

# STANDARD CHARTERED SIGN AND FLY TRAVEL INSURANCE PLAN

## Benefit Summary

Allianz Global Corporate & Specialty SE (incorporated in the Federal Republic of Germany with limited liabilities) Hong Kong Branch (“the Company”), has issued an insurance group policy (“Master Policy”) to Standard Chartered Bank (Hong Kong) Limited (“Policyholder”). This Benefit Summary provides a summary of the benefits available to eligible persons who are enrolled as Insured Persons under the Master Policy.

If You have any queries, please contact Us.

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## Contents

INTRODUCTION.....	4
ABOUT THIS PLAN.....	4
TERMINATION.....	4
IMPORTANT NOTES.....	5
SCHEDULE OF BENEFITS.....	6
GENERAL DEFINITIONS.....	7
BENEFITS (SECTIONS 1-5).....	11
SECTION 1 – OVERSEAS MEDICAL EXPENSES.....	11
SECTION 2 – EMERGENCY MEDICAL ASSISTANCE.....	12
SECTION 3 – PERSONAL ACCIDENT ON COMMON CARRIER.....	13
SECTION 4 – TRAVEL DELAY.....	15
SECTION 5 – BAGGAGE DELAY ALLOWANCE.....	15
GENERAL CONDITIONS.....	16
GENERAL PROVISIONS.....	17
GENERAL EXCLUSIONS.....	18
PERSONAL INFORMATION COLLECTIONS AND USE STATEMENT.....	20
簡介.....	22
關於此計劃.....	22
終止.....	22
重要提示.....	22
保障表.....	23
一般定義.....	24
保障(第 1 – 5 項).....	29
第 1 項- 海外醫療費用.....	29
第 2 項- 緊急醫療支援.....	30
第 3 項- 乘坐公共運輸工具而引致個人意外.....	31
第 4 項- 旅程延誤.....	33
第 5 項- 行李延誤津貼.....	33

一般條件 .....34

一般條款 .....35

主要不保項目 .....36

收集及使用個人資料聲明.....38

## INTRODUCTION

### ABOUT THIS PLAN

This document (the “Summary”) provides a summary of benefits available to You as a Cardholder when:

- You are an Eligible Credit Card Cardholder at the time of any incident giving rise to a claim;
- You are a resident of Hong Kong travelling overseas;
- 100% of the Travel Fare for your Journey is purchased using your Eligible Credit Card; and
- The duration of your Journey does not exceed sixty (60) days.

Coverage under this plan is extended to the Cardholder’s Spouse and the Cardholder’s Child(ren), provided that all of the following conditions are met in addition to the Cardholder’s own eligibility above:

- They are residents of Hong Kong;
- They are travelling with You for the entire duration of the same Journey;
- 100% of the Travel Fare for the Cardholder’s Spouse and the Cardholder’s Child(ren) is purchased using the Cardholder’s Eligible Credit Card.

This plan provides coverage for an unlimited number of Journeys during the Period of Insurance. However, coverage for any single Journey is limited to a maximum duration of sixty (60) days, commencing on the Departure Date.

The benefits outlined below are subject to the limits, terms and conditions contained in the Master Policy.

The Policyholder reserves the right to cancel, at its absolute discretion, with or without cause, the provision of service under this Plan in respect of any Cardholder at any time by giving at least one (1) month’s prior notice to such Cardholder.

This Summary, the Master Policy, the Schedule and any Endorsements of this plan subsequently issued shall be read together as one contract and any word or expression to which a specific meaning has been attached in any part of this Summary or the Master Policy, or of the Schedule shall bear such specific meaning whenever it may appear.

### TERMINATION

A Cardholder’s eligibility for the benefits under this plan shall terminate immediately upon any of the following events:

- (a) The expiry or termination of the Master Policy by Us or the Policyholder;

- (b) When the Insured Cardholder ceases to be an Eligible Credit Cardholder as determined and certified by the Policyholder;
- (c) The death of the Cardholder ; or
- (d) When the Insured Person sustains disablements as listed under Section 3 – Personal Accident on Common Carrier and indemnity payable reaches one hundred percent (100%) of the Benefit Limit.

#### IMPORTANT NOTES

- This plan does not cover any known circumstance or Pre-Existing Condition of the Insured Person. This does not apply to Section 2.2 (Repatriation of Mortal Remains).
- This plan does not cover certain activities or travel, including but not limited to:
  - Extreme Sport or Sport Activities or competing in sporting competitions;
  - Expeditions;
  - Manual work; or
  - Missionary or humanitarian travel

## SCHEDULE OF BENEFITS

Irrespective of the number of Eligible Credit Cards held by an Insured Cardholder, the Company's maximum liability during any one Period of Insurance under the respective Section of the Master Policy shall not exceed:

Benefits	Maximum amount payable per Period of Insurance (HKD)
<b>1. Overseas Medical Expenses</b>	395,000 per Eligible Credit Card
<i>Sub-limit:</i>	
• Cardholder	195,000
• Cardholder's Spouse	195,000
• Cardholder's Child	195,000
<b>2. Emergency Medical Assistance</b>	
2.1 Emergency Medical Evacuation	1,560,000 per Eligible Credit Card
<i>Sub-limit:</i>	
• Cardholder	780,000
• Cardholder's Spouse	780,000
• Cardholder's Child	780,000
2.2 Repatriation of Mortal Remains	780,000 per Eligible Credit Card
<i>Sub-limit:</i>	
• Cardholder	390,000
• Cardholder's Spouse	390,000
• Cardholder's Child	390,000
<b>3. Personal Accident on Common Carrier</b>	15,600,000 per Eligible Credit Card
<i>Sub-limit:</i>	
• Cardholder	7,800,000
• Cardholder's Spouse	7,800,000
• Cardholder's Child	975,000
<b>4. Travel Delay</b>	7,800 per Eligible Credit Card
<i>Sub-limit:</i>	
• Cardholder	3,900 (pays 1,950 per each 6-hour period)
• Cardholder's Spouse	3,900 (pays 1,950 per each 6-hour period)
• Cardholder's Child	3,900 (pays 1,950 per each 6-hour period)
<b>5. Baggage Delay Allowance</b>	15,600 per Eligible Credit Card
<i>Sub-limit:</i>	
• Cardholder	3,900 (pays 1,950 per each 6-hour period)
• Cardholder's Spouse	3,900 (pays 1,950 per each 6-hour period)
• Cardholder's Child	3,900 (pays 1,950 per each 6-hour period)

## GENERAL DEFINITIONS

For the purpose of this plan:

**“Accident”** means an unforeseen and involuntary event which causes an Injury during the Journey.

**“Accommodation”** means room charge only.

**“Acquired Immune Deficiency Syndrome”** or **“AIDS”** has the meanings assigned to it by the World Health Organization including Opportunistic Infection, Malignant Neoplasm, Human Immune Deficiency Virus (HIV) Encephalopathy (Dementia), HIV Wasting Syndrome or any disease or Sickness in the presence of a seropositive test for HIV.

**“Assistance Hotline”** means the 24/7 call center provided by the Company or its Authorized Representative.

**“Authorized Representative”** means Allianz Worldwide Partners (Hong Kong) Limited, the administrator of this plan appointed by Allianz Global Corporate & Specialty SE (incorporated in the Federal Republic of Germany with limited liabilities) Hong Kong Branch, in respect of the provision of the emergency assistance for this plan.

**“Baggage and Personal Effects”** means Your suitcases, trunks and similar containers including their contents and articles worn or carried by You including Your valuables. It does not include any bicycle, business samples or items that You intend to trade, passport or travel documents, cash, bank notes, currency notes, check, negotiable instruments, watercraft of any type (other than surfboards), furniture, furnishings, household appliances, hired items or any other item listed as excluded on Your Benefits Summary.

**“Benefit Limit”** means the maximum amount of each of the benefits covered under this plan as stated in the Schedule of Benefits.

**“Cardholder”** or **“You”** or **“Yours”** means a holder of an Eligible Credit Card with Standard Chartered Bank Hong Kong which remains open and valid at the time of any incident giving rise to a claim.

**“Cardholder’s Spouse”** means the Insured Cardholder’s legally married spouse.

**“Cardholder’s Child”** means the Insured Cardholder’s dependent biological or legally adopted child(ren) who are unmarried and under the age of eighteen (18).

**“Chinese Medicine Practitioner”** means any Chinese bonesetter, acupuncturist or Chinese medicine practitioner duly registered as a Chinese medicine practitioner according to the Chinese Medicine Ordinance (Cap. 549), but excluding a Chinese Medicine Practitioner who is You or Your Immediate Family Member.

**“Chronic Diseases”** means conditions that last one year or more and require ongoing medical attention or limit activities of daily living or both, including but not limited to cardiovascular and cerebrovascular diseases, hypertension, diabetes.

**“Claimant”** means the Insured Person who is filing for a claim under this plan.

**“Common Carrier”** means any bus, coach, taxi, ferry, hovercraft, hydrofoil, ship, train, tram or underground train provided and operated by a carrier duly licensed for the regular transportation of fare-paying passengers, and any 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 any 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, and any regularly scheduled airport limousine operating on fixed routes and schedules.

**“Confinement”** or **“Confined”** means the period the Insured Person is registered as an in-patient in a Hospital because of a medical necessity under the professional care of a Qualified Medical Practitioner and which the Hospital levies a charge for room and board for the treatment of an Injury or Sickness for such Confinement.

**“Dental Treatment”** means an emergency dental procedure that is required and customary, and due to an Accident incurred overseas.

**“Departure Date”** means the date where Insured Person departs from Hong Kong (or the Place of Departure if the Journey commences from a place other than Hong Kong) to their destination.

