



TRAVEL INSURANCE

POLICY NO: TPS-12682

**POLICYHOLDER:
STANDARD CHARTERED BANK**

Emergency Call Center No: 00911244343955

RENEWAL CERTIFICATE

Policy No.	:	TPS-12682 / Endorsement 4863
Class of Insurance	:	Travel Insurance
Policyholder	:	Standard Chartered Bank, Sri Lanka
Policy Period	:	18 th March 2018 to 18 th March 2019 (both days included)
Insured	:	Any holder of a Gold, Platinum, Signature and/or Infinite Credit Card issued by Standard Chartered Bank, Sri Lanka who is no more than 75 years of age only and his/her Immediate Family travelling with the Cardholder and who has purchased their return air tickets using the said cards.
The Benefits	:	As per attached Table of Benefits
Beneficiary	:	Standard Chartered Bank Gold/Platinum/ Signature / Infinite Credit Cardholders
Special Conditions	:	<ol style="list-style-type: none"> 1. Worldwide Cover excluding the geographical limits of Sri Lanka 2. Maximum duration per trip is limited to 90 days 3. Applicable to 100% of Return Air Tickets purchased on Standard Chartered Bank Gold/ Platinum/ Signature and Infinite Credit Cards only for an Insured Journey.

This is an annual blanket cover and all Cardholders to be covered.

Eligibility

“Immediate Family” means an Insured Person's legal spouse who is no more than 75 years of age, unmarried children up to age of 22 (or dependent unmarried children up to the age of 23 if in full time education and dependent upon their parents for support) who permanently reside with the Insured Person, and receive the majority of maintenance and support from the Insured.

TABLE OF BENEFITS

When the cardholder charges 100% of their entire RETURN air ticket fare to their Standard Chartered Credit Card, they will be entitled to the following Insurance schemes.

Section	Description of Benefit	Gold / Platinum/ Signature/ Infinite Card (USD)	Deductible applicable for each and every claim/event
A	Common Carrier Personal Accident- Death, Permanent Total Disablement	100,000	Nil
B	Personal Accident- Death, Permanent Total Disablement	50,000	Nil
C	Travel Medical Insurance including Repatriation	60,000	USD 100
D	Common Carrier Baggage Loss – Checked in Luggage only (50% per Bag and per article value maximum USD 100/-)	2,000	USD 50

E	Baggage delay	300	6 hours
F	Trip Delay – Max US \$ 100/- per day	500	12 hours
G	Trip Cancellation	250	USD 50
H	Personal Liability	7,500	
I	Legal Fees	2,000	
	<ul style="list-style-type: none"> - 24 hours Medical Assistance Services - Pre-trip information services - Embassy referral - Weather and exchange rate information assistance - Emergency message transmission assistance - Arrangement of hotel accommodation in case of an emergency - Interpreter referral - Lost luggage assistance - Loss passport assistance 	Included	

FOR AND ON BEHALF OF ALLIANZ INSURANCE LANKA LTD



AUTHORISED SIGNATORY

DATED: 18th April 2018

OVERSEAS TRAVEL PROTECTION INSURANCE

IMPORTANT

Please make sure you read and fully understand this Document before you travel from the Republic of Sri Lanka.

Please read carefully the full details of the procedure for obtaining assistance and claims.

Failure to follow the instruction given could result in rejection of the claim

Whereas the Policyholder has made to Allianz Insurance Lanka Ltd (hereinafter called the Company), a proposal which is hereby agreed to be the basis of this Policy and has paid the premium specified in the Schedule, now the Company agrees, subject always to the following terms, conditions, exclusions, and limitations, to indemnify the Insured in excess of the amount of the Deductible and subject always to the Sum Assured against such loss as is herein provided.

A OPERATIVE PARTS

1. Section A : Common Carrier Personal Accident/ Death

1.1 The Company will pay a percentage of the principal Sum Assured shown in Section A of the Schedule of accidental Injury to an Insured results in one of the losses shown in Table of Losses below. Accidental Injury must occur while Insured is riding as a passenger in or on, boarding or alighting from, a Common Carrier (excluding Sea planes). The loss must occur within 365 days of the date of the accident, which caused the Injury.

If more than one loss results from any one accident, only one amount which will be the largest, will be paid.

Loss of:	% Principal Sum Assured
Life	100 %
Both Hands or Both Feet	100 %
Sight of Both Eyes	100 %
One Hand and One Foot	100 %
Either Hand or Foot and Sight of One Eye	100 %
Speech and Hearing in Both Ears	100 %
Either Hand or Foot	50%
Sight of One Eye	50%
Speech	50%
Hearing in Both Ears	50%
Thumb and Index Finger of Same Hand	25%

1.1.1 "Loss" with regard to:

- (a) hand or foot means actual severance through or above the wrist or ankle joints;
- (b) eye means entire and irrecoverable loss of sight; and
- (c) thumb and index finger means actual severance through or above the joint that meets the hand at the palm;
- (d) speech or hearing means entire and irrecoverable loss of speech or hearing of both ears.

