

Complimentary Travel Insurance
Citi ULTIMA World Elite Mastercard
(Applicable for trips commencing 1 August 2023)

Master Policy Number : CT000014

Policyholder : Citibank Singapore Limited ("Citibank")

Address of Policyholder : 5 Changi Business Crescent, #05-00, Singapore 486027

For The Benefit Of : Citi ULTIMA World Elite Mastercard Cardholders ("Cardholders")

Insurer : HL Assurance Pte Ltd ("HL Assurance")

Address of Insurer : 11 Keppel Road, #11-01 ABI Plaza, Singapore 089057

The benefits under this group insurance:

- are free of charge for Cardholders, their legal spouse and Child(ren);
- made available based on the terms of coverage with HL Assurance, as reproduced below; and
- subjected to:
 1. amendments following a joint decision by Citibank and HL Assurance.
 2. cancellation by Citibank, which thirty (30) days' notice in writing are given to HL Assurance, in which case HL Assurance will retain the customary 15% of the premium in respect of the unexpired period of the Policy. No refund will be made once a claim has been paid under this Policy or HL Assurance may cancel this Policy by giving Citibank thirty (30) days' notice in writing. After cancellation of the Policy, the proportionate part of any premium received in respect of the unexpired period of the Policy will be refunded to Citibank.
 3. renewal of the Policy by payment of the agreed premium.

The Cardholders will have the right to make claims on their own with HL Assurance, as Insured Persons of this Policy within the relevant terms, conditions and exclusions as set out herein.

SCHEDULE OF BENEFITS

SECTION	BENEFITS	MAX BENEFIT PAYABLE		
		CARDHOLDER	ACCOMPANYING SPOUSE	ACCOMPANYING CHILD
PERSONAL ACCIDENT				
1	Accidental Death / Permanent Disablement For Singapore as Country of Residence (Covered Trip departing from Singapore and return to Singapore)	\$ 1,000,000	\$ 50,000	\$ 15,000
	Accidental Death / Permanent Disablement For Country of Residence outside Singapore (Covered Trip departing from Insured's Country and return to Insured's Country of Residence)	\$ 100,000	\$ 50,000	\$ 15,000
MEDICAL EXPENSES				
2	Overseas Medical Expenses	\$ 500,000 Excess: Nil	\$ 3,000 Excess: \$ 100 for each and every claim	\$ 1,000
TRAVEL INCONVENIENCE				
3	Baggage Loss (pays up to \$500 per article)	\$ 1,000		
4	Baggage Delay (\$200 for every 6 hours)	\$ 600		
5	Flight Delay (\$200 for every 6 hours)	\$ 600		
6	Trip Cancellation / Loss of Deposit / Trip Curtailment	\$ 600		
7	Kidnap and Hostage (\$1,000 for every 24 hours)	\$ 10,000		
LIABILITY				
8	Personal Liability	\$ 500,000		

LIFESTYLE				
9	Rental Car Excess	\$ 1,000		
10	Credit Card Purchase Protection (per cardholder per policy year)	\$ 50,000	N.A.	N.A.
11	Credit Card Extended Warranty (per cardholder per policy year)	\$ 50,000	N.A.	N.A.
EMERGENCY MEDICAL ASSISTANCE (APPLICABLE ONLY FOR TRIPS COMMENCING FROM SINGAPORE)				
12	Emergency Medical Assistance and Evacuation	\$ 100,000		
13	Emergency Medical Repatriation			
14	Local Burial/ Repatriation of Mortal Remains			
COVID-19 BENEFITS (APPLICABLE ONLY FOR CARDHOLDER)				
15	Overseas Medical Expenses due to COVID-19	\$ 50,000		
16	Overseas Hospital Allowance due to COVID-19	\$ 1,000		

For the full coverage, exclusions and other terms and conditions of this insurance, please refer to the attached policy.

Contact Us

HL Customer Care	Mondays to Fridays, 9am to 6 pm (Exclude Public Holidays)	(65) 6702 0202	Fax (65) 6922 6002	service@hlas.com.sg
HL Assurance Claims		(65) 6922 6003	Fax (65) 6224 1923	claims@hlas.com.sg

SPECIMEN

POLICY DEFINITIONS

This Policy, the Schedule, Endorsements, Proposal Form, Declaration and attached papers together with any other statement in writing 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 Policy shall bear such meaning wherever it may appear.

“Accident or Accidental” means a sudden and unforeseen event that solely and independently results in Bodily Injury, disablement or death and which is not caused by any Sickness or naturally occurring medical conditions or degenerative process.

“Age” means the current age. A person is considered to be of his/her current age until his/her next birthday.

“Common Air Carrier” means any 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 regularly scheduled airport limousine, airport transit system operating on fixed routes and schedules.

“Benefit Limit” means the Maximum Benefit Payable as stated in the Schedule of Benefits.

“Bodily Injury” means physical Bodily Injury to the Insured Person occurring during the Covered Trip caused solely and directly by an Accident and not by illness, disease or gradual physical or mental wear and tear.

“Cardholder” means CITI ULTIMA cardholders (including supplementary cardholders) age between eighteen (18) to seventy (70) years old where the card is issued from Citibank for their Asia Pacific card holders.

“Child(ren)” means the Insured Person's unemployed and unmarried dependent child(ren), including step or legally adopted child(ren), above three (3) months old but below eighteen (18) years old, or between the ages of eighteen (18) and twenty-five (25) years of age, if the child(ren) is enrolled or still studying full-time or awaiting enrolment as a full time student in a recognised tertiary institution at the commencement of this insurance. Age is calculated as a last birthday.

“Chinese Physician/ Chiropractor” means a person qualified by a medical degree/certification and duly licensed or registered to practice Chinese medicine or Chiropractic in the geographical area of his practice, and who in rendering such services is practicing within the scope of his licensing and training but excluding a Chinese Physician or Chiropractor who is Insured Person's spouse, relative or employee.

“Country of Residence” means Singapore or country in which the Insured Person is residing and such country has been declared to Us.

“Concessionary Fare” means

- Discounted tickets offered by an Common Air Carrier or other conveyance operator.
- Tickets offered on special promotions, including free tickets given together with purchased tickets, the cost of which have been charged to the CITI ULTIMA Card account, provided purchased tickets and free tickets were issued in the name of the Insured Person.
- Tickets offered as part of Citibank Rewards Programme or similar programs offered by Citibank with or without additional cost chargeable. In the event that cost is

chargeable, 100% of such cost must be charged to the Insured Person's CITI ULTIMA card.

“Covered Trip” means a Round Trip, which fulfills the following conditions:

- where the Full Fare has been charged to the Cardholder's CITI ULTIMA card, or
- where the travel ticket has been acquired with points earned by a rewards program associated only with the CITI ULTIMA card, or
- where the travel ticket has been partially acquired with points earned by a rewards program associated only with the CITI ULTIMA card and with the balance of the fare charged only to the CITI ULTIMA card.

For the avoidance of doubt, in the event that any portion of the Round Trip does not fulfil the conditions mentioned above, that portion of the Round Trip shall not be covered under this Policy.

A Covered Trip shall be deemed to have commenced three (3) hours before the Insured Person leaves the Country of Residence as the original point of departure and shall cease on the earliest of any of these events:

- the expiry of the period specified in the Policy;
- the Insured Person's return to his Home;
- within three (3) hours upon arrival into Country of Residence;
- the completion of any one Covered Trip, where the Covered Trip forms a part of a Round Trip;
- the 30th day of any one Round Trip.