**“Eligible Credit Card”** means a Standard Chartered Visa Signature Business Card and/or Standard Chartered Visa Infinite Credit Card and/or Standard Chartered Priority Banking Credit Card issued by the Policyholder.

**“Epidemics”** means a contagious disease recognized or referred to as an epidemic by a representative of the World Health Organization (WHO) or an official government authority.

**“Expedition”** means any journey to high risk, inaccessible and/or inhospitable locations including but not limited to privately organized kayaking trips around the coast of a country or trips to generally inaccessible interiors of a country or areas previously unexplored or uncharted, or trips undertaken for scientific, research or political purposes to such locations or trips to Antarctica or similar remote and inhospitable locations. It does not mean Trekking and travel, outside of these previously given examples, provided by a recognized tour operator that are accessible to the general public without restrictions (other than general health or fitness warning), but always providing that the Insured Person is acting under the guidance and supervision of qualified guides and/or instructors of the tour operator.

**“Extreme Sports and Sporting Activities”** means any sport or sporting activities that present a high level of inherent danger (i.e. involves a high level of expertise, exceptional physical exertion, highly specialized gear or stunts) including but not limited to big wave surfing; winter activities like luge, bobsleighbing, skiing off piste or on trails beyond intermediate level, or ski or snow board jumping or stunts; bicycle, motor, air or sea craft speed trials or stunts; diving to a depth greater than 30 meters below sea level; canoeing down rapids; cliff jumping; horse jumping; horse polo; and stunts. It does not mean usual tourist activities that are accessible to the general public without restriction (other than height or general health or fitness warnings) and which are provided by a recognized local tour operator/activity provider but always providing that Insured Person is acting under the guidance and supervision of qualified guides and/or instructors of the tour operator/activity provider when carrying out such tourist activities.

**“Hong Kong”** means the Hong Kong Special Administrative Region.

**“Hospital”** means a hospital (other than an institution for the aged, chronically ill or convalescent rest or nursing home or a place for alcoholics or drug addicts, or for any similar purpose) operated pursuant to law for the care and treatment of sick or injured persons with organized facilities for diagnosis and surgery and having 24 hours nursing service and medical supervision.

**“Immediate Family Member”** means Insured Person’s spouse, parent, parent-in-law, grandparent, son or daughter, brother or sister, grandchild or legal guardian.

**“Injury”** means the bodily Injury sustained in an Accident directly and independently of all other causes.

**“Insured Person”** means the Cardholder, Cardholder’s Spouse, and Cardholder’s Child.

**“Journey”** means the insured Journey with the period of travel commencing from when the Insured Person leaves the immigration counter of Hong Kong on the Departure Date for the purpose of commencement of his/her Journey and until the expiry date of the Master Policy or the Insured Person’s arrival at the immigration counter of Hong Kong after the Journey after the Journey, whichever first occurs. The duration of your Journey does not exceed sixty (60) days.

**“Loss of”** or **“Loss of Use”** means the Permanent total functional disablement or complete and Permanent physical severance through or above the wrists or ankle joints, and as used with reference to eyes, means the entire and irrecoverable loss of sight.

**“Loss of Hearing”** means Permanent total and irrecoverable loss of complete hearing in an ear in that the ear is beyond remedy by surgical or other treatment.

**“Loss of Sight”** means Permanent total and irrecoverable loss of complete sight of an eye in that the eye is beyond remedy by surgical or other treatment.

**“Loss of Speech”** means Permanent total and irrecoverable loss of speech beyond remedy by surgical or other treatment.

**“Medically Necessary Expenses”** means expenses incurred and paid by the Insured Person to a legally Qualified

Medical Practitioner, physician, surgeon, nurse, Hospital and/or ambulance service for medical, surgical, X-ray, Hospital or nursing treatment including the cost of medical supplies, ambulance hire, and Dental Treatment, but excluding any expenses incurred under Section 2.1 (Emergency Medical Evacuation) and Section 2.2 (Repatriation of Mortal Remains) of this plan. All treatment must be prescribed by a Qualified Medical Practitioner in order for expenses to be reimbursed under this plan. Provided that in the event an Insured Person becomes entitled to a refund of all or part of such expenses from any other source, the Company will only be liable for the excess of the amount recoverable from such other sources.

**“Mountaineering”** means the ascent or descent of a mountain ordinarily necessitating the use of specified equipment including but not limited to crampons, pickaxes, anchors, bolts, carabineers and lead rope to top-rope anchoring equipment.

**“Natural Disaster”** means a large-scale extreme weather or environmental event that damages property, disrupts transportation or utilities, or endangers people, including without limitation: earthquake, fire, flood, hurricane, or volcanic eruption.

**“Opportunistic Infection”** includes but not be limited to pneumocystis carinii pneumonia, organism of chronic enteritis, virus and/ or disseminated fungi infection.

**“Pandemics”** means an Epidemic that is recognized or referred to as a pandemic by a representative of the World Health Organization (WHO) or an official government authority.

**“Percentage of Principal Sum”** is the Percentage of Principal Sum as stated in the Benefit Table in Section 3 (Personal Accident While on Common Carrier) herein used to calculate the compensation payable.

**“Period of Insurance”** means the effective date and expiry date of the Master Policy.

**“Permanent”** means lasting twelve (12) consecutive months from the date of an Accident and at the expiry of the twelve (12) months period being beyond any hope of improvement.

**“Permanent Total Disablement”** means disablement which commences ninety (90) days from the date of the Accident and which is Permanent and which entirely prevents an Insured Person from attending to any business or gainful occupation of any and every kind or if he/she has no business or occupation from attending to any duties, which would normally be carried out by him/her in his/ her daily life.

**“Policyholder”** means Standard Chartered Bank (Hong Kong) Limited.

**“Pre-Existing Condition”** means the following:

- (a) any condition(s) of the Insured Person or Immediate Family Member, which has been diagnosed, treated, or reviewed by a Qualified Medical Practitioner within one year prior to the Departure Date;
- (b) any condition of the Insured Person or Immediate Family Member, for which prescription medications are being taken up to the Departure Date; and
- (c) any condition of the Insured Person or Immediate Family Member which is considered to be a Chronic Disease.

**“Principal Home”** means an Insured Person’s primary place of residence in Hong Kong.

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

**“Schedule of Benefits”** means the table of benefits presented at the beginning of this Benefit Summary document that sets out the coverage that is provided under this plan and the limits We will pay in total for all claims under each section per Period of Insurance.

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

**“Severe Weather”** means hazardous weather conditions including but not limited to windstorms, typhoons, hurricanes, tornados, fog, hailstorms, rainstorms, snow storms, or ice storms.

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

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

**“Terrorist”** or **“member of a Terrorist organization”** means any person who commits, or attempts to commit, a Terrorist Act or who participates in or facilitates the commission of a Terrorist Act and/or is verified or recognized or designated by any government or authority or committee as a Terrorist.

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

**“Travel Fare”** means costs associated with a travel ticket or fare purchased for travelling on any Common Carrier used by the Insured Person during the Journey.

**“Trekking”** means an overnight hike, tramp, trek or similar activity through mountainous terrain, national parks or reserve lands normally undertaken on foot but can be by other means, including but not limited to on animal or off-road vehicle, and which involves an overnight stay in the wilderness including campsites, huts or lodges. For purpose of clarity it does not mean Mountaineering.

**“Usual, Reasonable And Customary”** means an expense which:

- (a) Is charged for treatment, supplies or medical services medically necessary for caring of the Insured Person(s) under the care, supervision, or order of a Qualified Medical Practitioner;
- (b) Does not exceed the usual level of charges for similar treatment, supplies or medical services in the locality where the expense is incurred; and
- (c) Does not include charges that would not have been made if no insurance existed.

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

**“We”** or **“Our”** or **“Us”** or **“The Company”** means Allianz Global Corporate & Specialty SE (incorporated in the Federal Republic of Germany with limited liabilities) Hong Kong Branch.

## BENEFITS (SECTIONS 1-5)

### SECTION 1 – OVERSEAS MEDICAL EXPENSES

**1.1 Overseas Medical Expenses.** Under this Section, if the Insured Person sustains an Injury or Sickness during the Journey and as a result the Insured Person incurs medical expenses for treatment of the said Injury or Sickness prior to his/her return to Hong Kong, the Company shall reimburse the Insured Person up to the Benefit Limit stated in the Schedule Of Benefits for that portion of the medical expenses which:

1.1.1 Are incurred by the Insured Person within one-hundred and eighty (180) days from his/her first sustaining the said Injury or Sickness; and

1.1.2 Constitute Usual, Reasonable and Customary Medically Necessary Expenses charged by a Qualified Medical Practitioner at the place of the treatment.

**1.2 1.Exclusions Applicable to Section 1 - Overseas Medical Expenses.**

No benefits will be paid:

1.2.1 For surgery or medical treatment if it is in the opinion of the Qualified Medical Practitioner treating the Insured Person that the treatment can be reasonably delayed until the Insured Person returns to Hong Kong.

1.2.2 If the purpose of the Journey is to obtain medical treatment or the Journey is undertaken against the Qualified Medical Practitioner's recommendation.

1.2.3 For any expenses incurred for services provided by another party for which the Insured Person is not liable to pay, or any expenses already included in the cost of the scheduled insured Journey.

1.2.4 For failure to obtain a written medical report from the Qualified Medical Practitioner.

1.2.5 If the Insured Person refuses to follow the recommendation of a Qualified Medical Practitioner to return to Hong Kong or to continue the Journey whilst the Insured Person's physical condition at the time of recommendation is fit for travel.