1.1.2 The Company' will be liable to pay 50% of the Sum Assured stated in the Schedule of Benefits in respect of the death of the Insured person if the Insured Person's age is under 18 years at the time of death;

1.1.3 Loss caused directly or indirectly, wholly or partly by the following are excluded:

- (a) bacterial infections (except pyogenic infections which shall occur through an Accidental cut or wound) or any other kind of disease;
- (b) medical or surgical treatment except as may be necessary solely as a result Of the accidental injury.
- (c) any injury which shall result in hernia
- (d) Pre-existing Conditions for which care, treatment, or advice was recommended by or received from a Physician
- (e) The Insured Person being in, on or entering into or descending from any balloon or aircraft, other than a fully licensed passenger carrying aircraft in which the Insured Person is travelling as a passenger and not as a member of the cabin crew/pilot and not for the purpose of under taking any trade or technical operation therein or thereon

2. Section B : Personal Accident

2.1 The Company will pay the percentage of Section B Sum Assured specified in the Schedule of benefits if the Insured sustains accidental bodily injury during the course of the Insured Journey and such bodily injury is within 12 months of the date which it was the sole and direct cause of the:

2.1.1 Insured's death, as per the Table of Losses below

2.1.2 Permanent Total Disablement as per Table of Losses below ,

2.2 Provided always that the policy will not pay under more than one of the foregoing sub clauses in respect of the same accident and in excess of the amount stated in the Scheduled of Benefits.

2.3 The Company' will be liable to pay 50% of the Sum Assured stated in the Schedule of Benefits in respect of the death of the Insured person if the Insured Person's age is under 18 years at the time of death;

Table of Losses

Loss of:		% of Sum insured
Life	:	100%
Both hands or Both Feet	:	100%
Sight of Both Eyes	:	100%
One Hand and One Foot	:	100%
Either Hand or Foot and Sight of One Eye	:	100%

Speech and Hearing in Both Ears	:	100%
Either Hand or Foot	:	50%
sight in one eye except perception of light	:	50%
lens of one eye	:	50%
hearing in both ears	:	75%
hearing of one ear	:	15%
speech	:	50%
thumb and four fingers of one hand	:	50%
four fingers in one hand	:	40%
thumb (both phalanges)	:	25%
thumb (one phalanx)	:	10%
index finger (three phalanges)	:	15%
index finger (two phalanges)	:	8%
index finger (one phalanx)	:	4%
middle finger (three phalanges)	:	10%
middle finger (two phalanges)	:	4%
middle finger (one phalanx)	:	2%
ring finger (three phalanges)	:	8%
ring finger (two phalanges)	:	4%
ring finger (one phalanx)	:	2%
little finger (three phalanges)	:	6%
little finger (two phalanges)	:	3%
little finger (one phalanx)	:	2%
all toes of one foot	:	17%
great toe (two phalanges)	:	5%
great toe (one phalanx)	:	2%
any other toe	:	3%

Exclusions Applicable for Section B

- 2.4 The Company shall be under no liability to make payment hereunder in respect of any claim directly indirectly caused by, based on, arising out of or how so ever attributable to any of the following:
- 2.4.1 Amateur sports involving physical contact and other sports activities as defined in sports and leisure activities. In any event there shall be no over under this insurance for sky jumping, flying, acrobatics, stunting, mountaineering, randonee, bungee jumping, rock climbing or mountaineering, normally requiring the use of ropes and guides, caving or potholing, rafting or canoeing involving white water rapids in excess of grade 6, parachuting, paragliding, hangliding, motor sports or competitions, hunting or equestrian competitions, yachting or boating outside costal water (12 miles), scuba diving at a depth of more than 30 meters, professional sports, riding or driving in races or allies.
- 2.4.2 Loss arising from accidents as a driver on motorised vehicle unless at the time of the accident the Insured is in possession of a current full international driving license and while riding a two wheeler is wearing a safety crash helmet.
- 2.4.3 Aviation risks as a paying passenger, cabin crew, pilots etc, in a duly certified multi engine passenger carrying aircraft flown in the course of licensed operations for the transportation of passengers by properly licensed crew.
- 2.4.4 Losses arising directly or indirectly from manual work (not including bar work, waitressing, fruit picking and other similar light casual work not requiring the use of machinery or power tools) or hazard occupation, self exposure to needless perils (except an attempt to save a human life), or if engaging in any criminal or illegal act.
- 2.4.5 Winter Sports

2.4.6 Loss caused directly or indirectly, wholly or partly by bacterial infections (except pyogenic infections which shall occur through an accidental cut or wound) or any other kind of disease;

3. Section C: Overseas Emergency Accident and Sickness Medical Expenses, Evacuation and Repatriation

3.1 The Company will indemnify the Insured, up to the Section C Sum Assured (in excess of USD 100) specified in the Schedule of Benefits in respect of:

3.1.1 The medical and related expenses incurred by the Insured for medical Treatment outside Sri Lanka. The expenses covered would include Physician services, hospital and medical services and local emergency medical transportation. **Dental services** for immediate relief of dental pain are covered up to **USD. 500**. However dental care rendered necessarily as a result of a covered accident shall be subject to the limit of cover as stated in the policy.