“COVID-19 related Medical Expenses” means the charges after deduction of all government subsidies (if any) for diagnostic test or procedure, medical treatment, surgical operation medical supplies, medicine, or ambulance services received in a Hospital or rendered or recommended or prescribed by a Registered Medical Practitioner necessary to treat the medical conditions related to or arising from COVID-19 after the Insured Person is tested positive for COVID-19. All treatment including specialist treatment must be prescribed or referred by a Medical Practitioner in order for expenses to be reimbursed under this Policy, which reimbursement will not exceed the usual level of charges for similar treatment, medical services or supplies in the location where the expenses were incurred had this insurance not existed.

“Diagnosed” means the diagnosis of the Insured Person's medical condition from medical testing laboratories that are either recognized by the respective governments Competent Authorities or accredited in the area of molecular microbiology or immunology, excluding any self-testing.

“Dental Treatment” means a treatment that is medically necessary to restore sound and natural teeth due solely to an Accident and is carried out by a qualified and licensed dentist.

“Extreme Sports” means 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 specialised gear or stunts) including but not limited to big wave surfing, canoeing down rapids (Grade 4 and above), cliff jumping, horse jumping, racing or motor rallies, off-piste skiing, potholing, ultra-marathons, biathlons, triathlons and stunt riding.

“Full Fare” means the fare associated with a Round Trip travel ticket and which is charged entirely or in instalments to the Citi ULTIMA Card or Concessionary Fare.

“Fully Vaccinated” means to be vaccinated with any vaccines, including booster dose, approved under the World Health

Organisation Emergency Use Listing (WHO EUL) or Singapore's National Vaccination Programme and served the respective duration post-vaccination for the vaccine to be fully effective and which the National Immunisation Registry (NIR) reflects the vaccinated status.

"Hospital" means an institution lawfully operated for the care and treatment of injured or sick persons with organized facilities for diagnosis and surgery, having twenty-four (24) hours per day nursing services by legally qualified registered nurses and medical supervision under Registered Medical Practitioners, but not including any institution used primarily as a clinic, a nursing or convalescent home, a place of rest, a geriatric care facility, a mental institution, a rehabilitation or extended care facility, or a place for the care or treatments of alcoholics or drug addicts.

"Home" means the Insured Person's permanent place of residence in the Country of Residence.

"Immediate Family Member" means the Insured Person's legal spouse, Children, parents, parents-in-law, siblings, grandparents, grandparents-in-law and grandchildren.

"Loss of Limb" means loss by physical severance of a hand at or above the wrist or of a foot at or above the ankle.

"Loss of Sight" means the entire irrecoverable loss of sight, and which is beyond remedy by any form of medical treatment.

"Loss of Speech" means the disability in articulating any three (3) of the four (4) sounds which contribute to the speech such as the Labial sounds, the Alveololabial sounds, the Palatal sounds and the Velar sounds or total loss of vocal cord or damage of speech centre in the brain resulting in Aphasia.

"Master Policy" means the Policy issued by Us to Citibank which offers the benefits under this Policy.

"Medical Expenses" means the charges for diagnostic test or procedure, medical treatment, surgical operation, nursing care, medical supplies, Dental Treatment (as a result of Bodily Injury only), medicine, physiotherapy or ambulance services received in a Hospital or rendered or recommended or prescribed by Registered Medical Practitioner. All treatment including specialist treatment must be prescribed or referred by a Medical Practitioner in order for expenses to be reimbursed under this Policy, which reimbursement will not exceed the usual level of charges for similar treatment, medical services or supplies in the location where the expenses were incurred had this insurance not existed.

"Overseas" means the countries specified in the air ticket outside Insured Person's Country of Residence.

"Pandemic" means an infectious disease, including Covid-19, that is declared by the World Health Organisation or the Ministry of Health as a Pandemic.

For the avoidance of doubt, Covid-19 is defined as an infectious disease named by the World Health Organisation as "COVID-19" and caused by the severe acute respiratory syndrome SARS-COV-2 and falls within the above definition of a Pandemic.

"Period of Insurance" means the period of time the Insured Person is covered by this insurance commencing from the effective date to the expiration date of this Master Policy.

"Personal Documents" means, visa, identity card, driving license or like documents of identity, credit card or travelling pass.

"Personal Effects" means items of personal use, worn or carried by the Insured Person.

"Permanent Total Disablement" means disablement that solely directly and totally renders the Insured Person is unable to engage in any occupation for the remainder of his or her life as determined in writing by way of a medical report issued by a Registered Medical Practitioner, such medical report to be issued only after the Insured Person was unfit to work for a period of twelve (12) continuous months from the date of the Bodily Injury as proven by medical certificates to that effect.

"Pre-existing conditions" means an Bodily Injury or an Sickness which existed or symptoms or manifestations of which existed within one hundred and eighty-two (182) days prior to the commencement date of the Covered Trip with respect to an Insured Person based on normal medically accepted pathological development of the Bodily Injury or Sickness, or of which the Insured Person was aware or should reasonably have been aware, irrespective of whether treatment was actually received.

"Policyholder" means Citibank and named as such in the Policy and who makes a declaration on behalf of all persons insured under this Policy.

"Registered Medical Practitioner" means a person qualified by degree in western medicine and duly licensed or registered with the relevant medical board or council to practice medicine and surgery in the geographical area of his practice, and who in rendering such services is practicing within the scope of his licensing and training. The attending Registered Medical Practitioner shall not be an Insured Person's employee, the Spouse or relative.

"Round Trip" means a trip taken by an Insured Person departing from and returning to Country of Residence, as shown by an Insured Person's travel ticket.

"Serious Bodily Injury or Serious Sickness" when applied to the Insured Person, means Bodily Injury or Sickness as a result of which the Insured Person requires treatment by a Registered Medical Practitioner and that results in the Insured Person being certified by the Registered Medical Practitioner as being unfit to continue with the Covered Trip. When applied to the Insured Person's Travel Companion or Immediate Family Member, it means Bodily Injury or Sickness that is certified as being life threatening by a Registered Medical Practitioner and which results in cancellation of the scheduled Covered Trip.

"Sickness" means any sudden and unexpected deterioration of the Insured Person's physical health due to a medical condition contracted, commencing or manifesting during the Covered Trip outside Singapore, which requires the treatment by a Registered Medical Practitioner provided the Sickness is not a Pre-Existing Medical Condition and the nature of the Sickness is not excluded from this Policy.

"Spouse" means the legal spouse of the Cardholder between the age of eighteen (18) and seventy (70) years old.

"Theft, Burglary or Robbery" means dishonestly and illegally taken against the Insured Person's Will, whether by stealth, by force or threat of force or by coercion.

"Travel Alert" means the communication, announcement and/or advisory issued by Singapore authorities recommending postponement of all non-essential travel such as the Ministry of Foreign Affairs (MFA) and/or Ministry of Health (MOH).

“Travel Companion” means an accompanying person without whom the Covered Trip cannot commence or continue but excluding a tour leader or group leader who is receiving remuneration in monetary form or in kind.

“We/Our/Us/Insurer” means HL Assurance Pte Ltd.