1.2.6 Any medical expenses incurred in Hong Kong.

1.2.7 For any additional cost of single or private room Accommodation at a Hospital or charges in respect of special or private nursing, non- medical personal services such as radio, telephone and the like; procurement or use of special braces, appliances or equipment.

1.2.8 For any cosmetic or other elective surgery and related complications, refractive errors of eyes, hearing- aids, and prescriptions therefor except necessitated by accidental Injury occurring during the Journey.

1.2.9 Any loss and expenses that can be reimbursed or recovered from any local health insurance.

1.2.10 For costs relating to any dental treatment.

## SECTION 2 – EMERGENCY MEDICAL ASSISTANCE

**2.1 Emergency Medical Evacuation.** When as a result of an Injury sustained or Sickness commencing while the Insured Person is traveling overseas during the Journey and if in the opinion of The Company or its Authorized Representative, it is medically appropriate to move the Insured Person to another location for medical treatment, or to return the Insured Person to Hong Kong or his/her habitual residence, the Company or its Authorized Representative shall arrange for the evacuation utilizing the means best suited to do so, based on the medical severity of the Insured Person's physical condition. The Company shall pay directly to the medical service provider the covered expenses up to the Benefit Limit stated in the Schedule of Benefits for such evacuation.

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

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

The Insured Person or a person on his/her behalf must contact the Assistance Hotline for the arrangement.

**2.2 Repatriation of Mortal Remains.** When, as a result of an Injury sustained or Sickness commencing while the Insured Person is traveling during the Journey, the Insured Person dies during

the course of the Journey, the Company or its Authorized Representative shall make the necessary arrangements for the return of the Insured Person's remains to Hong Kong or his/her habitual residence. The Company shall pay the actual cost incurred up to the Benefit Limit stated in the Schedule of Benefits for such repatriation.

In addition, the Company shall reimburse up to the Benefit Limit stated in the Schedule of Benefits for expenses actually incurred at the place of death outside Hong Kong for the reasonable cost of a casket, the embalming and cremation process rendered by a mortician or undertaker.

The Insured Person or a person on his/her behalf must contact the Assistance Hotline for the arrangement.

### **2.3 Exclusions Applicable to Section 2 - Emergency Medical Assistance.**

No benefits will be paid:

2.3.1 For surgery or medical treatment if it is in the opinion of the Qualified Medical Practitioner treating the Insured Person that the treatment can be reasonably delayed until the Insured Person returns to Hong Kong.

- 2.3.2 If the purpose of the insured Journey is to obtain medical treatment or the insured Journey is undertaken against the Qualified Medical Practitioner’s recommendation.
- 2.3.3 For any expenses incurred for services provided by another party for which the Insured Person is not liable to pay, or any expenses already included in the cost of a scheduled insured Journey.
- 2.3.4 For failure to obtain a written medical report from the Qualified Medical Practitioner.
- 2.3.5 If the Insured Person refuses to follow the recommendation of a Qualified Medical Practitioner to return to Hong Kong or to continue the Journey whilst the Insured Person’s physical condition at the time of recommendation is fit for travel.
- 2.3.6 For any additional cost of single or private room Accommodation at a Hospital or charges in respect of special or private nursing, non-medical personal services such as radio, telephone and the like; procurement or use of special braces, appliances or equipment.
- 2.3.7 For any cosmetic surgery, or other elective surgery and related complications, refractive errors of eyes, hearing- aids, and prescriptions therefor except necessitated by accidental Injury occurring during the Journey.
- 2.3.8 For any expenses for a service not approved and arranged by the Company or its Authorized Representative except that this exclusion shall be waived in the event the Insured Person cannot contact the Assistance Hotline during an emergency medical situation for reasons beyond their control. In any event, for Section 2.1 (“Emergency Medical Evacuation”), the Company reserves the right to reimburse the Insured Person only for those expenses incurred for service which the Company or its Authorized Representative would have provided under the same circumstances.
- 2.3.9 For any expenses incurred for the transportation of the Insured Person’s remains not approved and arranged by the Company or its Authorized Representative.

### SECTION 3 – PERSONAL ACCIDENT ON COMMON CARRIER

**3.1 Personal Accident on Common Carrier.** The benefit under this Section 3 is payable to the Insured Person who suffers accidental death or permanent disablement whilst as a passenger on a Common Carrier during the Journey which, directly and independently of all other causes, shall result in any event provided in the Schedule of Compensation hereunder (hereinafter called an “Event”), but only to the extent and if such Injury results in the Event happening within ninety (90) days after the date of the Accident.

Schedule of Compensation	
Accidental Death and Disablement	Percentage of Benefit Limit specified in the Schedule of Benefits
1. Death	100%

2. Permanent total disablement	100%
3. Permanent and Incurable paralysis of all limbs	100%
4. Permanent total loss of sight of both eyes	100%
5. Permanent total loss of or the use of two limbs	100%
6. Permanent total loss of speech	100%
7. Permanent total Loss of Hearing in:	
a) Both ears	75%
b) One ear	15%
8. Permanent total loss of sight in one eye	50%
9. Loss of or the Permanent total Loss of Use of one limb	50%

### 3.1.1 Compensation:

3.1.1.1 If more than one (1) of the above Events are applicable, only the Event with the highest compensation (i.e. the highest Percentage of Benefit Limit) will be payable under this Section 3 and in any event shall not exceed the Benefit Limit stated in the Schedule of Benefits.

3.1.1.2 The insurance for any Insured Person under this plan shall be terminated upon the occurrence of any loss for which compensation is payable under any one (1) of the above Events, but such termination shall be without prejudice to any claim originating out of the Accident causing such loss.

3.1.1.3 When a limb or organ which had been partially disabled prior to the Accident covered under this plan and which becomes totally disabled as a result of such Injury, the Percentage of Benefit Limit payable shall be determined by the Company having regard to the extent of disablement caused by the Injury. No payment however shall be made in respect of the loss of a limb or organ which was permanently disabled prior to the Accident.

3.1.1.4 The Company's maximum aggregated Benefit Limit under the Master Policy shall not exceed HK\$78,000,000 combined for all Insured Persons sustaining accidental death or permanent disablement whilst travelling in the same Common Carrier any one occurrence and any one Period of Insurance. In the event the aggregated Benefit Limit is insufficient to pay the full amount of benefits payable for each Insured Person, then the amount payable for each Insured Person would be reduced proportionately.

### 3.1.2 Exposure:

3.1.2.1 If by the reason of any covered Accident occurring during the Journey, the Insured Person is unavoidably exposed to the elements (including but not limited to prolonged Natural Disaster or Severe Weather) and as a direct and unavoidable result of such exposure sustains death, loss or disablement within twelve (12) months from the date of Accident, the Company will pay in accordance with the Events as stated in the Schedule of Compensation under Section 3 hereinabove.

### 3.1.3 Disappearance:

3.1.3.1 If the Insured Person disappears as a result of the disappearance, sinking or wrecking of the Common Carrier caused by an Accident in which the Insured Person was traveling at the time of the

Accident during the course of the Journey and remains missing after twelve (12) months from the date of the Accident, and the Company has reason to believe that the Insured Person has died in the Accident, the Company will pay the Personal Accident benefit, subject to receipt of a signed undertaking by the personal representative of the Insured Person's estate that any such payment shall be refunded to the Company if it is later discovered that the Insured Person did not die as a result of the Accident.

**3.2 Exclusion Applicable to Section 3 - Personal Accident on Common Carrier.** For the purpose of Section 3, in no event shall the Company be liable to pay for any loss caused by an Injury or otherwise which is a consequence of any kind of disease or Sickness.

## SECTION 4 – TRAVEL DELAY

**4.1 Travel Delay.** The Company shall pay up to the Benefit Limit as stated in the Schedule of Benefits in the event that the Common Carrier for the Insured Person to travel is delayed from the departure or arrival time specified in the itinerary.

Delay must exceed the minimum delay threshold (hours) shown in your Schedule of Benefits, and will be calculated from the original scheduled departure or arrival time specified in the itinerary provided by the Common Carrier to the Insured Person until the actual departure or arrival time.

### **4.2 Exclusions Applicable to Section 4 - Travel Delay.**

No benefits will be paid for:

4.2.1 Any loss arising from failure of the Insured Person to obtain written confirmation from the Common Carrier on the number of hours of and the reason for such delay.

4.2.2 Any loss arising from any event or occurrence leading up to the relevant delay which is announced before 100% of the payment of the Travel Fare using the Eligible Credit Card was paid.

4.2.3 Any loss arising from late arrival of Insured Person at the airport or port (i.e. arrival at a time later than the time required for check-in or booking-in except for the late arrival due to strike by the employees of the Common Carrier).

4.2.4 Any loss arising from failure of Insured Person to get on-board the first available alternative transportation offered by the administration of the relevant Common Carrier.

4.2.5 In respect of loss resulting directly or indirectly from insurrection, rebellion, revolution, civil War, usurped power, or action taken by Governmental Authorities in hindering, combating or defending against such an occurrence; or from action taken by any Government or Public Authority pursuant to any customs or other regulations to secure, destroy, quarantine or confiscate any property; or in respect of any property which is (or represents the proceeds of) contraband or which is or has been illegally transported or traded (or represents the proceeds of such actions).

## SECTION 5 – BAGGAGE DELAY ALLOWANCE

**5.1 Baggage Delay Allowance.** The Company shall pay the Benefit Limit as stated in the Schedule of Benefits for the temporary deprivation of the Insured Person's baggage due to the delay,

misdirection or temporary misplacement in delivery of the baggage by the Common Carrier on or in which the Insured Person is traveling during the Journey.

Delays must exceed the minimum delay threshold (hours) shown in your Schedule of Benefits, and will be calculated from the actual arrival of the Common Carrier to the time the baggage is received by the Insured Person.