3.1.2 Medical evacuation to a hospital in Sri Lanka required as a result of accidental bodily injury and/or sickness and/or disease occurring or having first manifested itself during an Insured journey. The medical evacuation will have to be pre approved by the Claims Administrator of the Company.

3.1.3 In case of medical evacuation to a hospital in Sri Lanka as per 3.1.2 above and if approved by the Claims Administrator, and subject to the Section A sum Insured remaining (if any), the Company will also indemnify the Insured in respect of the medical expenses incurred by him within Sri Lanka to continue medical treatment commenced by the Insured outside of Sri Lanka, as a result of the Insured first having sustained accidental bodily injury and/or sickness and/or disease during the course of the Insured Journey. The Company's liability to make payment hereunder shall be limited to a period of 60 days from and including the date upon which the aforesaid accidental bodily injury and/or sickness and/or disease occurred or first manifested itself, and to medical expenses at the Usual and Customary level.

3.1.4 The Company shall be under no liability to make payment of any medical expenses incurred beyond the expiry of the policy period, same as provided for under Section 3.1.5

3.1.5 The cost of repatriating the Insured's mortal remains to Sri Lanka, or up to an equivalent amount for the burial or cremation of the Insured in the country where the death occurred in the event of the Insured's death outside of Sri Lanka as a result of accidental bodily injury and/or sickness and/or disease occurring or having first manifested itself during an Insured journey. These expenses should have to be pre approved by the claim administrator prior to the remains being prepared for transportation to Sri Lanka or for local burial or cremation.

The deductible applicable as per the Schedule of benefits would be applicable in respect of each and every claim made under the policy and the Company's liability would be restricted to the Section C Sum Assured as per the Schedule of benefits during the policy period.

Exclusions Applicable for Section A,B & C

3.2 The Company shall be under no liability to make payment in respect of any routine physical or other examination where there is no objective indication of impairment or normal health, and for medical treatment obtained within Sri Lanka save as provided for under Section 3.1.3

3.3 The Company shall be under no to make payment of any medical expenses incurred beyond the expiry of the policy period.

3.4 the Company shall be under no liability to make payment hereunder in respect of any claim directly or indirectly caused by, based on, arising out of or how so ever attributable to any of the following

3.4.1 Where the Insured is

3.4.1.1 Travelling against the advice of the physician; or

- 3.4.1.2 Receiving or on a waiting list for specified medical treatment or
- 3.4.1.3 Travelling for the purpose of obtaining treatment; or
- 3.4.1.4 Travelling in respect of a terminal prognosis for a medical condition.
- 3.4.2 Suicide, attempted suicides or wilful or self inflicted injury or Illness, mental disorder, anxiety, stress or depression, venereal disease, alcoholism, drunkenness or the abuse of the drugs.
- 3.4.2 Any injury, illness, death, loss expense or other liability attributable to HIV (Human immune deficiency virus) and/or any HIV related illness including AIDS (Acquired immune deficiency syndrome) and/or any mutant derivative or variation thereof how ever caused
- 3.4.3 Pregnancy, childbirth, miscarriage, abortion or complication arising out of any of the foregoing.
- 3.4.4 The cost of dentures, dental appliances, (which does not qualify under Clause 3.1.1) false limbs, hearing aids, contact or corneal lenses or spectacles (prescribed or otherwise)
- 3.4.5 Treatment for any illness/sickness which was pre existing prior to departure from Sri Lanka.
- 3.4.6 Treatment of any congenital anomalies/defects.
- 3.4.7 The additional cost of a single or private room at a hospital, clinic or nursing home except when the medical practitioner considers it necessary.
- 3.4.8 Services, supplies or treatment, including any period of hospital confinement, which were not recommended, approved and certified as Medically Necessary by a Physician;
- 3.4.9 elective, cosmetic, or plastic surgery, except as a result of an accident;
- 3.4.10 the diagnosis and treatment of acne
- 3.4.11 organ transplants that competent medical physician consider experimental
- 3.4.12 child care such as medical examinations, vaccinations and immunizations;
- 3.4.13 expenses which are not exclusively medical in nature
- 3.4.14 any expenses incurred in Sri Lanka subject to Clause
- 3.4.15 eyeglasses, contact lenses, hearing aids, and examination for the prescription of fitting thereof, unless injury or Sickness has caused impairment of vision or hearing; or
- 3.4.16 treatment provided in a government hospital or services for which no charge is normally made;
- 3.5 medical expenses covered under any workers compensation insurance
- 3.6 Routine or other medical examinations or vaccinations or inoculations which are not required for the treatment of an illness or injury including pregnancy.
- 3.7 Ayurveda treatment
- 3.8 It is warranted illnesses caused or contributed by a pre-existing condition is excluded

3.9 Any medical appliances and/or devices including crutches, artificial limbs and other equipment's which are used in anyway after discharge from hospital

4 **Section D: Loss of Checked in Baggage**

The Company will pay the Insured up to the Section D Sum Assured specified in the Schedule in respect of the complete and permanent loss or destruction of the Insured's Checked in Baggage

