pay	<p><b>We</b> will reimburse the <b>Medical Expenses</b> up to the specified limit applicable to the <b>Selected Plan</b> for those expenses incurred within 90 days from the date of the <b>Injury</b> such as the following:</p> <ol style="list-style-type: none"> <li>The services of a qualified <b>Doctor</b>;</li> <li><b>Hospital</b> confinement and use of operating room;</li> <li>Anesthetics (including administration), x-ray, examinations or treatments, and laboratory tests;</li> <li>Ambulance services;</li> <li>Drug medicines, and therapeutic services and suppliers.</li> </ol>						
What You must do	Secure medical certificate from <b>Your Doctor</b> , keep all official and original receipts for reimbursement.						
What is not covered	Refer to Specific Provisions and Exclusions (page 21)						
3 (a) ii EMERGENCY MEDICAL EXPENSE DUE TO ILLNESS	Domestic	International			Pre-Trip	On-Trip	Post-Trip
		Essential	Classic	Elite			
	✓	✓	✓	✓		✓	✓
When We will pay	If <b>You</b> suffer <b>Illness</b> and seek medical treatment during the <b>Trip</b> .						
What We will pay	<p><b>We</b> will reimburse the <b>Medical Expenses</b> up to the specified limit applicable to the <b>Selected Plan</b> for those expenses incurred within 90 days from the date of the <b>Illness</b> such as the following:</p> <ol style="list-style-type: none"> <li>The services of a qualified <b>Doctor</b>;</li> <li><b>Hospital</b> confinement and use of operating room;</li> <li>Anesthetics (including administration), x-ray, examinations or treatments, and laboratory tests;</li> <li>Ambulance services; or</li> <li>Drug medicines, and therapeutic services and suppliers.</li> </ol>						
What You must do	Secure certificate from <b>Your Doctor</b> , keep all official and original receipts for reimbursement.						
What is not covered	Refer to Specific Provisions and Exclusions (page 21)						
3 (a) iii HOSPITAL ALLOWANCE	Domestic	International			Pre-Trip	On-Trip	Post-Trip
		Essential	Classic	Elite			
	✓	✓	✓	✓		✓	
When We will pay	If <b>You</b> suffer <b>Injury</b> or <b>Illness</b> and are <b>Hospitalized</b> during <b>Your Trip</b> for more than the minimum of three (3) days as specified under the schedule of benefits in the <b>Policy Schedule</b> .						



What We will pay	<p><b>We will pay You</b> a specified amount applicable to the <b>Selected Plan</b> for each day that <b>You</b> are <b>Hospitalized</b>.</p> <p>The benefit under this Section is payable provided that the period of hospitalization is within the <b>Period of Insurance</b>.</p>						
What is not covered	<p>In addition to Specific Provisions and Exclusions (Page 21), <b>We</b> will also not pay any claims if <b>You</b> are <b>Hospitalized</b> for less than the minimum number of days specified under the schedule of benefits in the <b>Policy Schedule</b>.</p>						
3 (b) HOSPITAL VISIT BENEFIT	Domestic	International			Pre-Trip	On-Trip	Post-Trip
		Essential	Classic	Elite			
	✓	✓	✓	✓		✓	
When We will pay	<p>If <b>You</b> suffer <b>Injury</b> or <b>Illness</b> and are <b>Hospitalized</b> for more than five (5) consecutive days while on <b>Trip</b>.</p>						
What We will pay	<p><b>We</b> will pay, up to the specified limit applicable to the <b>Selected Plan</b> for:</p> <p>a. Cost of Economy air, land or sea travel fare;  b. Accommodation for one (1) <b>Adult</b> family member.</p> <p>Provided that:</p> <p>a. No <b>Adult</b> family member is travelling with <b>You</b>;  b. <b>Your</b> attending <b>Doctor</b> certified that <b>You</b> are not medically fit to continue <b>Your Trip</b> or return to <b>Your Residence</b>.</p>						
What is not covered	<p>Refer to Specific Provisions and Exclusions (page 21)</p>						
3 (c) i EMERGENCY MEDICAL EVACUATION	Domestic	International			Pre-Trip	On-Trip	Post-Trip
		Essential	Classic	Elite			
	✓	✓	✓	✓		✓	
When We will pay	<p>If <b>You</b> suffer <b>Injury</b> or <b>Illness</b> while <b>On-Trip</b>, <b>We</b> will certify, upon the recommendation of <b>Your</b> attending <b>Doctor</b> and through the <b>Authorized Assistance Partner's</b> medical team that it is medically necessary to transfer <b>You</b> to another location for medical treatment.</p>						
What We will pay	<p>Through <b>Our Authorized Assistance Partner</b>, <b>We</b> will arrange and pay up to the specified limit in the <b>Policy Schedule</b>, for the costs of <b>Your</b> transportation, medical services and medical supplies necessarily incurred as a result of an <b>Emergency</b> medical evacuation.</p>						
What You must do	<p><b>You</b> must contact the <b>Authorized Assistance Partner</b> to make arrangements for the services.</p>						
What is not covered	<p>Refer to Specific Provisions and Exclusions (page 21)</p>						
3 (c) ii EMERGENCY MEDICAL REPATRIATION	Domestic	International			Pre-Trip	On-Trip	Post-Trip
		Essential	Classic	Elite			
	✓	✓	✓	✓		✓	
When We will pay	<p>If <b>You</b> suffer <b>Injury</b> or <b>Illness</b> while <b>On-Trip</b>, <b>We</b> will certify, upon the recommendation of <b>Your</b> attending <b>Doctor</b> and through the <b>Authorized Assistance Partner's</b> medical team that <b>Your</b> medical condition allows <b>You</b> to be repatriated back to <b>Your Residing Location</b> as a regular passenger after the treatment at the <b>Travel Destination</b>.</p>						
What We will pay	<p><b>Authorized Assistance Partner</b> will arrange and pay for:</p> <p>a. <b>Your</b> repatriation under medical supervision to <b>Your Residing Location</b> by a scheduled airline or an appropriate means of transport; and  b. Any supplementary cost of transportation to and from the airport.</p>						