## **5.2 Exclusions Applicable to Section 5- Baggage Delay Allowance.**

No benefits will be paid:

5.2.1 for the failure of the Insured Person to obtain written confirmation from the Common Carrier as to the number of hours and the reason for such delay.

5.2.2 for delays that occur during the Insured Person's return trip to Hong Kong.

5.2.3 with respect to any of the Insured Person's baggage which the Insured Person either intentionally sent by a different Common Carrier than the one in which the Insured Person was traveling, or with respect to any baggage, souvenir or other items which the Insured Person mailed or shipped separately.

5.2.4 in respect of loss resulting directly or indirectly from insurrection, rebellion, revolution, civil War, usurped power, or action taken by Governmental Authorities in hindering, combating or defending against such an occurrence; or from action taken by any Government or Public Authority pursuant to any customs or other regulations to secure, destroy, quarantine or confiscate any property; or in respect of any property which is (or represents the proceeds of) contraband or which is or has been illegally transported or traded (or represents the proceeds of such actions).

## **GENERAL CONDITIONS**

1. The Insured Person must be fit to travel and not be aware of any circumstances which could lead to a claim during the Journey.
2. Eligibility of this plan is restricted to residents of Hong Kong travelling overseas. Financial compensation will be paid to Hong Kong bank account only. Claims reimbursements shall only be transacted in Hong Kong Dollars and be paid into an account of licensed banks in Hong Kong, as authorized by the Hong Kong Monetary Authority.
3. This plan may not be renewed or extended. However, If any circumstance exists during the Journey which is outside the Insured Person's control and the Journey is extended beyond the period stated in the Terms & Conditions, the Company will automatically extend this plan for a maximum ten (10) consecutive days without charge for such an extended period as is reasonably necessary for completion of the Insured Person's Journey.
4. If any loss or damage covered under the Master Policy/this Plan is also covered by any other insurance, the Company shall not be liable under the Master Policy / this Plan except for any excess beyond the amount payable under such other insurance.
5. Any non-disclosure or fraudulent misrepresentation in any particular material shall lead to the whole plan being void from inception.

## GENERAL PROVISIONS

1. **Time of notice of claim.** Written notice of loss on which a claim may be based must be given to the Company as soon as it is reasonably possible, and no later than thirty (30) days after the date of the incident causing such loss. In the event of a claim under Section 3, immediate notice thereof must be given to the Company.
2. **Claims cooperation.** As a condition precedent to the Company's liability, the Insured Person should cooperate fully with the Company, and will upon request execute any document to empower Us to obtain relevant information.
3. **Forms for proof of loss.** The Company, upon receipt of such notice, will furnish to the Claimant such forms as are usually furnished by it for filing proofs of loss. If such forms are not so furnished within fifteen (15) days after the receipt of such notice, the Claimant shall be deemed to have complied with the requirements of this plan as to proof of loss upon submitting within the time fixed in this plan for filing proofs of loss, written proof covering the occurrence, character and extent of the loss for which a claim is made. All certificates, information and evidence required by the Company shall be furnished at the expense of the Claimant or his legal personal representatives and shall be in such form and of such nature as the Company may prescribe. The burden of proof rests entirely upon the Claimant.
4. **Time for filing proof of loss.** Affirmative proof of loss must be furnished to the Company at its said office within sixty (60) days after the date of the incident, failing which the Company shall have no liability for such loss. If it shall be shown not to have been reasonable possible to give such notice within such time, such proof is furnished as soon as reasonable possible and within one (1) year after the date of such loss.
5. **Sufficiency of notice.** Such notice by or on behalf of the Insured Person given to the Company, with particulars sufficient to identify the Insured Person shall be deemed to be notice to the Company. Failure to give notice within the time provided in this plan shall not invalidate any claim if it shall be shown not to have been reasonably possible to give such notice and that notice was given as soon as was reasonably possible.
6. **Immediate payment of indemnities.** All indemnities provided in this Plan for loss other than that of time on account of disability will be paid immediately after receipt of due proof.
7. **To whom indemnities are payable.** Any indemnity paid for loss of life shall be payable to the Insured Person's estate. All other indemnities shall be payable to the Insured Person except for Emergency Medical Evacuation and Repatriation of Mortal Remains where relevant amounts will be paid directly to the provider of service in accordance with the terms of this plan.
8. **Fraudulent claims.** If the claim be in any respect fraudulent or if any fraudulent means or devices be used by the Insured Person or anyone acting on the behalf to obtain any benefit under this this plan, all benefit in respect of such claims shall be forfeited.
9. **Right of recovery.** In the event that authorization of payment and/or payment is made by the Company and/or its authorized representative for a claim which is not covered under this this plan or when the limit of liability of this insurance exceeds, the Company reserves the right to recover the said sum or excess from the Insured Person.
10. **Medical examination and treatment.** The Company at its own expense shall have the right and opportunity to conduct medical examination on the Insured Person when and as often

as it may reasonably require during a pending claim under this plan and to make an autopsy in the case of death where it is not forbidden by law. The Insured Person shall as soon as possible after the occurrence of any Injury or Sickness obtain and follow the advice of a duly Qualified Medical Practitioner and the Company shall not be liable for any consequences arising by reason of the Insured Person's failure to obtain or follow such advice and use such appliances or remedies as may be prescribed.

11. **Subrogation.** In the event of any payment under this plan, the Company shall be subrogated to all the Insured Person's rights of recovery therefore against any person or organization and the Insured Person shall execute and deliver instruments and papers and do whatever else is necessary to secure such rights. The Insured Person shall take no action after the loss to prejudice such rights.
12. **Legal actions.** No action at law or in equity shall be brought to recover on this plan prior to the expiration of sixty (60) days after written proof of loss has been furnished in accordance with the requirements of this plan. No such action shall be brought after the expiration of three (3) years after the time written proof of loss is required to be furnished.
13. **Limitations controlled by statute.** If any time limitation of this insurance, with respect to giving notice of claim or furnishing proof of loss, is less than that permitted by the law of Hong Kong, such limitation is hereby extended to agree with the minimum period permitted by such law.
14. **Compliance with policy provisions.** Failure to comply with any of the provisions contained in this plan shall invalidate all claims hereunder.
15. **Plan interpretation.** This plan is subject to the laws of Hong Kong and the parties hereto agree to submit to the exclusive jurisdiction of the courts of Hong Kong.
16. **Clerical error.** Clerical errors by the Company shall not invalidate insurance otherwise valid nor continue insurance otherwise not valid.
17. **Prevailing language.** The terms and conditions in the Chinese policy wording is translated from this English version only for Your reference. Should there be any inconsistency between Chinese and English versions in policy wording, the English version shall prevail.

## GENERAL EXCLUSIONS

The Company will not pay under any section of this plan for loss, injury, damage or liability suffered and/ or sustained by or arising directly or indirectly as a result of or in connection with any of the following:

1. War, civil War, invasion, insurrection, revolution, use of military power or usurpation of government or military power.
2. No (re)insurer shall be deemed to provide cover or any benefit and no (re)insurer shall be liable to pay any claim hereunder to the extent that the provision of such cover or benefit or payment of such claim would expose that (re)insurer to any sanction, prohibition or restriction under relevant trade or economic sanction laws or regulations. Any travel to countries which were known to be at elevated risk with sufficient warning against travelling to such destination from media outlets or governmental agencies being issued prior to the Departure Date.

3. Any losses resulting from Your participation in Mountaineering, or undertaking Expeditions or similar activities.
4. Any losses resulting from Your participation in Trekking above 3,000 meters.
5. An Insured Person who is: a Terrorist; a member of a Terrorist organization; a narcotics trafficker; or a purveyor of nuclear, chemical or biological weapons.
6. Any illegal or unlawful act by the Insured Person or confiscation, detention, destruction by customs or other authorities;
7. Any prohibition or regulations by any government;
8. Any breach of government regulation or any failure by the Insured Person to take reasonable precautions to avoid a claim under this insurance following the warning of any intended strike by the employees of a Common Carrier, riot or civil commotion, Natural Disaster or Severe Weather.
9. The Insured Person is not taking all reasonable efforts to safeguard his/her property/money, to avoid Injury or to minimize any claim under this insurance;
10. Common Carrier's complete cessation of operations due to financial condition, with or without filing for bankruptcy.
11. Riding or driving in any kind of motor racing, competition, engaging in a professional capacity in any sport where an Insured Person would or could earn income or remuneration from engaging in such sport as a source of income; or participation in any of Extreme Sports and Sporting Activities;
12. Any loss which has connection with the effects of alcohol or drugs other than those prescribed by a Qualified Medical Practitioner;
13. Pregnancy or childbirth, and any Injury or Sickness associated with pregnancy or childbirth;
14. Suicide or attempted suicide or intentional self-Injury, or self- exposure to needless peril;
15. Any Pre-Existing Condition, congenital and heredity condition. This does not apply to Section 2.2 (Repatriation of Mortal Remains);
16. AIDS or any Injury or Sickness commencing in the presence of a seropositive test for HIV and related disease, sexually transmitted disease;
17. Pandemics or Epidemics;
18. Psychosis, sleep disturbance disorder, mental or nervous disorders;
19. The Insured Person engaging in naval, military or air force service or operations; armed force service; being as a crew member or an operator of any air carrier; testing of any kind of conveyance; engaging in any kind of labor work; engaging in offshore activities like commercial diving, oil rigging, mining or aerial photography; handling of explosives; performing as actor/ actress; being a site worker, fisherman, cook or kitchen worker; tour guide or tour escort;
20. Any medical treatment received during an Journey which was made for the purpose of receiving medical treatment or if the insured Journey was undertaken while the Insured Person was unfit to travel; or the Person is traveling against the advice of a Qualified Medical Practitioner;
21. Any loss and expenses that can be reimbursed or recovered from any other source;
22. Arising from nuclear explosion including all effects thereof or radioactive contamination caused by ionizing radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste caused by the combustion and/or ongoing combustion of nuclear fuel; or

the radioactive, toxic, explosive or other hazardous properties of any nuclear equipment or component thereof; or the dispersal or application of pathogenic or poisonous biological or chemical materials; or the release of pathogenic or poisonous biological or chemical materials.