Specific Conditions

- 4.1 It is a condition precedent to the Company's Liability hereunder that upon discovering the loss of Checked in Baggage the Insured shall obtain a relevant property irregularity report from the Airline and submit the same to the Claims Administrator in the event of a Claim.
- 4.2 The Company's liability to make payment shall not arise until liability is admitted by the Airline.
- 4.3 The company's liability will be restricted to maximum of 50 % per Bag and a maximum of USD \$ 100/- per article value (as per the schedule of the policy) of the sum insured for all pieces of Checked in baggage put together. The deductible applicable is USD \$ 50/-
- 4.4 In case of the same baggage being covered under any other insurance the policy will contribute its rateable propotion.
- 4.5 The loss has to be reported to the appropriate police authority within 24 hours of the discovery of the loss, and in respect of which an official report has to be obtained.
- 4.6 Loss of personal money and documents will be covered during the trip whilst kept in safety deposit box only.
- 4.7 Loss of or damage to Checked In Baggage during the trip will be covered only subject to proof of
- 4.8 ownership of the baggage.
- 4.9 The Company reserve the right to repair, replace or pay the intrinsic value of any lost or damaged article.

Exclusions applicable to Section D

- 4.1 The Company shall not be liable to make payments for:
 - 4.1.1 The self-carried baggage is specifically excluded from the policy coverage.
 - 4.1.2 Partial destruction of baggage or missing of contents from the baggage is not covered under the policy.
 - 4.1.3 Loss or damage to the Insured's personal/Checked in baggage as a result of the confiscation or detention by customs, police or any other authority.
 - 4.1.4 Loss caused by the Insured's failure to take reasonable steps to guard against the loss of the personal baggage.
 - 4.1.5 Any loss to stamps, money or securities, tickets, documents, contact/corneal lenses, spectacles dentures, hearing aids, fragile articles or business goods and samples.
 - 4.1.6 animals, birds or fish
 - 4.1.7 perishables and consumables

5. Section E: Trip Delay

- 5.1 If the aircraft on which the insured is booked to travel outside Sri Lanka is delayed beyond 12 hours than the original scheduled departure time, the Company will pay sum mentioned in the schedule for every completed 12 hours delay excess of 12 hours, subject to the maximum amount mentioned in the schedule. However, the Company will not pay.
- A. For any departure which is delayed as a result of the insured or any other person who have arranged to travel with failing to check-in correctly as required by the airlines.
- B. For any delayed departure caused by strike or industrial action known to exist or was anticipated at the time the trip was booked.
- C. If the aircraft is taken out of service on the instructions of the Civil Aviation Authority or similar authority.

Exclusions applicable for Section F

However, the Company will not pay,

- 5.1.1 for any departure which is delayed as a result of failing to check-in correctly as required by the airlines by the Insured .
- 5.1.2 If the air craft is taken out of service on the instructions of the Civil Aviation Authority or similar authority
- 5.1.3 Any delay due to aircraft technical defects/malfunction, adverse weather conditions and Industrial strike which was made public or known to an Insured prior to the departure of the Insured Journey
- 5.1.4 Any denial of boarding onto the Scheduled flight for any reason what so ever
- 5.1.5 Any business or financial contractual obligations of the Insured Person, Insured Person's Travelling Companion or Insured Person's Immediate Family member
- 5.1.6 Change of plans or disinclination of the Insured Person, Insured Person's Travelling Companion or Insured Person's Immediate Family Member to travel on the Particular Insured Journey.
- 5.1.7 Any expenses incurred prior to the delay.
- 5.1.8 Any claim resulting from Misconnection.

6. Section F: Trip Cancellation

- 6.1 The Company will indemnify the Insured Person in respect of all irrecoverable deposits, advance payments and other charges paid or due to be paid for travel and/or accommodation up to the sum insured stated Section F in the Table of Benefits, in the event of the Insured Person's travel being necessarily cancelled due to any cause listed below:
- 6.1.1 The bodily injury or sickness of the Insured Person or the death, bodily injury or sickness of the Insured Person's close relative, or fiancée.
- 6.1.2 The death, bodily injury or sickness of any person with whom the Insured person had arranged to travel, reside or conduct business of the close relative of fiancées of such person.
- 6.1.3 The Insured Person or any person with whom the Insured Person had arranged to travel, reside or conduct business being:

- a. Quarantine or called for witness or jury service.
- b. Called for emergency duty as a member of the armed forces, the defence of civil administration, the police force of the fire rescue, public utility or medical services.
- c. Required to be present at his home or place of business in Sri Lanka following burglary or major damage.

6.1.4 The cancellation of scheduled flight caused by strike, industrial action, hi-jack, terrorist act, criminal act, bomb scare, riot, civil commotion, fire, flood, earthquake, landslide, avalanche, adverse weather conditions or mechanical breakdown, provide that the event giving rise to such cancellation occurs after or is only announced after, the insurance is effected.