	<p>Provided that:</p> <ol style="list-style-type: none"> <li><b>Your</b> original travel ticket is not valid for such repatriation;</li> <li><b>You</b> surrender any unused portion of <b>Your</b> travel ticket to <b>Us</b> through <b>Our Authorized Assistance Partner</b>;</li> <li>Any decision on <b>Your</b> repatriation is made jointly and exclusively by both the attending <b>Doctor</b> and <b>Us</b> through the <b>Authorized Assistance Partner's</b> medical team.</li> </ol>						
What You must do	<b>You</b> must contact the <b>Authorized Assistance Partner</b> to make arrangements for the services.						
What is not covered	Refer to Specific Provisions and Exclusions (page 21)						
<b>3 (d) REPATRIATION OF MORTAL REMAINS</b>	<b>Domestic</b>	<b>International</b>			<b>Pre-Trip</b>	<b>On-Trip</b>	<b>Post-Trip</b>
		<b>Essential</b>	<b>Classic</b>	<b>Elite</b>			
	☑	☑	☑	☑		☑	
When We will pay	Up to the maximum limit specified in the <b>Policy Schedule</b> if <b>You</b> suffer death during <b>Your Trip</b> .						
What We will pay	<p>Through <b>Our Authorized Assistance Partner</b>, <b>We</b> will arrange and pay for:</p> <ol style="list-style-type: none"> <li>The cost of transporting <b>Your</b> mortal remains to <b>Your</b> place of <b>Residence</b> or an alternative destination (on the request of <b>Your</b> personal representative);</li> <li>The cost of local burial in the country where <b>You</b> suffered death.</li> </ol>						
What You must do	<b>Your</b> personal representative must contact the <b>Authorized Assistance Partner</b> to make arrangements for the services.						
What is not covered	Refer to Specific Provisions and Exclusions (page 21)						
<b>3 (e) COMPASSIONATE VISIT BENEFIT</b>	<b>Domestic</b>	<b>International</b>			<b>Pre-Trip</b>	<b>On-Trip</b>	<b>Post-Trip</b>
		<b>Essential</b>	<b>Classic</b>	<b>Elite</b>			
	☑	☑	☑	☑		☑	
When We will pay	If <b>You</b> suffer death during <b>Your Trip</b> and there is no <b>Adult Travel Companion</b> with <b>You</b> .						
What We will pay	<p><b>We</b> will pay up to the specified limit applicable to the <b>Selected Plan</b> for one (1) <b>Adult</b> family member to travel to the location that <b>You</b> were in at the time of death to assist in the necessary final arrangements to repatriate the mortal remains to <b>Your Residing Location</b>.</p> <ol style="list-style-type: none"> <li>Cost for a direct economy air, land, or sea travel fare</li> <li>Accommodation expense</li> </ol>						
What is not covered	Refer to Specific Provisions and Exclusions (page 21)						