23. Any loss incurred during a Journey for which the Travel Fare was not paid 100% using the Eligible Credit Card
24. Any losses incurred during the Journey that arises more than sixty (60) days after the Departure Date.

## PERSONAL INFORMATION COLLECTIONS AND USE STATEMENT

All personal data collected and held by Us will be used in accordance with our Personal Information Collection Statement, as notified to You from time to time and is available at this website: <https://www.personal.allianz.com.hk/en/footer/pics>

The Cardholder shall, and shall procure all other Insured Person covered under the Policy to authorized us to use and transfer data (within or outside of Hong Kong), including sensitive personal data as defined in the Personal Data (Privacy) Ordinance (Cap. 486 of the Laws of Hong Kong), for the obligatory purposes as set out in our Personal Information Collection Statement as applicable from time to time.

When information about a third party is provided by the Policyholder to us, the Policyholder warrant that proper consents from the relevant data subjects have been obtained before the personal data are provided to Us, enabling Us to assess, process, issue, and administer this plan including without limitation, conducting any due diligence, compliance and sanction checks on such data subjects.

# 渣打 Sign and Fly 旅遊保障計劃

## 計劃概要

安聯環球企業及專項保險（於德意志聯邦共和國註冊成立之有限公司）香港分公司（“本公司”）已向渣打銀行（香港）有限公司（“保單持有人”，“渣打香港”）發出一份保險集團保單（“主保單”）。本計劃概要旨在概述主保單下，作為受保人之合資格人士所享有的保障福利。

如果您有任何疑問，請聯繫我們。

地址：安聯全球企業及專業保險股份公司（在德意志聯邦共和國註冊成立，具有限責任）香港分公司  
香港太古城太古灣道 12 號 4 樓 403-11 室

電郵：SCBTravelSales@allianz.com

電話：+852 8100 2402（辦公時間：星期一至星期五，上午 9:00 至下午 5:30，公眾假期休息）

## 簡介

### 關於此計劃

本文件（「概要」）概述了您作為持卡人可在以下情況下可享受的保障：

- 在發生任何導致索賠的事故時，您是合資格信用卡持卡人；
- 您是香港居民，且正在海外旅行；
- 您使用合資格信用卡支付旅程的全部交通費用；並且
- 您整個旅程的持續時間不超過六十 (60) 天。

本計劃的保障範圍擴大至持卡人的配偶及其子女，前提是除持卡人本身符合上述資格外，還符合以下所有條件：

- 他們是香港居民；
- 他們與您同行同一旅程的整個期間；
- 持卡人配偶及其子女的百分之百(100%) 交通費用由持卡人的合資格信用卡支付。

本計劃承保保險期間無限次旅程。但每次旅程的承保期限最長為六十 (60) 天，自出發日期起計算。

下列保障須根據主保單中的限制、條款和條件。

保單持有人保留隨時取消任何持卡人在本計劃下提供服務的權利，保單持有人可以無論任何理由，均有權自行決定，並至少提前一 (1) 個月通知該持卡人。

本計劃概要、主保單、附表以及隨後簽發的任何批單應被視為一份合同。本概要、主保單或附表中任何部分中被賦予特定含義的詞語或表述，無論何時出現，均應具有該特定含義。

### 終止

若發生以下任何事件，持卡人享有本計劃保障的資格將立即終止：

- a) 本公司或保單持有人終止主保單或主保單到期；
- b) 受保持卡人經保單持有人確認並證明不再為合資格信用卡持卡人；
- c) 持卡人身故；或
- d) 受保人遭受第三部分「乘坐公共運輸工具而引致個人意外」所列的傷殘，且應付賠償金額達到保障限額的百分之百 (100%)。

### 重要提示

- 本計劃不承保受保人的任何已知情況或先前疾病。此項規定不適用於第 2.2 條（遺體遣返）。
- 本計劃不承保某些活動或旅行，包括但不限於：
  - 極限運動或體育活動或參與體育比賽；
  - 探險；

- 體力勞動；或
- 傳教或人道旅行

## 保障表

無論受保持卡人持有多少張合資格信用卡，本公司在主保單相應條款下的任何一個保險期間內的最高責任不得超過：

保障	每保險期間最高賠償金額（港幣）
<b>6. 海外醫療費用:</b>	每合資格信用卡 395,000
<i>限額:</i>	
• 持卡人	195,000
• 持卡人配偶	195,000
• 持卡人子女	195,000
<b>7. 緊急醫療支援</b>	
2.1 緊急醫療運送	每合資格信用卡 1,560,000
<i>限額:</i>	
• 持卡人	780,000
• 持卡人配偶	780,000
• 持卡人子女	780,000
2.2 遺體運返	每合資格信用卡 780,000
<i>限額:</i>	
• 持卡人	390,000
• 持卡人配偶	390,000
• 持卡人子女	390,000
<b>8. 乘坐公共運輸工具而引致個人意外</b>	每合資格信用卡 15,600,000
<i>限額:</i>	
• 持卡人	7,800,000
• 持卡人配偶	7,800,000
• 持卡人子女	975,000
<b>9. 旅程延誤</b>	每合資格信用卡 7,800
<i>限額:</i>	
• 持卡人	3,900 (每 6 小時 1,950)
• 持卡人配偶	3,900 (每 6 小時 1,950)
• 持卡人子女	3,900 (每 6 小時 1,950)
<b>10. 行李延誤津貼</b>	每合資格信用卡 15,600
<i>限額:</i>	
• 持卡人	3,900 (每 6 小時 1,950)
• 持卡人配偶	3,900 (每 6 小時 1,950)

<ul style="list-style-type: none"> <li>• 持卡人子女</li> </ul>	3,900 (每 6 小時 1,950)
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## 一般定義

在本保單內，下列詞彙應具有以下涵義：

「**意外**」是指在受保旅程期間因不可預見及非自願事件而造成損傷。

「**住宿**」是指房間收費。

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

「**支援熱線**」是指本公司提供的全日 24 小時客戶電話中心或授權代表。

「**授權代表**」是指 Allianz Worldwide Partners (Hong Kong) Limited ("安聯"), 為安聯環球企業及專項保險 (於德意志聯邦共和國註冊成立之有限公司) 香港分公司之委任的保單管理人，負責安緊急援助服務。

「**行李及個人物品**」是指您的行李箱、箱子及類似容器，包存放其中的物品或您穿戴或攜帶的物品，包括您的貴重物件，但不包括任何單車、用於商業用途的樣本或您計劃交易的物品、護照或旅遊文件、現金、鈔票、紙幣、支票、可轉讓票據、任何類型的船隻 (衝浪板除外)、傢具、家居陳設、家居電器、租用物品或任何其他於您的計劃概要及條款或細則列為不包括的物品。

「**保障限額**」是指保障表中所涵蓋的每項保障的最高金額。

「**持卡人**」或「**您**」或「**您的**」是指渣打香港合資格信用卡的持有人，該信用卡在任何引致索償的事件發生時仍然有效。

「**持卡人配偶**」是指受保持卡人的合法已婚配偶。

「**持卡人子女**」是指受保持卡人受扶養的未婚且未滿十八 (18) 歲的親生子女或合法收養子女。

「**中醫**」是指根據中醫藥條例 (香港法例第 549 章) 合法註冊成為中醫跌打、針灸或中醫師，但是若果中醫為受保人本人或其直系家屬則除外。

「**慢性病**」是指持續 1 年或更長時間並且需要持續進行的醫療護理或限制日常生活或兩者兼而有的疾病，包括但不限於心血管和腦血管疾病，高血壓，糖尿病。

「**索賠人**」是指依本計劃提出索賠的受保人。

「**公共運輸工具**」是指由正式持牌以定期運載及由乘客購票付費的運輸商所提供及經營的任何巴士、旅遊巴士、的士、渡輪、氣墊船、水翼船、輪船、火車、電車或地下鐵路，以及正式持牌定期運載由乘客購票付費的航空公司或包機公司所提供及經營的定翼飛機，以及由正式持牌定期運載由乘客購票付費的航空公司提供及經營並僅來往既定商用機場或持牌商用直升機場的直升機，以及任何設有固定路線及時間表的機場客車。

「**住院**」是指受保人因醫療需要被醫院接收為住院病人以接受執業醫生專業護理的期間，並就相關住院的受傷或疾病須治療向醫院支付病房及膳食費用。

「**牙科治療**」是指在海外因意外引致的，必要且合理的緊急牙科治療。

「**出發日期**」是指受保人從香港 (或出發地，如果受保旅程非由香港出發) 出發前往目的地的日期。

「**合資格信用卡**」是指由保單持有人發出的渣打銀行Visa Signature商務卡及/或渣打銀行Visa Infinite信用卡及/或渣打銀行Priority Banking信用卡。

「**大規模流行性疾病**」是指由世界衛生組織 (WHO) 代表或官方政府機構認可或提及並被視為流行病的傳染病。

「**探險**」是指前往高風險、交通不便及/或荒涼的地點的任何旅程，包括但不限於在一個國家的海岸附近的私人組織皮划艇旅行或前往一個未經探索或地圖未標明且一般交通不便的國家領土或地區的旅行，或為科學、研究或政治目的前往該等地點的旅行或前往南極洲或類似的偏遠荒涼的地點的旅行。探險並不是指在所述例子以外，由獲認可的導遊公司提供、開放予公眾參與且不設限制 (一般健康狀況或合適性警告除外) 的跋涉及旅行，但前提是您在導遊公司的合資格導遊及/或在指導員指引及監督下行動。