IMPORTANT NOTE

For the purpose of this insurance, close or immediate relative shall be deemed to mean: husband, wife, mother, father, mother-in-law, father-in-law, son or daughter

6.2 The *deductible* applicable as per the schedule of the policy would be applicable in respect of each and every claim made under the policy and the company's liability in all claims put together under Section F would be restricted to the Section F Sum Assured as per the schedule of the policy during the policy period.

7. Section G: Personal Liability

7.1 The Company will indemnify the Insured up to the Section G Sum Insured (less the deductible) specified in the Schedule of Benefits against any legal liability incurred by the Insured in his private capacity to pay damages for third party civil claims arising out of accidental bodily injury or accidental property damage occurring during Insured Journey.

Special conditions applicable for Section G

7.2 No deductible shall be applicable in respect of the legal liability incurred by the Insured in his private capacity to pay damages for third party accidental bodily injury.

7.3 The Company liability to indemnify the Insured under this Section shall be to the expenses finally determined by a foreign court of law or otherwise as consented to in advance by the Company. In the event that legal action is taken against the Insured within Sri Lanka, it is a condition precedent to the Company liability hereunder that the Insured shall:

7.3.1 Give immediate written notice to the Company to the address specified in the Schedule, and

7.3.2 Not incur any defence costs or expenses, admit liability for or settle or attempt to settle, make any admission or offer any payment or otherwise assume any contractual obligation with respect to any claim or claimant without the prior written consent of the Company, which shall be entitled (but in no case obligated) at any time to take over and conduct in the name of the Insured the defence and/or settlement of any action or claim and shall be entitled at all times receive the Insured's corporation and assistance and to appoint lawyers on the Insured's behalf. Any and all costs and expenses incurred by the Company or the lawyer appointed by the Company shall be a first charge on the Sum Assured hereunder.

7.4 The Company shall not settle any claims without the express consent of the Insured, but if the Insured refuses an available settlement recommended by the Company then the Company's liability shall thereafter be restricted to the amount by which the claim could have been settled.

Exclusions applicable for Section G

7.5 The Company shall not be under any liability to make payment for claims arising out of;

7.5.1 The Insured's liability to an employee (whether under a contract of or for service)

7.5.2 Bodily injury to and/or property damage to property belonging to the Insured's family, any co worker/employee of the Insured, and any travelling companion of the Insured:

7.5.3 Any liability for bodily injury and/or property damage arising directly or indirectly from or due to:

7.5.3.1 Livestock belonging to the Insured or in the Insured's care, custody or occupation

7.5.3.2 Any wilful, malicious, criminal or unlawful act, error, or omission;

7.5.3.3 The pursuit of any trade, business or profession, employment or occupation;

7.5.3.4 The parachuting, hand gliding, hot air ballooning or the use of firearms or any other dangerous or hazardous activity;

7.5.3.5 The ownership, possession or use of any vehicle, aircraft, or watercraft;

7.5.3.6 The use or misuse of any alcohol, hallucinogenic substance, drugs (except those used medically prescribed), or drug addiction;

7.5.3.7 Any form of ownership or occupation of land or building (other than occupation only of temporary residence)

8. Section H: Legal Fees

8.1 The Company will pay legal fees an Insured Person incurs during the course of an Insured Journey, as a result of false arrest or wrongful detention by any Government or Foreign Power up to the amount stated in Section H of the Schedule of Benefits.

9. Section I: Loss of Passport

9.1 In the event of the Insured's loss of his passport outside the geographical limits of Sri Lanka, the Company will pay the Insured the Section I Sum Assured specified in the Schedule of Benefits towards expenses necessarily incurred by the Insured in obtaining a duplicate or fresh passport.

Exclusions applicable for Section I

9.2 The Company shall be under no liability to make payment for loss of Insured's passport as a result of the confiscation or detention by customs, police or any other authority.

9.3 Loss which is not reported to the appropriate police authority within 24 hours of the discovery of the loss, in respect of which an official report has not been obtained

9.4 Loss caused by the Insured's failure to take reasonable steps to guard against the loss of passport.

9.5 Travel expenses incurred in relation to obtaining a fresh passport

10. Section J: Home Safety

- 10.1 Company will pay up to the amount stated in Section K of the Schedule of Benefits for the loss or damage to the Insured's household contents caused by burglary (forcible, violent and external means only) when the Insured's principal residence in Sri Lanka is left vacant whilst the Insured is overseas on an Insured Journey for a maximum of 90 days only.

The Company at its option will reinstate, repair or make payment to indemnify the insured against such loss or damage.

Special conditions applicable for Section J

- 10.2 The Insured shall take all reasonable precautions for the safety of the Property including securing all doors and windows and other means of entry, and otherwise.
- 10.3 If at the time of any loss or damage there be any other insurance effected by or on behalf of the insured covering any of the Property the liability of the Company hereunder shall be limited to its rateable proportion of such loss or damage. If any such other insurance is expressed to cover any of the Property hereby insured but is subject to any provision whereby it is excluded from ranking concurrently with this policy either in whole or in part or from contributing rateably to the loss or damage as the sum hereby insured bears the value of the Property.
- 10.4 Upon the discovery of any loss or damage to the Property;
- 10.4.1 The insured must give notice to the police and render upon discovery, all reasonable assistance in causing the discovery and punishment of any guilty person and in tracing and recovering the property.
- 10.4.2 Give immediate notice thereof to the company and give written notification within seven days, along with all such detailed proof and particulars as may be reasonably required.