#### SECTION 4 – PERSONAL LIABILITY

<b>PERSONAL LIABILITY</b>	<b>Domestic</b>	<b>International</b>			<b>Pre-Trip</b>	<b>On-Trip</b>	<b>Post-Trip</b>
		<b>Essential</b>	<b>Classic</b>	<b>Elite</b>			
	☑	☑	☑	☑		☑	
When We will pay	<p>If <b>You</b> are legally liable to a third party as a direct result of:</p> <ol style="list-style-type: none"> <li>Causing <b>Injury</b> or <b>Accidental</b> death to the third party during <b>Your Trip</b>; or</li> <li>Causing <b>Accidental</b> physical damage to the third party's property during <b>Your Trip</b>.</li> </ol>						
What We will pay	<p><b>We</b> will pay, up to the specified limit applicable to the <b>Selected Plan</b> for:</p> <ol style="list-style-type: none"> <li>The legal costs and expenses for representing or defending <b>You</b>; and</li> <li>The amount awarded against <b>You</b> by the court in the Philippines.</li> </ol>						

What You must do	Refer to Claims Procedure (page 22)
What is not covered	<p>In addition to the General Exclusions (page 20), <b>We</b> will also not pay any claims under this section in respect of:</p> <ol style="list-style-type: none"> <li>1. Damages relating to any liability assumed under contract;</li> <li>2. Liability arising from the transmission of <b>Illness</b> or disease of any kind;</li> <li>3. Acts of animals or property belonging to <b>You</b> or, in <b>Your</b> care or custody or under <b>Your</b> control;</li> <li>4. Property belonging to or in the control of <b>Your</b> relatives or people who work with/for <b>You</b>;</li> <li>5. Death or <b>Injury</b> to <b>Your</b> employee and/or <b>Your</b> relatives;</li> <li>6. Contractual liability, employer's liability or any liability related to <b>Your</b> Family;</li> <li>7. <b>Your</b> employment, trade, business or profession;</li> <li>8. <b>Your</b> ownership or occupation of any land or buildings (other than occupation only of any temporary residence);</li> <li>9. <b>Your</b> ownership, possession or use of firearms, animals, motorized vehicles, air or water crafts, remote controlled motorized devices or bicycle;</li> <li>10. Legal costs resulting from any criminal proceedings;</li> <li>11. Judgments not delivered by a court of competent jurisdiction within the Philippines;</li> <li>12. Punitive, aggravated or exemplary damages;</li> <li>13. <b>Your</b> participation in mountaineering, ski racing in major events, ski jumping, ice hockey, the use of bobsleighs, horse jumping or motor racing or rallies.</li> </ol>

## SECTION 5 – 24-HOUR TRAVEL ASSISTANCE

If **You** require travel assistance during **Your Trip**, **Your** covered benefits applicable to the **Selected Plan** are available directly from the **Authorized Assistance Partner**.

The following information is required when **You** call the **Authorized Assistance Partner**:

1. Insured Name
2. Policy Number
3. Travel Date
4. Name of the place and telephone number that **Authorized Assistance Partner** can reach **You** or **Your** representative
5. Brief description of the **Emergency**

Any expenses, including **Your** phone charges and referred services incurred for the services provided for this Section, will be borne by **You**.

**You** may also contact the **Authorized Assistance Partner** for the services listed below:

### (A) PRE-TRIP INFORMATION

Up-to-date travel related information such airport tax, custom regulations, visa requirements, immunization, vaccination, and embassy locations.

### (B) TRAVEL ASSISTANCE

1. Lost Baggage Assistance
  - Retrieval and redirecting **Your** baggage that is lost while **On-Trip**
2. Lost Travel Documents
  - Advice on recovery or assisting to obtain a replacement passport that is lost while **On-Trip**
3. Referral to Interpreter Services
  - Referral to an interpreter during an **Emergency**
4. Legal Assistance
  - Referral to a lawyer for legal advice on the laws of the **Travel Destination**

### (C) MEDICAL ASSISTANCE

1. Medical Advice
  - Phone advice and assessment through the **Authorized Assistance Partner** medical team
2. Referral to medical or dental facilities

- Information on available medical and dental facilities
- Assistance in booking a medical appointment

## GENERAL CONDITIONS

### APPLICABLE TO ALL SECTIONS OF THIS POLICY

**You** must observe the following conditions to have the full protection of **Your** Policy. **Our** liability shall be conditional on **Your** observance of the conditions of this Policy.