“Insured Person” means Cardholder between the age of eighteen (18) and seventy (70) years old who purchased / transacted his/her Full Fare using his/her CITI ULTIMA card. Insured Person is extended to include Spouse and Child(ren) of the Cardholder, whose Full Fare has also been purchased through their CITI ULTIMA card. Cover for Spouse and Child(ren) are only valid when travelling together with the Cardholder for the Covered Trip, departing and returning to the Country of Residence together. For Section 10 and 11, the purchase of Full Fare is not required.

POLICY COVERAGE

SECTION 1 – PERSONAL ACCIDENT

If the Insured Person suffers Bodily Injury caused by an Accident whilst on a Covered Trip, which results in death and/or Permanent Disablement as specified below, within twelve (12) months from the date of Accident, We will pay the Insured Person the relevant Percentage of Benefit Limit as specified hereunder:

Our maximum liability to the Insured Person for all benefits payable for death and/or Permanent Disablement sustained by the Insured Person shall not exceed the maximum limit of \$1,000,000 per life. This is notwithstanding if our payment to discharge such liability is under this policy or under any other policy/policies or under a combination of this policy and such other policy/policies provided always that such other policy/policies is/are issued by Us to Citibank.

Scale of Compensation

Covered Event		Percentage of Benefit Limit
1	Accidental death	100%
2	Permanent Total Disablement: - Loss of two limbs - Loss of both hands or of all fingers and both thumbs - Total and permanent loss of sight of both eyes - Total paralysis - Injuries resulting in being permanently bedridden - Any other Bodily Injury causing permanent total disablement - Loss of hand at wrist - Loss of arm - at shoulder; between shoulder and elbow; at and below elbow - Loss of leg - at hip; between knee and hip; below knee	100%
3	Loss of - four fingers and thumb of one hand - four fingers of one hand	50% 40%
4	Loss of thumb - both phalanges - one phalanx	25% 10%

5	Loss of index finger - three phalanges - two phalanges - one phalanx	15% 10% 5%
6	Loss of middle finger - three phalanges - two phalanges - one phalanx	10% 7% 3%
7	Loss of ring finger - three phalanges - two phalanges - one phalanx	10% 7% 3%
8	Loss of little finger - three phalanges - two phalanges - one phalanx	10% 7% 3%
9	Loss of metacarpals - first and second (additional) - third, fourth or fifth (additional)	3% 2%
10	Loss of toes - All - great, both phalanges - great, one phalanx or any other toes	15% 5% 2%
11	Loss of hearing - both ears - one ear	75% 20%
12	Loss of Speech	50%
13	Loss of Sight - of one eye, except perception of light and/or lens of one eye	50%

In the event of the Insured Person's death, the benefits payable for death under this Section will be paid to the Insured Person's legal personal representative(s).

Exclusion to Section 1

- No payment shall be made in respect of the loss of a limb or an organ which was wholly or partially useless prior to the Bodily Injury.
- Satisfactory proof of death or Bodily Injury shall be provided at the Insured Person's or the legal representatives' own expenses.

MEDICAL EXPENSES

Section 2 – OVERSEAS MEDICAL EXPENSES

We will reimburse the Insured Person up to the Benefit Limit specified for Medical Expenses incurred for Sickness or Bodily Injury sustained during the Covered Trip.

Our maximum liability for Medical Expenses incurred whilst on a Covered Trip for treatment by Chinese Physician/Chiropractor:

- Cardholder – Up to a limit of \$300
- Spouse – Up to a limit of \$200
- Child – Up to a limit of \$100

The total Medical Expenses incurred shall not exceed the maximum Benefit Limit under Section 2 of the Schedule of Benefits. All treatment relating to 2(a) and 2(b) above must be prescribed by a Registered Medical Practitioner in order for the expenses to be reimbursed. If the Insured Person are entitled to a refund of all or part of such expenses from other sources,

we will only be liable for the amount that exceeds the reimbursement recoverable from such other sources.

Exclusions applicable to Section 2

We will not pay for claims in respect of:

1. Meals and other incidental expenses except those incurred by the Insured Person during hospitalisation for medical treatment at registered medical institution.
2. Treatment, aid or follow-up obtained in Country of Residence.
3. Surgery or medical treatment, which in the opinion of the medical practitioner treating the Insured Person can be reasonably delayed until the Insured Person's return to Country of Residence.
4. Treatment for Pre-existing Conditions.
5. Prosthesis, hearing aids, dentures or medical appliances and equipment expenses.

TRAVEL INCONVENIENCES

SECTION 3 - BAGGAGE LOSS

Up to \$1,000 limit shared amongst all Insured Persons Per Covered Trip.

We will reimburse the Insured Person for loss of or damage due to Theft, Burglary or Robbery to the Insured Person's personal baggage and Personal Effects taken along or purchased during the Covered Trip, We will reimburse up to the Benefit Limit payable.

All items must be owned by or in the custody of the Insured Person.

In the event that the Insured Person purchases a comparable replacement for the lost article, we will pay the replacement cost provided the lost article was not more than two years old at the date of loss. If the Insured Person cannot prove the age of the lost article, or if the article is more than two years old, or if the article is not replaced, we will deal with the claim the basis of original purchase value of the article less depreciation or the cost of repair, whichever is the lesser.

If any article is proven to be beyond economical repair, a claim will be dealt with under this policy as if the article had been lost.

In the event of loss of or damage to any property insured forming part of a pair or set, Our liability shall not exceed a proportionate part of the value on the pair or set.

We shall not be liable for more than

- a) \$500 in respect of any one article or pair or set of articles.
- b) \$250 in total in respect of money, travel tickets and visas and passports.

Provided that:

1. Each loss must be reported to the police or relevant Authority such as hotel and airline management having jurisdiction at the place of the loss within twenty-four (24) hours after the incident. Any claim must be substantiated by written documentation from such authorities.
2. The Insured Person must take every possible precaution for the safety of his/her personal effects and baggage to ensure that they are not left unattended in a public place.
3. If the Insured Person is able to prove that an article is beyond economical repair, a claim will be dealt with as if the article had been lost.

Exclusions applicable to Section 3

We will not pay for claims in respect of

1. Loss or damage arising from delay, confiscation, detention, requisition or destruction by Customs or other officials.
2. Loss or replacement of credit cards, cash card, Personal Documents, stamps, bonds, coupons, negotiable instruments, title deeds, manuscripts, securities or documents of any kind.
3. Breakage or damage to fragile articles (excluding cameras and tape recorders) unless caused by an Accident to the conveyance in which the baggage is being carried.
4. Normal wear and tear, gradual deterioration, or mechanical or electrical breakdown or derangement or any process of cleaning, restoring, repainting or alteration.
5. Loss or damage while in the custody of an airline or other carrier, unless reported immediately on discovery and in the case of an airline, a Property Irregularity Report obtained upon its discovery.
6. Losses due to Theft, Burglary or Robbery unless reported to the local police, where the loss occurs, within twenty-four (24) hours of loss and a local police report is obtained.
7. Business goods or samples or equipment of any kind.
8. Perishables such as fruits or food articles and consumable articles such as cosmetics, toiletries, contact or corneal lenses, skincare products and perfume.
9. Sports equipment, musical instruments, dentures or bridges for teeth.
10. Traveler's cheques.
11. Unattended properties unless kept inside a locked hotel room, or in the care and custody of an airline, carrier or hotelier.
12. Loss or damage to personal computers (except for laptops) portable personal data processing/storage equipment, tablets and communication equipment, and their accessories.
13. Unexplained and mysterious disappearance of the Insured Person's baggage or Personal Effects.
14. Loss or damage due to the Insured Person's omission, negligence or carelessness.
15. Animals, motor vehicles (including accessories), motorcycles, boats, motors and any other conveyance.
16. Paintings, antiques, artifacts, objects of art or gemstones.