11 Section K: Delay of Checked Baggage

- 11.1 The Company will pay the Insured up to the Section K Sum Assured specified in the Schedule in respect of the Insured's emergency purchase of toiletries, medication and clothing to replace those contained in Checked Baggage, the arrival of which is delayed by more than 6 hours beyond the time of the Insured's arrival at the intended destination outside of Sri Lanka.

Specific Condition

- 11.2 It is a condition precedent to the Company's Liability hereunder that upon discovering the delay in arrival of the Checked Baggage the Insured shall obtain written non-delivery confirmation from the Airline along with the period of delay, which must be submitted to the Claims Administrator in the event of a Claim
- 11.3 In case of more than one claim during the insured journey the Company's liability in all claims put together will be restricted to the Section K Sum Insured. The time deductible of 6 hrs will apply separately for every claim.

B DEFINITIONS

The following words or terms shall have the meaning ascribed to them wherever they appear in this Policy, and references to the singular or to the masculine shall include references to the plural and to the female wherever the context so permits:

1. **“Insured”** means the person named in the Schedule.
2. **“Immediate Family”** means an Insured Person's legal spouse who is no more than 70 years of age, unmarried children up to age of 18 (or dependant unmarried children up to the age of 23 if in full time education and dependant upon their parents for support) who permanently reside with the Insured Person, and receive the majority of maintenance and support from the Insured.
3. **“Claims Administrator”** means the person or organisation named in the Schedule.
4. **“Medical Advisors”** mean the medical practitioners appointed by the Claims Administrator.
5. **“Physician”** means a qualified medical practitioner holding a valid license (issued by the appropriate authority in the jurisdiction within which he operates) and acting within the scope of such license. “Physician” shall not include any member of the Insured’s family.
6. **“Medical Expenses”** means medical expenses (including those for medicines, Physicians, hospitals, ambulances, medical procedures and services) that in the written opinion of the Claims Administrator and the treating Physician, expressed at the time of examination or treatment of the Insured, are medically necessary in order to maintain life and/or relieve immediate pain or distress caused by Sickness and/or Disease and/or Accidental Bodily Injury first manifested and/or sustained during the Policy Period.
7. **“Loss of Eye”** means the total and irrecoverable loss of sight from either or both eyes.
8. **“Loss of Limb”** means the loss of one or both hands or one or both feet by permanent physical severance at or above the wrist or ankle, and includes the total and permanent loss of use of either or both hands or either or both feet.
9. **“Checked Baggage”** means the baggage offered by the Insured and accepted by an Airline for international transportation in the same aircraft as the Insured and for which the airline has provided a baggage receipt, and the contents of the baggage checked in by the Insured so long as such contents do not violate any Airline policy or rule restricting the nature of items that may be carried on board its aircraft.
10. **“Policy Period”** means the period between: the commencement date specified in the Schedule, and the expiry date specified in the Schedule (provided that this Policy shall automatically be extended for a period of 7 days if the completion of the Insured Journey is delayed solely because of a failure of public transportation or other services upon which the Insured was reliant means the period specified in the Schedule
11. **“Accident”** and **“Accidental”** means a fortuitous event or circumstance that is sudden, unexpected and unintentional.
12. **“Family”** Means the Insured Person and/or the Insured Person’s Spouse and/or the Insured Person’s Eligible Children for which coverage is elected and premium is paid.
13. **“Age”** Means that Age of the Insured Person on his/her most recent birthday as per the English calendar, regardless of the actual time of birth.
14. **“Eligible Age Means”** Any person up to age 70, who holds a Gold, Platinum, Signature and Infinite credit card with Standard Chartered Bank. Cover applies until the end of the period of insurance in which the person reaches 70.
15. **“Cardholder”** means a holder of a Gold, Platinum, Signature or Infinite Credit Card issued by Standard Chartered Bank Ltd who purchases his/her return trip air tickets using the said cards only
16. **“Eligible Children”** Means dependant children including adopted and step children of the Insured person between Ages six (6) months and eighteen (18) years (twenty three(23) years if attending as a full time student

in an accredited Institution of Higher Learning) who are unmarried, who permanently reside with the Insured Person, and receive the majority of maintenance and support from the Insured Person.