「**極限運動及體育活動**」是指其性質存有高度的危險性 (即涉及高度專門技術、超乎正常的體力運用、使用專門工具或特技等) 的任何運動或體育活動，包括但不限於衝巨浪；冬季活動例如雪橇滑雪、有舵雪橇滑雪、在非雪道區域滑雪或在超過中級水平的雪道上滑雪、雪橇或滑雪板跳躍或特技表演；單車、機動車、飛行器或船舶速度測試或特技表演；潛水至超過海平面以下30米的深度；獨木舟激流；跳懸崖；馬術障礙賽；馬球和特技表演。這不是指開放予公眾參與、不設限制 (高度或一般健康狀況或合適性警告除外) 並由獲認可的當地導遊公司/活動提供者提供的一般旅遊活動，但前提始終是您在開展該旅遊活動的導遊公司/活動提供者的合資格導遊及/或是指導員的是指引及監督下進行。

「**香港**」是指香港特別行政區。

「**醫院**」是指依法運作的醫院 (不包括用作照顧老人或長期病患者的機構或療養、休養或護理機構、或酗酒或吸毒者治療所，或類似目的機構)，用以照顧及治療患病或受傷人士，設有診斷及施行手術的設施，並提供24小時護理服務及醫療監察。

「直系家屬」是指受保人的配偶、父母、配偶之父母、(外)祖父母、子女、兄弟姐妹、(外)孫兒女或合法監護人。

「受傷」是指直接在意外及別無其他原因下蒙受的身體損傷。

「受保人」是指持卡人, 持卡人配偶, 及持卡人子女。

「旅程」是指受保人的旅程, 從受保人在出發日期離開香港入境事務處櫃檯開始, 直至主保單到期日或受保人旅程結束後抵達香港入境事務處櫃檯, 以較早發生者為準。旅程的持續時間不得超過六十(60)天。

於單程的單次旅遊計劃中, 是指受保人離開香港(或出發地, 如果受保旅程非由香港出發)入境事務處櫃檯開始, 直至「受保人」到達列明於行程表內之最後目的地之入境事務處櫃檯為止。

「喪失」或「喪失功能」是指手腕或足踝以上之部位永久完全失去功能或手腕或足踝以上之部位永久完全分離; 若套用於眼睛, 須是指視力完全喪失及無法恢復。

「失聰」是指一隻耳朵的聽力永久完全喪失及該耳朵無法藉外科手術或其他治療來恢復聽力。

「失明」是指一隻眼睛完全喪失視力及該眼睛無法藉外科手術或其他治療來恢復視力。

「喪失語言能力」是指永久完全喪失語言能力且無法藉外科手術或其他治療來恢復語言能力。

「醫療必需費用」是指由受保人所須及已支付予執業醫生、醫生、外科醫生、護士、醫院及/或救護車服務的費用, 包括醫藥、手術、X光檢查、醫院或護理治療包括醫療用品、租用救傷車的費用及牙科治療, 但不包括本保單內第2.1條(緊急醫療運送)及第2.2條(遺體運返)所需的任何費用。本保單僅負責賠償經執業醫生所處方或治療的費用。倘受保人可從任何其他來源取回全部或部份費用, 本公司則僅負責賠償剩餘未取回的費用。

「登山」是指通常必需使用特定設備上山或下山的活動, 該等設備包括但不限於冰爪、鎬、錨、螺釘、登山扣及登山繩或頂繩錨固設備。

「自然災害」是指大規模的極端天氣或環境事故, 造成財產損毀, 破壞交通或公用設備或危及人類, 包括但不限於: 地震, 火災, 洪水, 颶風或火山爆發。

「機會感染」包括但不限於卡氏肺囊蟲肺炎 (pneumocystis carinii pneumonia)、慢性腸炎生物的生物體 (organism of chronic enteritis)、病毒及/或擴散性真菌傳染。

「廣泛性流行性疾病」是指被世界衛生組織 (WHO) 代表或官方政府機構認可或提及為大流行的流行病。

「保額百分比」是指本保單第3項(乘坐公共運輸工具而引致個人意外)賠償表中的投保額百分比, 用以計算應付賠償。

「保險期」是指主保單的生效日期和到期日。

「永久」是指由意外發生之日起計損害情況持續至少十二（12）個月，並於此段時間結束時沒有任何好轉跡象。

「永久完全傷殘」是指由意外發生之日九十（90）天後變成傷殘，且屬永久及完全妨礙受保人從事任何類型的業務或有薪工作，或倘受保人沒有從事任何業務或工作，則是指完全不能進行其日常一般會進行的活動。

「保單持有人」是指渣打銀行（香港）有限公司。

「已先存在狀況」是指以下：

- (a) 受保人或直系家庭成員在出發日期前一年內已被合格醫療從業人員診斷、治療或檢查的任何病況；
- (b) 受保人或直系家庭成員在出發日期之前正在服用處方藥的任何病況；
- (c) 以及受保人或直系家庭成員被認為是慢性疾病的任何病況。

「主要居所」是指受保人在香港的主要居所。

「執業醫生」是指於其執業地區獲具司法管轄權的政府合法授權提供醫療或外科服務的任何人士，惟倘執業醫生為受保人或受保人直系家屬則不包括在內。

「保障表」是指在此計劃概要中記錄保障的列表和該保單向受保人提供的總賠償額及個別項目賠償額的詳細列表。

「嚴重受傷或病重」是指受保人需接受治療、且被執業醫生診斷為有生命危險及令受保人不適宜旅遊或繼續其原定受保旅程的受傷或疾病。當「嚴重受傷或病重」引用在受保人的直系家屬時，其須是指受保人直系家屬需接受治療、且被執業醫生診斷為有生命危險及引致受保人不能再繼續或須取消其原定受保旅程的受傷或疾病。

「惡劣天氣」是指危險的天氣狀況，包括但不限於暴風雨，颱風，颶風，龍捲風，大霧，冰雹，暴雨，暴風雪或冰暴。

「疾病」是指在受保旅程期間直接及別無其他原因被感染且於受保旅程期間開始的疾病或病症。

「病徵」是指一名人士出現失調或染病的跡象或症狀。

「恐怖分子」或「恐怖分子組織成員」是指任何作出或企圖作出恐怖活動、或參與或促成恐怖活動、及/或被任何政府或機關或委員會核實或認定或是指稱為恐怖份子的任何人士。

「恐怖活動」是指進行任何實際或恐嚇使用武力或暴力手段務求或造成損害、損傷、傷害或干擾的行為，或任何針對個人、財產或政府且對生命或財產構成威脅的行為，而表明或未有表明的目的為達至經濟、血統、民族、政治、種族或宗教利益，不論該等利益有否被宣告。主要為個人利益而作出的刑事行為及主要為因施虐者及受害人先前的個人關係導致的行為，不得被視為恐怖活動。

恐怖活動亦包括經（相關）政府核實或認定為恐怖活動的任何行為。

「交通費用」是指乘坐任何公共運輸工具所購買的旅行票或票價相關的費用。

「跋涉」是指通過山地、國家公園或保護區過夜的遠足、徒步、跋涉或類似活動，通常通過徒步進行，但可以通過其他方式，包括但不限於動物或越野車輛，其中涉及到在野外過夜，包括露營地、棚屋或小屋。為澄清起見，這並不是指登山。

「正常、合理及慣性」是指以下的費用是：

- (a) 在執業醫生照料、監督或命令下為照料受保人和醫療所需而使用的治療、藥物或醫療服務；
- (b) 在局部地區引出的治療、藥物或醫療服務，其收費不超出類似項目的正常水平；及
- (c) 不包括當沒有保障時將不會收取的費用。

「戰爭」是指戰爭（無論有否宣戰）或任何近似戰爭的活動，包括任何主權國動用軍事力量以達至經濟、地理、民族、政治、種族、宗教或其他目的。

「我們」或「我們的」或「我們」或「本公司」是指安聯環球企業及專項保險（於德意志聯邦共和國註冊成立之有限公司）香港分公司。

## 保障(第 1 – 5 項)

### 第1項- 海外醫療費用

**1.1 海外醫療費用:** 若受保人在旅程期間因受傷或疾病，需在當地治療之受傷或疾病醫療費用，而受保人在回港前須就該等受傷或疾病支付醫療費用，本公司將根據保障表訂定的投保額賠償有關醫療費用，該醫療費用須：

1.1.1 由受保人於首次受傷或感染疾病起計一百八十(180)日內導致的；及

1.1.2 於當地由執業醫生所收取的正常、合理及慣性醫療必需費用。

### 1.2 適用於第 1 項- 海外醫療費用的不受保項目

以下情況將不受保障：

1.2.1 根據執業醫生的意見，受保人的手術或治療可以合理地延期至受保人返回香港後進行。

1.2.2 倘受保旅程的目的是為進行醫療相關之治療；或受保旅程是在違反執業醫生的建議下進行。

1.2.3 任何由另一方提供但受保人無需支付的任何費用或服務，或已包括在受保旅程所支出的任何費用。

1.2.4 未能提供執業醫生之書面醫療報告。

1.2.5 受保人拒絕跟從執業醫生的建議返回香港或在受保人身體狀況許可下，拒絕繼續其受保旅程。

1.2.6 在香港境內的醫療費用。

1.2.7 任何於醫院獨立或私家病房住院、或特別或私家看護費用；非醫療個人服務，例如收音機、電話等；購買或使用特別支架、器具或儀器的額外費用。

1.2.8 任何整容手術或其他選擇性手術及相關併發症、眼睛折射造成的誤差、助聽器及佩戴眼鏡的費用，但於受保旅程期間因意外受傷所引致的必要費用除外。

1.2.9 任何本地醫療保險中可以報銷或獲得賠償的損失和費用。

1.2.10 任何牙科治療相關費用。

## 第 2 項- 緊急醫療支援

**2.1 緊急醫療運送:** 當受保人因於受保旅程期間因行程中受傷或疾病，並在本公司或其授權代表經評估後認為醫療上適宜將受保人移送至另一個地點接受治療，或將受保人送返香港或其慣常居住地，本公司或其授權代表會根據受保人身體狀況的醫療嚴重性，安排最合適的醫療運送方法。本公司將直接向醫療服務供應方支付保障費用，金額不超過保障表所載相關運送的投保額。