#### 1. Entire Contract and Endorsements

This Policy, the **Policy Schedule** and any **Endorsements** shall constitute the entire contract of insurance. **We** reserve the right to modify the terms and conditions of this Policy within the **Period of Insurance** by giving **You** prior notice of at least 30 days, and such modification shall be applicable from the effective date as stated in **Our** written notice to **Your** address specified on the **Policy Schedule**. No change to the terms and conditions of this Policy shall be valid unless approved in writing by **Us** and such approval shall be evidenced by way of an **Endorsement** to this Policy issued by **Us**. No intermediary has the authority to amend or waive any of the terms and conditions of this Policy.

#### 2. Reasonable Care

**You** shall act in a prudent manner and exercise reasonable care for **Your** safety and the supervision of **Your** property as if uninsured and to prevent loss, damage, **Accident, Injury** or **Illness**.

#### 3. Fit for Travel

At the time of **Your Trip**, **You** must be medically fit to travel and not aware in all good faith, of any circumstances which could lead to cancellation or disruption of the **Trip**. Otherwise any claim is not payable.

#### 4. Misrepresentation

This Policy shall be voidable in the event of misrepresentation, mis-description or nondisclosure or concealment of any circumstances material to or in connection with:

- Whether **You** are suffering from a disease, **Illness**, disability or handicap;
- Whether **You** are aware of circumstances suggesting that **You** may be suffering from a disease, **Illness**, disability or handicap;
- Your** claims history;
- Your** insurance record, including previous refusals to be granted insurance coverage.

#### 5. Known Circumstances or Events

Coverage is effective only if this Policy is purchased before **You** know or ought to know of any circumstance or event that renders the cancellation/postponement of **Your Trip** highly possible (e.g. A family member is **Hospitalized**, having received a terminal prognosis of a family member or any risk related to **Your** intended destination).

#### 6. Currency

Premiums and benefits payable under this Policy shall be in Philippine Peso.

#### 7. Payment Before Cover Warranty

- The total premium due must be paid and actually received by **Us** (or **Our** intermediary) on or before the effective date of the insurance and **Endorsement** cover.
- If the total premium due is not paid and actually received by **Us** (or **Our** intermediary) on or before the effective date, then the insurance will not be valid, will not be renewed and **We** will not pay any benefits.

#### 8. Conveyance Limit

If an **Accident** involves more than one (1) **Insured Person**, the maximum amount **We** will pay under one (1) Policy for **Accidental Death** or **Accidental Permanent Disablement** is Php100,000,000 per event or **Public Transport**. If the total amount that **We** are supposed to pay to all **Insured Persons** exceeds the aggregate limit of Php200,000,000, **We** will divide the aggregate limit proportionately to pay all the affected **Insured Persons**.

#### 9. Other Insurances

If **You** have or should have any other insurance providing cover for the same loss, damage or liability, **We** shall not be liable to pay except for any excess beyond the amount which would have been payable under the Policy or policies had this Policy not been effected. (Applicable to Section 2 – Travel Inconveniences Benefits, Section 3 – Medical and Evacuation Expenses, Section 4 – Personal Liability, and Section 5 – 24-hour Travel Assistance) only.

#### 10. Cancellation

This Policy shall not be cancelled by or on behalf of **Us** except in accordance with and pursuant to the provisions of Sections 64 and 65 of the Insurance Code, In the event of such cancellation, **We**, shall refund the

paid premiums less the earned portion thereof to the **Insured Person**. Likewise, this Policy may be cancelled on the short rate basis set forth in the short rate cancellation table at **Your** request.

The group policyholder specified in the **Policy Schedule** is therefore obliged to inform the insured-members of the intended termination of this policy by **Us** or by the group policyholder. Any certificate in effect when this policy is cancelled, nonrenewed or otherwise terminated, shall continue to be in effect for the **Period of Insurance** specified in the certificate.