17. **“Bodily Injury”** means any Accidental physical bodily harm but does not include any Sickness or Disease.
18. **“Usual and Customary Level”** means medical charges that:
 1. do not exceed the usual levy of charges for similar treatment or allied services, in the locality where such treatment or allied services have been obtained; and
 2. do not include charges that would not have been made if no insurance existed.
19. **“Policy”** means the *proposal*, the *Schedule*, the *Policy* documents and any endorsements attaching to or forming part hereof either on the commencement date or during the Policy Period.
20. **“Sickness”** means a condition or an ailment affecting the general soundness and health of the Insured’s body that first manifests itself during the Policy Period and for which immediate treatment by a Physician is necessary.
21. **“Disease”** means an affliction of the bodily organs having a defined and recognised pattern of symptoms that first manifests itself during the Policy Period and for which immediate treatment by a Physician is necessary.
22. **“Deductible”** means the amount stated in the Schedule, which shall be borne by the Insured in respect of each and every Claim made under this Policy. The Company’s liability to make any payment under the Policy is in excess of the Deductible.
23. **“Theft”** means the dishonest misappropriation by any person of the Insured’s property with the intention to permanently deprive the Insured of that property.
24. **“Sum Assured”** means the amount stated in the Schedule against each relevant Section, which shall be the Company’s maximum liability under this Policy (regardless of the number of the amount of Claims made) for any one Claim and in the aggregate for all Claims under such Section.
25. **“Claim”** means a Claim under an operative part of this Policy in respect of an insured event that has taken place or is likely to take place. All Claims resulting from one and the same event or circumstance shall jointly constitute one Claim under this Policy and as having been made at the time when the first Claim was made in writing and the Deductible shall be applicable to each section independently.
26. **“Airline”** means a public airline that holds a proper license for the jurisdictions in which it operates and that operates scheduled flights for passengers and cargo.
27. **“Schedule”** means the schedule, and any annexure to it, attached to and forming part of this Policy.
28. **“Insured Journey”** means the first 90 days from date of departure from Sri Lanka of any trip to the countries specified in the return air ticket and upon return back to Sri Lanka falling within the Policy Period, where 100% of the said return air ticket(s) has/have been paid for using the Insured's Standard Chartered Gold, Platinum, Signature or Infinite Credit Card issued by Standard Chartered Bank.
29. **“Medical Evacuation”** means the removal of the Insured from abroad to a hospital within Sri Lanka where necessary medical care can be accorded to him, including medical care required en route.
30. **“Property Damage”** means actual physical damage to tangible material property belonging to a third party.
31. **“Damages”** means monetary sums payable pursuant to judgements or awards but shall not include fines, penalties, punitive damages, exemplary damages, any non-pecuniary relief, or any other amount for which an Insured is not financially liable, or which is without legal recourse to the Insured, or any matter that may be deemed to be uninsurable under Sri Lankan Law.
32. **“Pre-Existing Conditions”** means a condition for which medical care, treatment, or advice was recommended by or received from a Physician or which was first manifested or contracted preceding the effective date of departure and/or conditions directly/indirectly resulting by a pre-existing condition is excluded.

C GENERAL CONDITIONS APPLICABLE TO ALL SECTIONS

33. Notification of Claims

It is a condition precedent to the Company's liability under this Policy that, upon the happening of any event giving rise to or likely to give rise to a Claim under any Section of this Policy, the Insured complies with the provisions set out below:

33.1 In respect of any Claim under Sections A and/or B, the Insured or, if deceased, his legal or other representative, shall immediately notify the Claims Administrator and provide him with the name of the Physician, the name and telephone number of the hospital at which treatment is being obtained, and the fact or matter giving rise to the need for medical treatment, and any other documentation or information that might be required or requested by the Claims Administrator. **No claim will be entertained for any Hospitalization if a notification has not made to the Allianz Global Assistance whilst as an inpatient in a hospital**

33.2 For all other Claims, the Insured shall immediately, and in any event not later than 14 days after his return to Sri Lanka, notify the Claims Administrator and obtain a Claim Form for completion and return to the Claims Administrator along with supporting invoices and any other documentation or information that might be required or requested by the Claims Administrator.

33.3 The Insured shall not admit any liability or make any offer or promise of payment without the prior written consent of the Company.

34. Reasonable Care

The Insured shall take all reasonable and proper steps to safeguard and protect himself and his possessions against any fact, matter, circumstance or cause that might result in a Claim under this Policy, and shall not do or cause to be done anything that might enhance the likelihood of a Claim under this Policy (except in an attempt to save human life).

35. Transfer of Interest

This Policy of Insurance is a Contract between the Company and the Insured Person. The Insured Person shall not transfer, assign, alienate or in any way pass the benefits and/or liabilities to any other person, Institution, Hospital, Company or Body Corporate without specific prior approval in writing by a duly authorised officer of the Company. However, if the Insured Person(s) is permanently incapacitated or deceased, the legal heirs of the Insured may represent him in respect of Claim under the Policy.

36. Assessment of Claim & Payment

- a. No sum payable under this policy shall carry interest.
- b. The Company shall be under no liability to make payment in respect of any Claim until such time as the Insured has provided it and/or the Claims Administrator with whatever documentation and/or information may be requested and established the quantum of any amount claimed to the Company's satisfaction.
- c. The obligation of the Company to make payments to the Insured in respect of Claims made after the Insured's return to Sri Lanka shall be to make payment in Sri Lankan Rupees only.
- d. Specifically in respect of a Claim under Sections A, B and/or C:
 - i. The Company's liability to make payment is in respect of those charges approved by the Claims Administrator prior to being incurred
 - ii. If requested by the Claims Administrator and/or the Company, the Insured shall (at his own expense) furnish all certificates, information, proofs or other evidence in support of the Claim, present himself for medical examination by a Medical Advisor as considered necessary by the Claims Administrator and/or the Company, and the

Insured agrees that the Claims Administrator and/or the Company may approach anyone who may have treated the Insured for information and/or documentation in respect of the Claim.