保障費用是指由本公司或其授權代表因緊急運送受保人而提供及/或安排之運送、醫療服務及醫療設備等產生的必需費用。

本公司或其授權代表安排的運送方式可包括空中救護、地面救護、一般航空運輸、鐵路或任何其他合適方式。有關運輸方式及最終目的地的所有決定將由本公司或其授權代表作出，並只會基於醫療上的必要性作出決定。

受保人或其代表必須致電救援熱線以獲得上述安排。

**2.2 遺體運返：** 當受保人於受保旅程期間因行程中受傷或疾病而死亡，本公司或其授權代表將安排受保人的遺體運返香港或其慣常居住地。本公司將支付賠償實際開支的金額，但不超過保障表所載相關運返的保障額。

此外，對於在香港以外的死亡地點就棺材、殯葬業者或殯儀員進行的屍體防腐處理及火葬程序產生的合理開支，本公司將支付賠償實際開支的金額，但不超過保障表所載相關的保障額。受保人或其代表必須致電救援熱線以獲得上述安排。

### 2.3 適用於第 2 項- 緊急醫療救援的不受保項目：

以下情況將不受保障：

2.3.1 根據執業醫生的意見，受保人的手術或治療可以合理地延期至受保人返回香港後進行。

2.3.2 倘受保旅程的目的為進行醫療相關之治療或受保旅程是在違反執業醫生的建議下進行。

2.3.3 由另一方提供的服務但其任何費用並非由受保人負責，或已包括在受保旅程費用的任何支出。

2.3.4 未能提供執業醫生的書面醫療報告。

2.3.5 受保人拒絕跟從執業醫生的建議返回香港，或在受保人的身體狀況許可下，拒絕繼續其受保旅程。

2.3.6 任何於醫院的獨立或私人病房住院、或特別或私家看護的額外費用；非醫療個人服務，例如收音機、電話等；購買或使用特別支架、器具或儀器的額外費用。

2.3.7 任何整容手術或其他選擇性手術及相關併發症、眼睛折射造成的誤差、助聽器及佩戴眼鏡的費用，但於受保旅程期間的意外受傷所引致的除外。

2.3.8 任何未經本公司或其授權代表批准及安排的服務費用；受保人在緊急醫療情況期間，在其可控制範圍內無法聯絡救援熱線的職員除外。在任何情況下，於第 2.1 條「( 緊急醫療運送)」下，本公司保留權利僅賠償受保人於有關服務引致的費用，惟該服務須為在同一情況下，本公司或其授權代表亦會同意提供。

2.3.9 任何未經本公司或其授權代表批准及安排的受保人遺體運返費用。

### 第 3 項–乘坐公共運輸工具而引致個人意外

**3.1 乘坐公共運輸工具而引致個人意外：**本第 3 項的保障金額將支付給受保人在旅途中作為公共運輸工具的乘客遭受意外死亡或永久性殘疾賠償，如在受保旅程期間受保人受傷，而該受傷直接及獨立於其他原因導致以下賠償表所列出的事件發生 (以下稱為「事件」)，受保人可獲得此保障，惟事件必須於意外發生當日起九十 ( 90 ) 天內發生。

賠償表	
意外死亡及殘疾	投保額百分比
1. 死亡	100%
2. 永久完全傷殘	100%
3. 永久及無法痊癒之四肢癱瘓	100%
4. 雙眼永久完全失明	100%
5. 喪失任何雙肢或任何雙肢永久完全殘廢	100%
6. 永久喪失說話能力	100%
7. 永久完全失聰:	
A) 雙耳	75%

B) 單耳	15%
8. 一眼永久完全失明	50%
9. 喪失任何一肢或任何一肢永久完全殘廢	50%

### 3.1.1 賠償:

3.1.1.1 倘若多於一 ( 1 ) 項上述的事件合資格，則僅最高賠償額 ( 即投保額百分比最高者 ) 的事件可根據第 3 項獲賠償，並且在任何情況下賠償不得超出保障表所載的相應保障額。

3.1.1.2 當受保人出現任何損失，因而可索取上述任何一 ( 1 ) 項事件的賠償時，本保單的保障便會終止；惟該終止不會影響因該意外造成損失的任何索償。

3.1.1.3 當受保人的手腳任何一肢或器官於本保單受保意外前已喪失部份功能，現因受傷變成完全傷殘時，本公司須以傷殘程度釐定應付的投保額百分比；惟意外前手腳任何一肢或器官已永久傷殘，其損失則不會獲得任何賠償。

3.1.1.4 本公司於主保單項下就所有受保人於任何一次事故及任何保險期間內乘坐同一公共運輸工具，如於旅行期間遭遇意外身故或永久傷殘，最高賠償限額合計不得超過港幣 78,000,000 元。如主保單項下的最高賠償限額合計不足以支付每位受保人的全部賠償金額，則每位受保人應得的賠償金額將按比例減少。

### 3.1.2 暴露:

3.1.2.1 倘若受保人在受保旅程期間發生任何受保意外，受保人因此無可避免地暴露於風險性元素 ( 包括但不限於持續自然災害或惡劣天氣 )，由意外當日起計十二 ( 12 ) 個月內，相關風險性元素直接及無可避免地導致死亡、損失或傷殘，本公司將根據第 3 項的保障表所列的事件支付賠償。

### 3.1.3 失蹤:

3.1.3.1 倘若受保人在受保旅程期間遇上意外，導致其乘坐的公共運輸工具失蹤、沉沒或失事及受保人失蹤，而在意外當日起計十二 ( 12 ) 個月後受保人仍然失蹤時，並且本公司有理由相信受保人已在意外中死亡，本公司將支付個人意外保障，惟必須先收到由受保人的遺產代理人簽署的承諾書，承諾如果日後發現受保人沒有因該意外死亡，本公司將獲所支付的全部金額退還。

**3.2 適用於第 3 項- 乘坐公共運輸工具而引致的個人意外的不受保項目：**在第 3 項下於任何情況下本公司均無需就因受傷或任何種類病症或疾病造成的損失負責支付賠償。

#### 第 4 項- 旅程延誤

**4.1 旅程延誤：**倘若受保人在受保旅程期間擬乘坐的公共運輸工具較其行程表所列的出發時間延誤，本公司將支付金額不超過保障表所載的相應投保額。

旅程延誤必須超過承保表中所列出的最短延誤時間（以小時為單位），計算延誤的時間，是由公共運輸工具提供的行程表上原本所列的出發或到達時間起計，直至實際出發或到達時間為止。

#### 4.2 適用於第 4 項- 旅程延誤的不受保項目

以下情況將不受保障：

4.2.1 受保人沒有提供公共運輸工具的書面證明列明延誤的小時數目及延誤原因。

4.2.2 在使用合資格信用卡支付全額百分之百(100%) 旅程的費用及交通費前，任何已公佈有事件或事故會導致相關的延誤。

4.2.3 受保人沒有準時到達機場或港口（即其到達時間遲於辦理登記或預訂手續所規定的時間，因公共運輸工具僱員罷工除外）。

4.2.4 受保人沒有登上由相關公共運輸工具的行政部門提供的最早替代交通工具。

4.2.5 損失是直接或間接地基於：騷亂、叛亂、革命、內戰、奪權或政府機關為制止、打擊或防範上述各項所採取的行動；或任何政府或公共機關根據任何慣例或其他規例去獲取、銷毀、隔離或充公任何財產；或有關財產屬違禁品（或其收益）或正被或曾被非法運送或交易（或其活動帶來的收益）。

#### 第 5 項- 行李延誤津貼

**5.1 行李延誤津貼：**在受保旅程期間，倘若因受保人乘坐的公共運輸工具延誤把受保人的行李送運、送運到錯誤地方或錯誤轉寄或暫時誤放，導致受保人在抵達目的地暫時無法獲得該行李，本公司將支付此保障表所載的相應投保額。

行李延誤必須超過承保表中所列出的最短延誤時間（以小時為單位），計算延誤的時間，是由公共運輸工具提供的行程表上原本所列的出發或到達時間起計，直至受保人收到行李為止。

#### 5.2 適用於第 5 項- 行李延誤津貼的不受保項目

以下情況將不受保障：

5.2.1 受保人沒有提供公共運輸工具的書面證明列明延誤的小時數目及延誤原因。

5.2.2 受保人返回香港時發生的損失。

5.2.3 受保人故意以另一公共運輸工具（而非受保人乘坐者）運送任何受保人行李，或受保人另行郵寄或寄送任何行李、紀念品或其他物品。

5.2.4 損失是直接或間接地基於：騷亂、叛亂、革命、內戰、奪權或政府機關為制止、打擊或防範上述各項所採取的行動；或任何政府或公共機關根據任何慣例或其他規例去獲取、銷毀、隔離或充公任何財產；或有關財產屬違禁品（或其收益）或正被或曾被非法運送或交易（或其活動帶來的收益）。