#### 11. Subrogation

**We** have the right to proceed recovery at **Our** expense in **Your** name against any third party who may be responsible for an occurrence of an event giving rise to a claim under this Policy.

#### 12. Governing Law

This Policy shall be governed by and interpreted in accordance with the Philippine Law.

#### 13. Dealing with Disputes

In the event of any controversy or claim arising out of or relating to this contract, or a breach thereof, the parties hereto agree first to try and settle the dispute by mediation, administered by the Insurance Commission or any recognized mediation institution under its Mediation Rules, before resorting to arbitration, litigation or some other dispute resolution procedure.

#### 14. Sanctions Exclusion Clause

**We** shall neither provide cover nor be liable to pay any claim or provide any benefit hereunder to the extent that the provision of such cover, payment or such claim or provision of such benefit would expose that insurer to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanction, laws or regulations of the European Union, United Kingdom or United States of America.

#### 15. Separability Clause

In case any provision in this Policy shall be invalid, illegal or unenforceable, the validity, legality and enforceability of the remaining provisions of each of this Policy shall not in any way be affected or impaired thereby.

### GENERAL EXCLUSIONS

APPLICABLE TO ALL SECTIONS OF THIS POLICY

**WE WILL NOT PAY UNDER ANY SECTION OF THIS POLICY FOR THE LOSS OR LIABILITY DIRECTLY OR INDIRECTLY ARISING AS A RESULT OF:**

#### 1. Behavioral Exclusions

- a. When **You** Commit:
  - i. Suicide or attempted suicide, intentional self-injury;
  - ii. **Your** willful, malicious or unlawful acts.
- b. When **You**:
  - i. Fail to take reasonable precaution to safeguard **Your** property or minimize claims under this Policy;
  - ii. Are under the influence or effects of alcohol or drugs unless properly prescribed by a **Doctor** and taken as prescribed.
- c. If **You** suffer from any mental and nervous disorders including insanity.

#### 2. Travel Exclusions

- a. Travelling to a country where the Philippine government advised against non-essential travel relating to any war or warlike event, **Strike, Riot or Civil Commotion**, disease outbreak or unsafe health conditions, impending **Natural Disaster** or any other events of similar nature. This exclusion does not apply if **You** have already commenced **Your Trip** prior to the issuance of such travel advisory.
- b. Travel in, to or through the following areas in the Philippines: Lanao del Norte, Lanao del Sur, South Cotabato, North Cotabato, Maguindanao, Zamboanga del Norte, Zamboanga del Sur, Sultan Kudarat, Sulu Archipelago (including Basilan Province).

#### 3. Circumstantial Exclusions

- a. Action taken by any government authority including confiscation, seizure, destruction and restriction.
- b. Direct participation of the **Insured Person** in any terrorist acts.
- c. War, invasion, act of foreign enemy hostilities (whether war is declared or not), **Civil War**, rebellion, revolution, insurrection, military or usurped power.

- d. Ionizing radiations, or contamination by radioactivity from any irradiated nuclear fuel, or from any nuclear waste from the combustion of nuclear fuel; Radioactive toxic explosive or other hazardous properties of any explosive nuclear assembly or of its nuclear component.
- e. Consequential loss or damage of any kind.

#### 4. Professional Exclusions

Any **Injury** which arises in the course of **Your** occupation if **Your** occupation falls within the following categories or involves the following activities:

- a. Full-time military, air force and navy personnel, police and civil defense personnel (other than serving in the Philippines full-time or reservist training);
- b. Air crew, ship crew, motor racer, entertainer, armed security guard;
- c. Manual worker regardless of whether any machinery or tools are used including but not limited to construction worker and kitchen help;
- d. Off-shore rig worker, diver, firefighter, fisherman;
- e. Working onboard sea vessel or aircraft (e.g. air crew, ship crew, shipyard worker);
- f. Working at heights above 30 feet including but not limited to roofing activities, on the scaffolding or gondola;
- g. Underground worker, in tunnel or quarry;
- h. Any occupation dealing with explosives or hazardous substances.