This Policy will only pay for claims from either Section 3 or 4 for the same event but not from both.

SECTION 4 - BAGGAGE DELAY

Up to \$600 limit shared amongst all Insured Person Per Covered Trip.

In the event that the Insured Person's checked-in baggage is delayed (meaning temporarily misplaced in transit or misdirected by the carrier and not returned to the Insured Person for at least six (6) hours after his/her arrival at the baggage pick-up point of the scheduled overseas destination or Country of Residence, We shall pay the Insured Person

\$200 for each continuous six (6) hour period, up to the Benefit Limit.

The delay must be verified in writing by the operator(s) of the conveyance or their handling agent(s) on the number of hours delayed and the reason for the delay.

The Insured Person cannot claim under both Sections 3 and 4 for the same event.

SECTION 5 - FLIGHT DELAY

Up to \$600 limit shared amongst all Insured Person Per Covered Trip.

If during the Covered Trip the departure of the Common Air Carrier in which the Insured Person had arranged to travel is delayed for at least six (6) hours from the time specified in the itinerary due to:

- a) due to strike/industrial action, adverse weather conditions or mechanical breakdown/derangement of that Common Air Carrier or
- b) due to interruption of the journey of that Common Air Carrier as a result of mechanical or structural defect.

We will pay the Insured Person up to \$200 for the full six (6) hours delay (the delay being calculated from the departure time of the Common Air Carrier specified in the itinerary, up to the Benefit Limit payable.

Exclusions applicable to Section 5

We will not pay for:

1. Delay arising from the fault of the Insured Person.
2. Failure to obtain verification in writing from the Common Air Carrier on the number of hours of delay.
3. Delay arising from known circumstances on the date the Covered Trip is arranged.
4. Strike or other industrial action, adverse weather conditions, mechanical breakdown or derangement or structural defect of the Common Air Carrier, existing at the booking of the Covered Trip.
5. Loss that is covered by any other existing insurance scheme, government program or that it will be paid or refunded by a hotel, Common Air Carrier, travel agent or any other provider of travel and/or accommodation.

SECTION 6 – TRIP CANCELLATION OR LOSS OF DEPOSIT OR TRIP CURTAILMENT

Up to \$600 limit shared amongst all Insured Persons Per Covered Trip.

We will reimburse the Insured Person up to the Benefit Limit payable for loss of travel and/or accommodation expenses paid in advance by the Insured Person which are not recoverable from any other source consequent upon the cancellation of the planned Covered Trip after the insurance has been effected and which cancellation occurred within thirty (30) days before the date of commencement of the Covered Trip and which is as a result of:

- a) death or Serious Bodily Injury or Serious Sickness, witness summons or compulsory quarantine occurring to the the Insured Person, Immediate Family Member or Travel Companion;

- b) Unexpected outbreak of strike, riot or civil commotion arising out of circumstances beyond the Insured Person control at the planned destination.
- c) Hijacking of the Common Air Carrier in which the Insured Person is on board as a passenger.
- d) Natural disasters, which prevent the Insured Person from continuing with the scheduled Covered Trip.

Exclusions applicable to Section 6

We will not pay for

1. Government regulations or act, delay or amendment of the booked itinerary, or failure in provision of any part of the booked holiday (including error, omission or default) by the provider of any service forming part of the booked holiday as well as of the agent or tour operator through whom the holiday was booked.
2. Any unlawful act or criminal proceedings of the the Insured Person or any person on whom the holiday plan depends on.
3. The Insured Person's disinclination to travel or due to the Insured Person's financial circumstances.
4. Any loss resulting from a Pandemic.
5. Loss that is covered by any other existing insurance scheme, government program or that it will be paid or refunded by a hotel, Common Air Carrier, travel agent or any other provider of travel and/or accommodation.
6. Any Sickness or disease, Pre-Existing Medical Condition, compulsory quarantine, strike or other industrial action, riot or civil commotion not assuming the proportions of or amounting to an uprising, military or usurped power, hijack, adverse weather condition or Travel Alert existing at the booking of the Covered Trip.
7. The Insured Person's failure to notify travel agent/ tour operator or provide of transport or accommodation immediately upon finding it necessary to cancel or curtail the travel arrangement.
8. The use for any air miles, holiday points, membership or credit card redemption the Insured Person has used to pay for all or part of the Covered Trip.

SECTION 7 - KIDNAP AND HOSTAGE

Up to \$10,000 limit shared amongst all Insured Persons Per Covered Trip.

In the event the Insured Person is kidnapped and taken hostage against his/her will during the Covered Trip whilst overseas with the intent of obtaining a ransom to secure the Insured Person's release, We shall pay \$1000 for each continuous twenty-four (24) hours period, up to the Benefit Limit.

Exclusions applicable to Section 7

We will not pay any benefit in this Section for loss or damage due to the following:

1. If the kidnap is performed by one of the Insured Person(s), Immediate Family Members, Travel Companion, business partners/agent, the Insured Person's employer or employees whether acting alone or colluding with others.
2. Events which takes place in the Insured Person's Country of Residence, any country located in Central or Southern

America or Africa, or any country in which United Nations armed forces are present and active.

3. Unless reported to the local police, where the kidnap occurs, within twenty-four (24) hours of the Insured Person's release and a local police report is obtained.

LIABILITY

SECTION 8 - PERSONAL LIABILITY

Up to \$500,000 limit shared amongst all Insured Persons Per Covered Trip.

We will indemnify the Insured Person up to the Benefit Limit against:

1. Legal liability to a third party during the Covered Trip as a result of:
 - a) accidental Bodily Injury or death to a third party; or
 - b) accidental loss of or damage to property belonging to a third party.
2. The third party's costs and expenses recoverable against the Insured Person in respect of their claim for such Bodily Injury, loss of or damage to property belonging to the third party; and
3. The Insured Person's costs and expenses incurred in dealing with such claim in respect of such legal liability with Our prior consent.

The total benefit payable under Section 8 shall not exceed the Benefit Limit.

Exclusions applicable to Section 8

We will not pay for claims arising out of, in respect of, consequent upon:

1. Employer's liability, contractual liability.
2. Liability to a member of the Insured Person's Immediate Family Members or the Insured Person's co-workers.
3. Property, animals belonging to the Insured Person, or, in the Insured Person's care custody or control.
4. Any willful, malicious or unlawful act.
5. Pursuit of trade, business or profession.
6. Ownership or occupation of land or buildings (other than occupation only of any temporary residence).
7. Ownership, possession or use of vehicles, Common Air Carrier or watercraft or any other conveyance.
8. Legal costs resulting from any criminal proceedings.
9. (a) Asbestos, or
(b) Any actual or alleged asbestos related injury or damage involving the use, presence, existence, detection, removal, elimination or avoidance of asbestos or exposure or potential exposure to asbestos in whatever form or quantity.
10. Any activities and/or business conducted and/or transactions via the Internet, Intranet, Extranet and/or via the Insured Person's website, Internet site, web address and/or via the transmission of electronic mail or documents by electronic means.

This Clause shall not extend this Policy to cover any liability which would not have been covered under this Policy had this Clause not been attached.