#### 一般條件

1. 在本計劃生效時，受保人必須適宜旅遊及不知悉任何可能導致受保旅程取消或中斷的情況，否則一切索償不將受理。
2. 本計劃僅供前往海外的香港居民。有關之賠償將支付至合法持牌之香港銀行戶口，並以港元結算。
3. 本計劃不可續期或延長。然而，如果在受保旅程期間出現任何超出受保人控制範圍的情況，使受保旅程超過其保障表上所定的日期時，本公司將自動免費最多延長連續十（10）天，讓受保人享有合理需要的時間去完成受保旅程。
4. 若任何受本主保單/本計劃所保障的損失或損毀，亦同時受任何其他保險所保障，則本公司將不再根據主保單/本計劃承擔責任，惟超出該其他保險應付之賠償額的部份則不在此限。
5. 任何個別資料如未有披露或出現欺詐性失實陳述，將令本計劃自初始起失效。

## 一般條款

- 1. 索償通知的期限。** 損失索償的書面通知,必須於造成相關損失事故發生之日起計三十 ( 30 ) 天內送交本公司。如果意外涉及死亡,則必須立刻通知本公司。
- 2. 理賠合作。** 作為本公司承擔責任的先決條件, 受保人應與本公司通力合作, 並須應本公司要求簽署任何所需文件, 以授權本公司獲取相關資料。
- 3. 損失證明的形式。** 本公司接獲索償通知後, 將申請賠償表格給予索償人, 提交損失證明。假如索償人於通知發出後十五 ( 15 ) 天仍未收到該申請賠償表格, 索償人可將事故的發生、性質與損害程度於本保單內損害證明遞交之期限前提提交本公司, 本公司會將此證明視作已符合本保單條款之要求。本公司所需之任何證明、資料及證據, 須依據本公司所定之形式及性質提交, 而所需費用概由受保人/索償人或其法定遺產代理人承擔。
- 4. 提交損失證明的期限。** 受保人如要申索損失賠償時, 則必須於六十 ( 60 ) 天內把損失證明提交本公司前文所述辦事處。倘若受保人在合理情況下未能於該限期內提交相關通知, 則須於合理可行的情況下儘快在相關損失發生之日一 ( 1 ) 年內提交。
- 5. 充份通知。** 由受保人或其代表發予本公司、且當中所載資料足以識別受保人身份的通知, 須視為是為發送本公司的通知。假如通知未能於本保單訂明時間內發出, 惟可證明在合理情況下於訂明時間發出通知並不可行, 並且有關通知已於合理可行的情況下已儘快提供, 則任何索償均不會無效。
- 6. 即時支付賠償金。** 除有關殘疾的損失索償外, 當接獲所需的證明文件後, 將根據本保單立即作出合理賠償。
- 7. 賠償金之支付。** 倘若受保人死亡, 賠償金將賠償予受保人的遺產, 任何其他賠償則支付給受保人本人, 惟緊急醫療運送及遺體運返除外; 根據本保單相關條款, 這兩項的有關金額將直接支付給服務供應方。
- 8. 欺詐性索償。** 倘若索償存有任何欺詐成份, 或受保人或其代表以任何欺詐手段或方法獲取本保單任何索償, 則相關索償的所有賠償均會作廢。
- 9. 追討權利。** 倘若本公司及/或其授權代表授權支付及/或已支付不包括在本保單保障範圍內的索償, 或超出本計劃的責任上限, 本公司保留向受保人追討上述款項或超額部份的權利。
- 10. 身體檢查及治療。** 於處理本保單的賠償申請時, 在合理需要時本公司有權及機會檢查受保人身體及如果受保人死亡, 在法律許可下進行驗屍。受保人在出現任何受傷或疾病後須儘

快獲取及跟從執業醫生的建議。對於因受保人未有獲取及跟從相關建議及未有使用可能處方的相關用具或補救方法引致的任何後果，本公司無需負責。

11. **取代權**。根據本保單支付任何款項後，本公司將取得受保人向任何人士或機構追討賠償的一切權利。受保人須為使本公司取得相關權利簽立及交付文據及文件，並進行其他所需的行動。受保人在損失該權利後不得採取任何對相關權利造成損害的行動。
12. **法律行動**。在根據本保單規定提交書面損失證明後的六十（60）天屆滿前，不得採取法律上或衡平法上的行動以要求賠償。任何訴訟不得於損失證明提交時限後的三（3）年屆滿後提出。
13. **法規限制**。倘若本計劃任何時間限制（就為索償發出通知或提供損失證明而言）較香港法律容許者短，相關限制謹此延長至法律容許的最短期限。
14. **遵從保障計劃條文**。受保人如未有遵從本保障計劃所載任何條文，本保障計劃單項下所有索償將屬無效。
15. **保單詮釋**。本保障計劃受香港法律規限，訂約各方謹此同意接受香港法院的專屬司法管轄權管轄。
16. **書寫錯誤**。本公司的文書錯誤不會使有效的保障無效，亦不會使無效的保障有效。
17. **語言**。本中文版的保單條款和條件乃根據英文版翻譯而成，以供參考，如發現與英文版本的條款有差別，條款將以英文版本為準。

### 主要不保項目

因為或有關以下任何一項項目直接或間接引致、蒙受及或承擔的遺失、受傷、損毀或責任，本公司不會支付本保單任何條目下的保障：

1. 戰爭、內戰、侵略、騷亂、革命、使用軍事力量、或政府或軍事奪權；
2. 任何（再）保險公司均不得被視為有提供任何保障或利益，亦無須對本保單項下之任何索賠承擔賠付責任，倘若提供此類保障或利益或支付此類索賠，會使該（再）保險公司遭受相關貿易或經濟制裁法律或法規下之任何制裁、禁令或限制。前往任何為人知悉屬高風險的國家，在出發日期前，傳媒或政府機關已充份發出反對旅遊的警告；
3. 任何因您參與登山或探險或類似活動引致的損失；
4. 任何因您參與跋涉高於海拔 3,000 公尺以上地方所引致的損失；
5. 受保人是：恐怖份子；恐怖份子組織成員；毒販、或核子、化學或生物武器供應商；
6. 受保人任何違法或不法行為或海關或其他機關的任何充公、拘押、銷毀；
7. 任何政府的任何禁制或規例；

8. 對政府規例的任何違反或有關公共運輸工具僱員任何計劃罷工、暴亂或內亂、自然災害、惡劣天氣發出警告後,受保人未有採取合理防範措施避免本計劃項下索償;
9. 受保人未有盡所有合理努力保護其財產/金錢、避免損傷或減低本計劃項下的索償;
10. 因財務狀況出現問題、有或沒有申請破產,而導致公共運輸工具完全停止營運;
11. 受保人乘坐或駕車輛用作賽車、比賽或任何專業運動,當中受保人會或可以賺取收入或酬金作為收入來源;或受保人參與任何極限運動及體育活動;
12. 與酒精或非執業醫生處方藥物影響有關而引致的任何損失;
13. 懷孕或分娩,及與懷孕或分娩有關的任何受傷或疾病;
14. 自殺或企圖自殺或蓄意自殘,或自行暴露於非必要危害中;
15. 任何已存在狀況、先天及遺傳狀況;此項不適用於第 2.2 條(遺體運返)
16. 愛滋病或人體免疫力缺乏病毒血清測試呈陽性反應的任何受傷或疾病及相關疾病、經由性接觸傳染的疾病;
17. 廣泛性流行性疾病或大規模流行性疾病;
18. 精神病、睡眠障礙症、精神或神經錯亂;
19. 受保人參與海軍、陸軍、空軍服務或行動;武裝部隊服務;作為任何航空運輸工具的成員或操作員;測試任何類型的運輸工具;參與任何類型的體力工作;參與離岸活動,例如商業潛水、鑽油、採礦或航拍;處理爆炸品;以演員身份演出;擔任地盤工人、漁民、廚師或於廚房工作;導遊或領隊;
20. 於以下情況下在受保旅程期間接受的任何治療:受保旅程目的為接受治療,或受保人在不適宜旅遊的情況下進行受保旅程,或受保人不理會執業醫生的反對進行旅遊;
21. 可經任何其他來源獲賠償或追討的任何損失及開支;
22. 由於核爆炸包括其所引致的後果或因游離輻射引致的放射性污染或由任何核廢料或由核燃料燃燒及/或持續燃燒所引致的放射性污染;或任何核能裝置或組件造成的放射性、有毒、爆炸性或其他危險性物質;或散播或運用致病或有毒生物或化學材料;或釋放致病或有毒生物或化學材料。
23. 於旅途中並未使用合資格信用卡所支付百份之百(100%)的交通費用而產生的任何損失。
24. 於旅途中超過出發日期後六十(60)天發生的任何損失。

### 收集及使用個人資料聲明

我們將根據本公司不時通知保單持有人及您的收集個人資料聲明使用所有已收集及持有的個人資料，您亦可透過此網址查閱有關收集個人資料聲明：

<https://www.personal.allianz.com.hk/tc/footer/pics>

您會，及會促使保單內其他受保人士，授權我們根據我們於不時適用之收集個人資料聲明所詳列的強制性用途，使用及轉發（至香港境內或境外）包括屬敏感性如香港法例第 486 章《個人資料（私隱）條例》中所定義之個人資料。

如保單持有人或您向我們提供任何第三者資料，保單持有人及您必須保證於提供此等個人資料予我們前已獲得有關資料當事人之正式同意，使我們可以評估、處理、簽發及執行管理本保單，包括但並不限於進行任何對有關資料當事人進行審慎調查、合規及製裁查核。