### SPECIFIC PROVISIONS AND EXCLUSIONS

**APPLICABLE TO SECTION 1 (a) – ACCIDENTAL DEATH AND PERMANENT DISABLEMENT, SECTION 3 (a) i – EMERGENCY MEDICAL EXPENSE DUE TO ACCIDENT, SECTION 3 (a) ii – EMERGENCY MEDICAL EXPENSE DUE TO ILLNESS, SECTION 3 (a) iii – HOSPITAL ALLOWANCE, SECTION 3 (b) HOSPITAL VISIT BENEFIT, SECTION 3 (c) i – EMERGENCY MEDICAL EVACUATION, SECTION 3 (c) ii – EMERGENCY MEDICAL REPATRIATION, SECTION 3 (d) REPATRIATION OF MORTAL REMAINS, AND SECTION 3 (e) – COMPASSIONATE VISIT:**

In addition to the General Exclusions (page 19), **We** will also not pay any claims in respect of:

- 1. Any **Pre-Existing Medical Condition**, including congenital conditions;
- 2. Travelling against medical advice or where the **Trip** is made for the purpose of obtaining medical treatment;
- 3. Pregnancy, childbirth, abortion, miscarriage and any **Injury** or **Illness** related to such conditions;
- 4. Sexually transmitted infections;
- 5. Surgery or medical treatment, that in the opinion of the **Doctor** treating **You**, can reasonably be delayed until **Your** return to **Your Residence**;
- 6. Any form of cosmetic (aesthetic) treatment or plastic surgery or any treatment related to previous cosmetic treatment except to restore function after an **Accident** that occurs during the **Period of Insurance**;
- 7. Taking part in flying or other aerial activities except as a fare-paying passenger in a licensed passenger-carrying aircraft. This exclusion does not apply to any leisure hot air balloon ride, leisure parachuting, leisure sky-diving, leisure bungee jumping and leisure snow/ice sports;
- 8. Any sports that are played in a professional capacity or in competition involving prize **Money**, donations, sponsorship or reward of any kind;
- 9. Participation in the following activities:
  - a. **Extreme Sports**. This exclusion does not apply to any of the following leisure activities - parachuting, sky diving, bungee jumping, rock climbing, hang-gliding, non-competitive winter sports;
  - b. Motorcycling unless **You** hold a valid motorcycle license recognized by the country **You** are travelling in and provided that **You** wear a helmet at all times while motorcycling and abide by all applicable road laws of that country;
  - c. Mountaineering that entails the use of specific climbing equipment and ropes;
  - d. Hiking or trekking above three thousand five hundred (3,500) meters sea level;
  - e. Expedition to generally inaccessible and remote areas of a country or areas previously unexplored;
  - f. Underwater activities which require the use of artificial breathing apparatus. This exclusion does not apply to leisure scuba diving where **You** are diving no deeper than thirty (30) meters under the supervision of a qualified diving instructor; or **You** hold a PADI certification (or equivalent qualification) and **You** are diving with a companion who holds a PADI certification (or equivalent qualification).

**APPLICABLE TO SECTION 3 (b) – HOSPITAL VISIT BENEFIT AND SECTION 3 (e) – COMPASSIONATE VISIT BENEFIT:**

In addition to the General Exclusions (page 19) and Specific Provisions and Exclusions (Page 20), **We** will also not pay any claims in respect of:

- 1. Drinks, meals and other room services;
- 2. Local transportation fares (e.g. Taxi, bus or intra-city rail fares).

**APPLICABLE TO SECTION 3 (c) i – EMERGENCY MEDICAL EVACUATION, SECTION 3 (c) ii – EMERGENCY MEDICAL REPATRIATION, AND SECTION 3 (d) – REPATRIATION OF MORTAL REMAINS:**

In addition to the General Exclusions (page 19) and Specific Provisions and Exclusions (Page 20), **We** will also not pay any claims under this section in respect of:

1. Medical evacuation or repatriation that is not approved or arranged through **Authorized Assistance Partner** or its authorized representatives, unless **We** decide that such expenses were necessarily incurred as the **Authorized Assistance Partner** could not be contacted during the **Emergency**. In such event, **We** reserve the rights to only reimburse the expenses incurred for the services that the **Authorized Assistance Partner** would have provided under the same circumstances;
2. Any event or treatment occurring when outside the duration of **Your Trip**;
3. The cost of burial and any other expenses incurred outside the duration of **Your Trip**.

**CLAIMS PROCEDURE**

**1. 30 days claim notification**

Any occurrence or loss which may give rise to a claim under the Policy should be reported to **Us** in writing within 30 days of the occurrence or loss.