LIFESTYLE

SECTION 9 - RENTAL CAR EXCESS

Up to \$1000 limit shared amongst all Insured Person Per Covered Trip.

We shall pay up to the Benefit Limit for any car rental excess payable by the Insured Person under the rental car agreement in respect of loss or damage to the rental car due to an Accident or Theft of the rental car while overseas for private and leisure use during the Covered Trip.

Exclusions applicable to Section 9

1. The rental vehicle must be rented from a licensed rental agency whilst overseas.
2. If the Insured Person is not the named driver or co-driver of the rental car.
3. If the Insured Person do not hold a valid license to drive the rental car. If a comprehensive motor insurance against loss or damage to the rental car during the rental period as part of the rental agreement is not taken up.
4. Any loss or damage caused by the Insured Person's non adherence or violation to the requirements of the rental agreement, laws, rule and regulations of the country.
5. Any loss or damage arising from wear and tear, gradual deterioration, damage from insects or vermin, built-in faults, or faults or damage which are not obvious.

SECTION 10 - Credit Card Purchase Protection

Up to \$50,000 per Cardholder per policy year.

If the Cardholder suffers loss of or damage to any of the items purchased from and within Singapore (excluding any items shipped or transported into Singapore) during the Period of Insurance with the Cardholder's Citi ULTIMA Credit Card, We will pay the Cardholder in respect of such loss or damage up to \$20,000 per item or occurrence, and up to the Benefit Limit payable and subject also to such loss or damage happening within ninety (90) days from the first date of purchase, and such item must be paid in full by the Cardholder.

We shall at our sole discretion either repair or replace the damage or lost items belonging to a pair or set or indemnify the Cardholder for the first purchase price of the set or pair subject to the terms and conditions herein, and provided that the items are unusable individually and cannot be replaced individually.

The Cardholder shall bear the first \$2,000 of each valid claim. If a claim for the same item has been made under Section 3 herein, this Section shall not apply for such item.

Exclusions applicable to Section 10

In addition to the General Exclusions, this section does not cover and We will not in any event be liable in respect of any claim under this Section 10 for the loss of any of the following:

1. Items costing less than \$10,000 per item
2. Items left unattended in a public place
3. Damage caused intentionally by the Cardholder or any members of the Cardholder's household
4. Theft by any members of the Cardholder's household
5. Where a report to the appropriate authorities has not been made within forty-eight (48) hours after the damage or theft was discovered and a report obtained
6. Normal wear and tear
7. Damage to items arising from inherent product defects

8. Unexplainable and mysterious disappearance of the items
9. Theft from Motorized vehicles
10. Repairs &/or replacements costs covered under all forms of warranties, including but not limited to the original manufacturer's warranties and/or Extended Warranty under Section 11.

ITEMS NOT COVERED

- a) Motorized vehicles, including but not limited to cars, trucks motorcycles, boats, airplanes, and their parts.
- b) Motorized devices and their parts which are permanent additions or fixtures to a residential or commercial building;
- c) Business fixtures including, but not limited to, air conditioners, refrigerators, heaters;
- d) Land or buildings;
- e) Consumable or perishable items;
- f) Animals or living plants;
- g) One-of-a-kind products which cannot be replaced;
- h) Items purchased for resale or for professional or commercial use;
- i) Items purchased on credit for which the Cardholder is still liable for instalment payments;
- j) Cash, or its equivalent, travellers cheques, tickets or any negotiable instrument
- k) Jewellery, watches, precious metal and gem stones which the Cardholder brings during overseas travel, unless carried by hand and under the personal supervision of the Cardholder or Travel Companion.

Section 11 - Credit Card Extended Warranty

Up to \$50,000 per Cardholder per policy year.

If, during the Period of Insurance, the Cardholder purchases a Covered Appliance from and within Singapore (excluding any products shipped or transported into Singapore) with Citi ULTIMA Credit Card and with a minimum cost of \$5,000 each, up to the Benefit Limit and subject also to a limit of three (3) Covered Appliances per policy year, We will extend the period of the original manufacturer's warranty by twelve (12) months, provided always that the period of original manufacturer's warranty and any extended period of warranty under this benefit shall not add up to more than twenty-four (24) months from the first date of purchase.

When the original manufacturer's warranty expires, this Extended Warranty protection takes effect providing coverage for such Covered Appliance.

Coverage is provided for any cost of labour (excluding transportation incurred by the manufacturer or agent to inspect/collect the Covered Appliance) or parts used to repair or correct any malfunction, defect or damage of the Covered Appliance covered by the terms of the warranty given under the original manufacturer's warranty. Any repair shall be carried out by an authorized repair agent of the manufacturer, or at Our discretion, any person appointed by Us to carry out such repair. We have the right and option to either repair or replace the Covered Appliance with another of like kind, quality and specification, subject to the maximum claim amounts set out above at original purchase price less 10% depreciation for each year thereafter or part thereof.

The Covered Appliance must be owned by the Cardholder and paid in full.

The Cardholder shall bear the first \$2,000 of each valid claim

COVERED APPLIANCES

- Washing Machine
- Vacuum Cleaner
- TV
- VCR

- Air Conditioner
- Mobile Phone
- Receiver/ Amplifier/ Speaker
- Dryer (clothes)
- Dishwasher
- Electric Stove
- Refrigerator
- Microwave
- Camera
- Heater

EXCLUDED APPLIANCES

- Computer (including notebook and other portable computing devices)
- Printer
- Monitors
- Modem
- PDAs
- MP3 Players
- Any products used for commercial purposes

Exclusions applicable to Section 11

1. In addition to the General Exclusions and notwithstanding any contrary to the terms of warranty given under the original manufacturer's warranty, this Policy does not cover and We will not in any event be liable in respect of any claim under this Section 11 for the loss due to:
 - a) Failure to follow the manufacturer's instructions and/or installation guide.
 - b) Use of any accessory not approved by the manufacturer of the Covered Appliance in question
 - c) Any external cause such as fire, water ingress, sand, theft or weather, or faults in any electrical supply/connection or plumbing
 - d) Neglect, willful abuse or misuse of the Covered Appliance
 - e) Accidental damage to the Covered Appliance
 - f) Damage resulting from power outage, power surges or dips, fluctuating voltage, inadequate and improper voltage or current
 - g) Any reason that would have excluded a claim under the original manufacturer's warranty

2. ITEMS NOT COVERED

- a) Items costing less than \$5,000 per item
- b) Servicing, inspection or cleaning of the Covered Appliance including video/audio heads and soap dispensers
- c) Returning, realigning satellite dishes or any adjustment intended by the manufacturer to be carried out by the user.
- d) Replacing consumable items such as batteries, filters, lamps, vacuum cleaner filter belts, bags and printer cartridges
- e) Repairing cosmetic damage where the function of the Covered Appliance is unaffected such as dents, scratches and rust

Provided that:

1. The Cardholder must be able to produce the original purchase receipt, if requested by the Company, to substantiate a claim.
2. If the Covered Appliance is replaced, the replaced Covered Appliance becomes our property, and We reserve the right to take possession of the Covered Appliance.

EMERGENCY MEDICAL ASSISTANCE
(Applicable only for Trips commencing from Singapore)

Section 12 – EMERGENCY MEDICAL ASSISTANCE AND EVACUATION

Up to \$100,000 (common limit for Section 12, 13 & 14) shared amongst all Insured Person Per Covered Trip.