Failure to furnish notice within the **Time** provided shall not invalidate any claim if it is shown not to have been reasonably possible to furnish such notice and that such notice is furnished as soon as was reasonably possible.

**2. Proof of loss**

If any **Injury, Accident**, loss or damage due to **Robbery** or **Theft** happens, **You** must:

- a. Make a report within 24 hours of the incident, to the police or the relevant authorities at the place of loss or to the management of the establishment where the incident occurred, if any property is lost, stolen or malicious damage is suspected. **You** must obtain a written documentation from such authorities;
- b. Get a certification from the **Public Transport** company containing specific details if it is due to any of the following:
  - i. Loss/Damage to Baggage, a letter detailing the contents of **Your** baggage;
  - ii. Flight Delay, confirmation and reason for such delay;
- c. Take all reasonable steps to recover missing property;
- d. Give **Us** written notification within thirty (30) working days of the occurrence or loss;
- e. Give **Us** the receipts, invoices, boarding pass and/or photocopy of passport for purposes of verification and proof of travel;
- f. Send **Us** any writ, summons or other documents in connection with the claim immediately;
- g. Not admit, deny or enter into any agreement in relation to any claim or charge made against the **Insured Person**.

**3. Payments of claims**

All benefits payable under this Policy shall be paid to the **Insured** or, in the event of the **Insured's** death, to the **Insured's** beneficiaries. Such payment by **Us** shall constitute full, complete and final discharge of **Our** liabilities and obligations under this Policy. Benefits payable under this Policy are in Philippine Peso.

For **Emergency** medical evacuation assistance and repatriation of mortal remains, **We** will be paying the benefits directly to **You** through the **Authorized Assistance Partner**.

For claims incurred in a foreign currency, **We** will convert the amount into Philippine Peso at the exchange rate to be determined by **Us** at **Our** discretion on the date of occurrence.

**4. Interest**

No sum payable by **Us** under this Policy shall carry interest.

**5. Fraudulent Claims**

If a claim under this Policy is made with the knowledge of the claim to be dishonest, intentionally exaggerated or fraudulent in any way, **We** will not pay the claim nor return the premium and reserve the right to lodge a report with any relevant authorities in relation to any such dishonest claim.

## OTHER CONDITIONS

1. **Payment of Claims.** All benefits payable under this Policy shall be paid to **You**, or in the event of **Your** death, to **Your** Beneficiary(ies) as designated in the **Policy Schedule**. Such payment by **Us** shall constitute full, complete and final discharge of **Our** liabilities under this Policy. Benefits payable under this Policy are in Philippine Peso.
2. **Submission to Our Examination.** **You** as often as required shall submit to medical examination on **Our** behalf at **Your** own expense in respect of any alleged **Bodily Injury**. **We** shall in case of **Your** death be entitled to have a post mortem examination at **Our** own expense.
3. **Securing Medical Advice.** **You** shall as soon as possible after the occurrence of any **Injury** obtained and follow the advice of a duly qualified medical practitioner and **We** shall not be liable for any consequences arising by reason of **Your** failure to obtain or follow such advice and use such appliances or remedies as may be prescribed.
4. **Occupational and Other Changes.** **You** shall give **Us** immediate notice in writing of any change in **Your** address or **Your** profession or occupation or of the effecting of other insurances except upon against **Accident**, disease or **Illness** and on tendering any premium for the renewal of this Policy. **You** shall give **Us** notice in writing of any disease, **Illness**, physical defect or infirmity with which **You** have become affected or of which **You** have become aware since the payment of the preceding premium.
5. **Policy Assignment.** No assignment of the benefits of this Policy shall be binding upon **Us** unless and until the original or duplicate thereof is filed with **Us**. **We** do not assume any responsibility for the validity of any assignment. No change of beneficiary under this Policy shall bind **Us** unless consent thereto is formally endorsed hereon by **Us**.
6. **Rights of the Beneficiary.** Unless **You** make an irrevocable designation of beneficiary, the right to change of beneficiary is reserved to **You** and the consent of the beneficiary or beneficiaries shall not be a requisite to the surrender or assignment of this Policy, or to any change of beneficiary or beneficiaries, or to any other changes in this Policy.
7. **Arbitration.** All differences as to the amount of any loss, or damage covered by this Policy shall be referred to an arbitrator to be appointed by the parties in difference or if they cannot agree upon a single arbitrator, to the decision of two arbitrators, one to be appointed in writing by each of the parties within thirty (30) days after having been required in writing to do so by either of the parties or in case of disagreement between the arbitrators, to the decision of an umpire to be appointed in writing by the arbitrators before entering on the reference and an award by the arbitrator or arbitrators or umpire shall be a condition precedent to any right of action against **Us** only in cases of differences as to the amount of liability arising out of this Policy.
8. **Suit Against Company.** If a claim be made and rejected and an action or suit be not commenced either in the Insurance Commission or any Court of competent jurisdiction within twelve (12) months from receipt of notice of such rejection or in case of arbitration taking place as provided herein, within twelve (12) months after due notice of the award made by the arbitrator or arbitrators or umpire, then the claim shall for all purposes be deemed to have been abandoned and shall not thereafter be recoverable hereunder.
9. **Two or More Policies.** It is hereby further understood and agreed that in the event of a claim, **You**, who are covered by two or more policies underwritten by **Us**, shall not recover, nor **We** will pay, for more than what would have been recoverable if all the benefits in the different policies had been covered under one Policy with the highest benefit.
10. IT IS HEREBY DECLARED AND AGREED that the provision of Article 1250 of the Civil Code of the Philippines (Republic Act No. 386) which reads:  
    “In case an extraordinary inflation or deflation of the currency stipulated should supervene, the value of the currency at the time of establishment of the obligation shall be the basis of payment” shall not apply in determining the extent of liability under the provisions of the Policy.
11. **Compliance of Provisions.** Failure to comply with any of the provisions contained in this Policy shall invalidate all claims hereunder.