If the Insured Person suffers Bodily Injury or Sickness whilst on a Covered Trip outside Singapore and Our appointed assistance company certifies it is medically necessary to transfer the Insured Person to another location for medical treatment, Our appointed assistance company shall arrange for the evacuation by the most appropriate means, based on the medical severity.

Provided that:

1. All decisions pertaining to the means of transportation and the final destination shall be made by Our appointed assistance company and will be based solely on medical necessity. All costs for emergency medical evacuation will be borne by Our appointed assistance company;

Section 13 – EMERGENCY MEDICAL REPATRIATION

Common limit for Section 12, 13 & 14, shared amongst all Insured Person Per Covered Trip.

If Our appointed assistance company certifies that the Insured Person's medical condition allows for repatriation back to Singapore as a regular passenger on a Common Air Carrier after the treatment whilst on a Covered Trip, Our appointed assistance company shall arrange and pay for:

- The repatriation to Singapore under medical supervision by appropriate means of transport; and
- Any supplementary cost of transportation to and from the airport.

All costs for Emergency Medical Repatriation will be borne entirely by Our appointed assistance company, up the Benefit Limit payable.

Provided that:

1. All decisions pertaining to the means of transportation and the final destination shall be made by Our appointed assistance company and will be based solely on medical necessity. All costs for emergency medical evacuation will be borne by Our appointed assistance company;
2. The Insured Person surrenders any unused portion of his/her travel ticket to Our appointed assistance company;
3. Any decision on the repatriation is made exclusively by both the attending Registered Medical Practitioner and Our appointed assistance company.

SECTION 14 – LOCAL BURIAL/REPATRIATION OF MORTAL REMAINS BACK TO SINGAPORE

Common limit for Section 12, 13 & 14, shared amongst all Insured Person Per Covered Trip.

If the Insured Person suffers death due to Bodily Injury or Sickness whilst on a Covered Trip, Our appointed assistance company will arrange and pay for:

- The cost of transporting the mortal remains back to Singapore or to an alternative destination (if upon the request of the personal representative); or

- The cost of local burial in the country that he/she was visiting.

Our maximum liability under Section 14 is the cost of transporting the mortal remains to Singapore.

Exclusions applicable to Section 12, 13 and 14

We will not pay for claims arising from the following treatment, items, conditions and their related or consequent expenses.

1. Medical evacuation or repatriation that is not approved or arranged by Our appointed assistance company or its authorised representatives, unless such expenses were necessarily incurred as Our appointed assistance company could not be contacted during the Emergency. In such event, We will only reimburse the expenses incurred for the services that Our appointed assistance company would have provided under the same circumstances.
2. Any event occurring or treatment received when the Insured Person is in Singapore.
3. Any expenses already included in the cost of the Covered Trip.
4. The cost of burial and any other expenses incurred in Singapore.

COVID-19 BENEFITS

(Applicable only for Cardholder)

SECTION 15 – OVERSEAS MEDICAL EXPENSES DUE TO COVID-19

We will pay the Cardholder up to the Benefit Limit, for the necessary COVID-19 related Medical Expenses incurred within thirty (30) days from the date of the first treatment after the Cardholder is being Diagnosed with COVID-19 and confirmed by a Registered Medical Practitioner during the Covered Trip.

Exclusions Applicable to Section 4(a)

No benefit will be payable under Section 4(a):

1. If the Cardholder has been Diagnosed with COVID-19 with or without displaying any symptoms but may not have required treatment.
2. For any breach or non-adherence to safety measures or guidelines.
3. For any medical treatment or aid obtained in Singapore or Country of Residence.
4. For any surgery or medical treatment which, in the opinion of the Registered Medical Practitioner, can be reasonably delayed until the Cardholder's return to Singapore or arrival in the country of final destination for travellers not returning to Singapore.
5. For any surgery or medical treatment for a Pre-Existing Medical Condition, which is not directly related to or arising from the COVID-19 infection.
6. For claims made for all COVID-19 related Medical Expenses incurred from the period that the Cardholder is confirmed by a Registered Medical Practitioner as medically fit to be transferred to a quarantined facility but chooses to continue to stay in a Hospital.
7. For the additional cost of single or private room accommodation at a Hospital, where it is not specifically directed by the Registered Medical Practitioner as being necessary to contain any potential spread of COVID-19 infection.

8. For any elective treatment, aromatherapy, tonic medication, services provided by a health spa, massage parlour, convalescent or nursing home or any rehabilitation centre.
9. For the cost of prosthetic devices or visual or hearing aids.
10. If the Cardholder is tested positive for any mandatory pre-departure COVID-19 diagnostic test prior to the Covered Trip.
11. If the Cardholder is not Fully Vaccinated.
5. Any portion of a Round trip where the travel fare that is settled via any other mode of payment other than the CITI ULTIMA card issued in the name of the Cardholder.
6. Suicide or attempted suicide; intentional self-Bodily Injury; mental and nervous or all types of sleep disorders, including but not limited to insanity.
7. Any wilful, illegal or unlawful intentional act by the Insured Person.
8. Failure of the Insured Person to take reasonable precaution to safeguard his/her property or to avoid or minimize claims under this Policy.
9. Under the influence or effects of alcohol or drugs unless properly prescribed by a Registered Medical Practitioner and taken as prescribed.
10. Action taken by any government authority including confiscation, seizure, destruction by customs and restriction.
11. Flying or other aerial activities except travelling as a fare-paying passenger in a properly licensed, regular scheduled commercial airline operating between established and licensed commercial airports.

SECTION 16 – OVERSEAS HOSPITAL ALLOWANCE DUE TO COVID-19

In the event the Cardholder is hospitalized after being Diagnosed with COVID-19 during the Covered Trip and is considered medically necessary by a Registered Medical Practitioner that the Cardholder has to be hospitalized in an overseas Hospital to receive in-patient treatment, We will pay the Cardholder \$100 for each continuous twenty-four (24) hour period, up to the Benefit Limit payable.

Additional exclusions applicable to Section 4(b)

1. If the Cardholder is not Fully Vaccinated.
2. If the Cardholder is hospitalized in Singapore or Country of Residence.

POLICY EXTENSION

1. Exposure

This Policy is extended to cover the Insured Person against death as a result of him/her being unavoidably exposed to Unless otherwise expressly stated or extended in the Policy, the natural elements due solely to an Accident whilst on the Covered Trip.

2. Disappearance

If the Insured Person disappears whilst on the Covered Trip following the sinking or wrecking of the Common Air Carrier which he/she was travelling in and after one year, the body has not been found and it is reasonable to believe that such Insured Person has suffered death due to an Accident, We will pay the death benefit under Section 1, provided that if the Insured Person is subsequently found to be living, any sum paid shall be immediately refunded to Us.

GENERAL EXCLUSIONS

(Applicable to the whole Policy)

Unless otherwise expressly stated or extended in the Policy, this Policy does not insure any destruction of or damage to any property or any consequential loss or any legal liability or any Bodily Injury, Sickness or disease and death to any person directly or indirectly caused by, or contributed to, or arising from:

1. Any Pre-Existing Medical Condition, including congenital conditions.
2. Travelling against medical advice or where the Covered Trip is made for the purpose of obtaining medical treatment.
3. Pregnancy, childbirth, abortion, miscarriage and any Bodily Injury or Sickness related to such conditions.
4. Venereal disease, HIV (Human Immuno Deficiency Virus) and/or any HIV related illness including AIDS (Acquired Immune Deficiency Syndrome) and/or any related infections.
12. Any kind of race or sport where the Insured Person are being engaged in a professional capacity or where the Insured Person would or could earn any remuneration donation, sponsorship, award or certificate of any kind from engaging in such kind of sport or racing.
13. Rafting or canoeing involving white water rapids, bungee jumping, jet skiing, ski racing, backcountry skiing or off-piste skiing, ski jumping, hang gliding, parasailing, the use of bobsleigh or skeleton, hunting, pot-holing, trekking (including mountain trekking) three thousand (3,000) metres above sea level, mountaineering, rock climbing that ordinarily requires the use of ropes or guides and any other Extreme Sports.
14. Participation in underwater activities which require the use of artificial breathing apparatus.
This exclusion does not apply to leisure scuba diving where:
 - a. diving no deeper than thirty (30) meters under the supervision of a qualified diving instructor; or
 - b. the Insured Person holds a PADI certification (or the equivalent) and diving with a buddy with an equivalent certification.
15. Any Bodily Injury which arises in the course of the Insured Person's engaging in naval, military, air force, civil defence or police services or operations, testing of any kind of conveyance, being employed as a manual worker, whilst engaged in off-shore or in mining, aerial photography or handling of explosive, ammunitions or firearms.
16. Any event or circumstance that was made known to the Insured Person at the time of arranging the Trip and/or effecting this insurance, either through the transport or accommodation provider or through media reports or through a travel advisory issued by an authority (local or foreign), which threatens the Insured Person's health, safety or leads to the disruption of the Trip.
17. Travelling to a country where the Singapore government has issued a travel advisory against non-essential travel. This exclusion does not apply if the Insured Person has

already commenced the trip prior to the issuance of such travel advisory.

18. Travel in, to or through Afghanistan, Cuba, Democratic Republic of Congo, Iran, Iraq, Liberia, Libya, North Korea, Sudan, Syria or Somalia.

19. Motorcycling (unless the Insured Person holds a motorcycle license recognized by the country the Insured Person is travelling in and provided that the Insured Person wears a helmet at all times whilst motorcycling and abide by all applicable road laws of that country but always excluding motorcycle racing).

20. (a) War, invasion, act of foreign enemy hostilities (whether war is declared or not), civil war, rebellion, revolution, insurrection, military or usurped power.

(b) any Nuclear, Chemical, Biological Terrorism.
"Nuclear, Chemical, Biological Terrorism" shall mean the use of any nuclear weapon or device or the emission, discharge, dispersal, release, or escape of any solid, liquid or gaseous Chemical agent and/or Biological agent during the period of this insurance by any person or group(s) of persons, whether acting alone or on behalf of or in connection with any organisation(s) or government(s), committed for political, religious or ideological purposes or reasons including the intention to influence any government and/or to put the public, or any section of the public, in fear.

This endorsement also excludes loss, damage, cost or expense of whatsoever nature directly or indirectly caused by, resulting from or in connection with any action taken in controlling, preventing, suppressing or in any way relating to (a) and/or (b) above.

If We allege that by reason of this exclusion, any loss, damage, cost or expense is not covered by this insurance the burden of proving the contrary shall be upon the Insured Person.

21. Nuclear weapons material or ionizing radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel. For the purpose of this Exception, combustion shall include any self-sustaining process of nuclear fission.

- a) Permanent or temporary dispossession resulting from confiscation nationalisation commandeering or requisition by any lawfully constituted authority and/or
- b) Permanent or temporary dispossession of any property resulting from the unlawful occupation or possession of such property by any person provided that We are not relieved of any liability to the Insured Person in respect of physical damage to the property insured occurring before dispossession or during temporary dispossession which is otherwise covered by this Policy
- c) the destruction of property by order of any public authority

In any action suit or other proceeding where We allege that by reason of the provisions above any loss destruction or damage is not covered by this insurance the burden of proving that such loss destruction or damage is covered shall be upon the Insured Person.

22. Any loss resulting from a Pandemic, except for COVID-19 cover under Sections 15 and 16.

GENERAL CONDITIONS

(Applicable to the whole Policy)

1. Arbitration

Any disputes arising out of or in connection with the Insured Person's Policy, including any question regarding its existence, validity or termination shall be referred to the Financial Industry Disputes Resolution Centre Ltd (FIDREC).

If the dispute or any part of the dispute cannot be referred to or dealt with by FIDREC, or if the Insured Person do not accept the decision of the FIDREC Adjudicator, the dispute shall be referred to and finally resolved by arbitration administered by the Singapore International Arbitration Centre ("SIAC") in accordance with the Arbitration Rules of the SIAC ("SIAC Rules") for the time being in force, which rules are deemed to be incorporated by reference in this condition.

The seat of the arbitration shall be Singapore.

The Tribunal shall consist of one (1) arbitrator.

The language of the arbitration shall be English

2. Cancellation

The Policyholder may cancel the Policy by giving Us thirty (30) days' notice in writing in which case We will retain the customary 15% of the premium in respect of the unexpired period of the Policy. No refund will be made once a claim has been paid under this Policy.

We may cancel this Policy by giving Citibank thirty (30) days' notice in writing. After cancellation of the Policy, the proportionate part of any premium received in respect of the unexpired period of the Policy will be refunded to Citibank.

3. Contracts (Rights of Third Parties) Act

A Person who is not a party to this Policy shall have no right under the Contracts (Rights of Third Parties) Act to enforce any of its terms and conditions of this Policy.

4. Conveyance Limit

- a. Our maximum liability to an Insured Person covered under one or more policies issued by Us to Citibank shall not exceed \$1,000,000 per life.
- b. In the event more than one Insured Person covered under this Policy is involved in the same Accident, Our maximum liability in respect of all Insured Persons shall not exceed \$10,000,000 per event ("the Aggregate Limit").
- c. If Our maximum liability should exceed \$10,000,000 per event, the Aggregate Limit per event will be apportioned among the Insured Persons, but the sum shall not be greater than the maximum sum insured of each Insured Person.

5. Currency

All amounts shown are in Singapore dollars. All claims will be paid in Singapore dollars. For claims incurred in a foreign currency, We will convert the foreign currency amount into Singapore dollars at a foreign currency rate to be determined by Us.

6. Data Privacy

It is hereby declared that as a condition precedent to Our liability, The Insured Person have agreed that any personal information in relation to the Insured Person provided by or on behalf of the Insured Person to Us may be held, used

and disclosed to enable Us or individuals / organisations associated with Us or any independent third party (within or outside of Singapore) to:

- a) process and assess the Insured's application or any matter arising from the Policy and any other application for insurance cover and/or
- b) provide all services related to this Policy.

7. Declaration

The validity of this Policy is subject to the condition precedent that:

- a) for the risk insured, the Insured Person has never had any insurance terminated in the last twelve (12) months due solely or in part to a breach of any premium payment condition; or
- b) if the Insured Person has declared that he/she has breached any premium payment condition in respect of a previous policy taken up with another insurer in the last twelve (12) months:
 - i. The Insured Person has fully paid all outstanding premium for time on risk calculated by the previous insurer based on the customary short period rate in respect of the previous policy; and
 - ii. a copy of the written confirmation from the previous insurer to this effect is first provided by the Insured Person to Us before cover incepts.