- 12. Changes in Policy.** None of the provisions, conditions and terms of this Policy shall be waived or altered except by **Endorsement** signed by any of **Our** authorized officials and issued in accordance with the provisions of Section 50 of Insurance Code.
- 13. Receipt of Payment.** Except only in those specific cases where corresponding rules and regulations which are now or may hereafter be in force provide for the payment of the stipulated premiums in periodic installments at fixed percentages, it is hereby agreed, declared and warranted that this Policy shall be deemed effective, valid and binding upon **Us** only when the premiums therefore have been paid and duly acknowledged in a receipt signed by any of **Our** authorized official or representative/agent.
- 14. Right of Return of Premium**
- a. **You** are entitled to a return of premium, as follows:
    - i. To the whole premium if no part of his interest in the thing insured be exposed to any of the perils insured against;
    - ii. Where the insurance is made for a definite period of time and **You** surrendered **Your** Policy, to such portion of the premium as corresponds with the unexpired time, at a pro rata rate, unless a short period rate has been agreed upon and appears on the **Policy Schedule**, after deducting from the whole premium any claim for loss or damage under the Policy which has previously accrued.
  - b. If a peril insured against has existed, and **We** have been liable for any period, however short, **You** are not entitled to return of premiums, so far as that particular risk is concerned.
  - c. **You** are entitled to a return of the premium when the contract is voidable, and subsequently annulled under the provisions of the Civil Code; or on account of **Our** fraud or misrepresentation, or of **Our** agent, or on account of facts, or the existence of which **You** were ignorant of without **Your** fault; or when by any default of **Us** other than actual fraud, **We** never incurred any liability under the Policy.
  - d. **You** are not entitled to a return of premium if the Policy is annulled, rescinded or if a claim is denied by reason of fraud.
  - e. In case of an over insurance by several insurers, **You** are entitled to a ratable return of the premium, proportioned to the amount by which the aggregate **Sum Insured** in all the policies exceeds the insurable value of the thing at risk.
- 15. Settlement of Claim.** The amount of any loss for which **We** may be liable under this Policy shall be paid within 30 days after proof of loss is received by **Us** and ascertainment of the loss is made by agreement between **You** and **Us** or by arbitration but if such ascertainment is not had or made within 60 days after such receipt by **Us** of the proof of loss, then the loss shall be paid with 90 days after such receipt.

**NOTE: FOR YOUR OWN PROTECTION YOU ARE REQUESTED TO READ THIS POLICY IN FULL, INCLUDING ITS CONDITIONS, AND IF IT IS NOT IN ACCORDANCE WITH YOUR INTENTIONS, PLEASE RETURN IT IMMEDIATELY FOR CORRECTION.**