8. Duplication of Cover

We shall not cover the Insured Person under more than one card category issued by the Policyholder and underwritten by Us. In the event that the Insured Person is covered under more than one such Policy, We will consider the Insured Person to be insured only under the Policy which provides the highest benefit level.

9. Duty of Care

The Insured Person must exercise reasonable care and take all reasonable precautions to prevent Accidents, Bodily Injury, Sickness, loss or damage.

10. Due Observance

The conditions that appear in the Policy or in any Endorsements are part of the contract and must be complied with. The due observance and compliance of these conditions by the Insured Person and the truth of the statements and answers in the proposal form shall be conditions precedent to any liability of Us to make any payment under this Policy.

11. Fraud, Misstatement or Concealment

Any fraud, mis-statement or concealment in respect of this insurance or of any claim hereunder shall render this Policy null and void and any benefit due hereunder shall be or become forfeited. We also reserve the right to lodge a report with the local police.

12. Governing Law

Any interpretation of this Policy relating to its construction, validity or operation shall be made in accordance with the Laws of Singapore.

13. Payment Before Cover Warranty

- a. The premium due must be paid to the Us (or the intermediary through whom this Policy or Bond was effected) on or before the effective date ("the effective date") or the renewal date of the coverage.

Payment shall be deemed to have been effected to Us or the intermediary when one of the following acts takes place:

- i. Cash or honoured cheque for the premium is handed over to Us or the intermediary;
 - ii. A credit or debit card transaction for the premium is approved by the issuing bank;
 - iii. A payment through an electronic medium including the internet is approved by the relevant party;
 - iv. A credit in favour of Us or the intermediary is made through an electronic medium including the internet.
- b. In the event that the total premium due is not paid to the Us (or the intermediary through whom this Policy or Bond was effected) on or before the inception date or the renewal date, then the insurance shall not attach and no benefits whatsoever shall be payable by Us. Any payment received thereafter shall be of no effect whatsoever as cover has not attached.

14. Payment of Benefits

All benefits payable under this Policy shall be paid to The Insured Person or The Insured Person's legal representative or the Insured Person's beneficiary (if any), or otherwise to The Insured Person's estate in the event of death. Any payment made by Us in accordance with this condition shall in all cases be deemed final and a complete discharge of all Our liability.

15. Policy Renewal

This Policy may be renewed with Our consent, by payment of the agreed premium.

16. Recovery From Other Sources

If at the time any claim arises under this Policy, the Insured Person is able to seek recovery to be paid or refunded by other sources, including but not limited to government program, a hotel, Common Air Carrier, travel agent or any other provider of travel and/or accommodation, for the same loss, damage, expenses or liability covered under this Policy, We shall not be liable to pay or contribute more than its rateable proportion of any claim for such loss, damage, expense or liability.

17. Sanction Limitation and Exclusion Clause

Notwithstanding any provision to the contrary within this Policy or any endorsement thereto, this insurance shall, in no case, be deemed to provide cover and be liable to pay any claim or provide any benefit hereunder to the extent that the provision of such cover, payment of such claim or provision of such benefit would expose the Company to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union or United Kingdom or United States of America.

18. Subrogation

The Insured Person shall at Our expense do and concur in doing and permit to be done all such acts and things as may be necessary or reasonably required by Us for the purpose of enforcing any rights and remedies or of obtaining relief or indemnity from other parties to which We shall be or would become entitled to or subrogated upon its paying for or making good any loss destruction or damage under this Policy whether such acts and things shall be or become necessary or required before or after their indemnification by Us.

19. Other Insurance

If at the time any claim arises under this Policy there is any other insurance Policy effected by or on behalf of the Insured Person with other insurance company covering the same loss, damage, expenses or liability, We shall not be liable to pay or contribute more than its rateable proportion of any claim for such loss, damage, expense or liability. This condition is not applicable to Section 1.

CLAIMS CONDITIONS

(Applicable to the whole Policy)

1. Notice of Claims

- a) Any occurrence or loss which may give rise to a claim under the Policy should be reported to Us in writing within thirty (30) days of the completion of the Covered Trip. Any notice given by the Insured Person or the authorized representative with information sufficient to identify the Insured Person will be deemed to be notice to Us.
- b) In the event that this Policy is not renewed, We will not pay for any claim(s) submitted after the expiry of the Policy, by any Insured Persons, even if the claim(s) was in respect of a loss which arose or was incurred during the Policy pursuant to a Covered Trip.

2. Fraudulent Claims

If a claim under this Policy is made with the knowledge of the claim to be dishonest or intentionally exaggerated or fraudulent in any way, or if any false declaration or statement to support the claim is given, We will not pay the claim and reserve the right to lodge a report with any relevant authorities about any dishonest claim.

3. Proof of Loss

If any Bodily Injury, Accident, loss or damage or theft happens, the Insured Person must:

- a) Make a report within twenty-four (24) hours of the incident, to the police or the relevant authorities at the place of loss. Any claim must be accompanied by written documentation from such authorities.
- b) Take all reasonable steps to recover missing property.
- c) Give written notification to Us within thirty (30) days upon completion of the Covered Trip.
- d) Give Us the receipts, invoices or boarding passes and/or photocopy of passport and any other relevant documents. Failure to furnish such proof within the time required shall not invalidate the claim if it was not reasonably possible to give proof within such time, provided such proof is furnished as soon as reasonably possible and not later than one hundred and eighty (180) days from the time proof is otherwise required. Where the claim is in respect of disappearance, proof must be given not later than one hundred and eighty (180) days from the expiry of one (1) year from the date of disappearance.
- e) Send to Us immediately any writ, summons or other documents in connection with the claim.
- f) Not without Our written consent in writing to repudiate liability, negotiate or make admission, offer promise or make payment in connection with any occurrence or claim to which the Policy applies.

CARING FOR OUR CUSTOMERS

HL Assurance Pte. Ltd. will make every effort to provide a high level of service expected by all Our policyholders. If on any occasion Our service falls below the standard of Your expectation, the procedure below explains what You can do:

Your first point of contact should always be Your insurance agent or broker. Alternatively, You may submit Your feedback to the manager in charge of the matter You are raising.

We will acknowledge receipt of Your feedback within seven (7) working days whilst We look into the matter You have raised. We will contact You for further information if required within seven (7) working days and provide You with a full reply within fourteen (14) working days.

If the outcome of Your complaint is not handled to Your satisfaction, You can write to:
Chief Executive Officer HL Assurance Pte. Ltd.
11 Keppel Road #11-01 ABI Plaza
Singapore 089057

We will respond to Your appeal within fourteen (14) working days. If you are dissatisfied with the CEO 's respond, We will refer You to a dispute resolution organization, Financial Industry Disputes Resolution Centre Ltd (FIDReC) which is an independent organization. FIDReC's contact details are:

Financial Industry Disputes Resolution Centre Ltd
36 Robinson Road #15-01
City House
Singapore 068877

Telephone : (65) 6327 8878
Fax : (65) 6327 8488
Email : info@fidrec.com.sg
Website : www.fidrec.com.sg
Important – Please remember to quote Your Policy number / reference in Your communication.

POLICY OWNERS' PROTECTION SCHEME

This Policy is protected under the Policy Owners' Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for this Policy is automatic and no further action is required from You. For more information on the types of benefits that are covered under the scheme as well as the limits of coverage, where applicable, please contact HL Assurance Pte. Ltd. or visit the GIA or SDIC websites (www.gia.org.sg or www.sdic.org.sg).