- iii. In the event of the Insured's death, the Company shall have the right to carry out a post mortem at its own expense.
- iv. Where the Insured is incapacitated or otherwise unable to give a valid release for the Claim, the Company may make arrangements to pay the Claim to the Insured's legal guardian or legal representative. Any payment made by the Company thereby in good faith shall operate as a complete and effective discharge of the Company's liability in respect of the Claim.
- v. The Company shall not pay Medical Expenses except at the Usual and Customary Level.

37. Arbitration

- 37.1 If any dispute or difference shall arise as to the quantum to be paid under the policy (liability being otherwise admitted) such difference shall independently of all other questions be referred to decision of a sole arbitrator in writing by the parties or if they cannot agree upon a single arbitrator within 30 days of any party invoking arbitration, the same shall be referred to a panel of the arbitrators comprising of two arbitrators, one appointed by each of the parties to the dispute/difference and the third arbitrator to be appointed by such two arbitrators and arbitration shall be conducted under and in accordance with the provisions of the Arbitration and Conciliation Act, 1996. The law of the arbitration will be Sri Lankan law, and the seat of the arbitration and venue for all hearings shall be within Sri Lanka.
- 37.2 It is clearly agreed and understood that no difference or dispute shall be referable to arbitration as herein before provided, if the Company has disputed or not accepted liability under or in respect of this policy.
- 37.3 It is hereby expressly stipulated and declared that it shall be a condition precedent to any right of action or suit upon this policy that award by such arbitrator/arbitrators of the amount of the loss or damage shall be first obtained
- 37.4 If these arbitration provisions are held to be invalid, then all such disputes or differences shall be referred to the exclusive jurisdiction of the Sri Lankan Courts.

38. Fraud

If the Insured shall make or advance any Claim knowing the same to be false or fraudulent as regards amount or otherwise, this Policy shall be void and all Claims or payments hereunder shall be forfeited.

39. Notifications & Declarations

Any and all notices and declarations for the attention of the Company shall be submitted in writing and shall be sent to the address specified in the Schedule.

40. Subrogation

The Insured and any claimant under this Policy, shall at the expense of the company do or concur in doing or permit to be done all such acts and things that may be necessary or reasonably required by the Company for the purpose of enforcing any rights and remedies or obtaining relief or indemnity from other parties to which the Company shall be or would become entitled or subrogated upon the Company paying for or making good any loss or damage under this Policy whether such acts and things shall be or become necessary or required before or after the Insured's indemnification by the Company.

41. Governing Law

The construction, interpretation and meaning of the provisions of this policy shall be determined in accordance with the laws of Sri Lanka. The section headings of this Policy are included for descriptive purposes only and do not form part of this Policy for the purpose of its construction or interpretation. The terms of this policy shall not be waived or changed except by endorsement issued by the Company.

42. Entire Contract

The Policy constitutes the complete contract of insurance. No change or alteration in this Policy shall be valid or effective unless approved in writing by the Company, which approval shall be evidenced by an endorsement on the Policy. No agent shall or has the authority to change in any respect whatsoever any term of this Policy or waive any of its provisions.

43. Due Observance

The due observance of and compliance with the terms, provisions, warranties and conditions of this Policy in so far as they relate to anything to be done or complied with by the Insured shall be a condition precedent to the Company's liability under this Policy.

44. Contribution

If, at the time of the happening of any loss or damage covered by this Policy there shall be existing any other insurance of any nature whatsoever covering the same, whether effected by the Insured or not, then the Company shall not be liable to pay or contribute more than its rateable proportion of any loss or damage.

D. General Exclusions Applicable to All Sections

The Company shall be under no liability to make payment hereunder in respect of any Claim directly or indirectly caused by, based on, arising out of or howsoever attributable to any of the following:

45. The Insured's participation in any naval, military or air force operations whether in the form of military exercises or war games or actual engagement with the enemy, whether foreign or domestic.
46. War, invasion, acts of foreign enemy, hostilities (whether war be declared or not), civil war, civil unrest, rebellion, revolution, insurrection, military or usurped power or confiscation or nationalisation or requisition of or destruction of or damage to property by or under the order of any government or local authority.
47. The loss or destruction or damage to any property whatsoever or any loss or expenses whatsoever resulting or arising therefrom or any consequential loss directly or indirectly caused by or contributed to by or arising from:
48. Ionising radiation or contamination by radioactivity from any nuclear waste from combustion of nuclear fuel; or
49. the radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof, or
50. asbestosis or any related Sickness or Disease resulting from the existence, production, handling, processing, manufacture, sale, distribution, deposit or use of asbestos, or products thereof.
51. The Insured's actual or attempted engagement in any criminal or other unlawful act.
52. Any consequential losses.
53. In respect of travel by the Insured to any country against whom the Republic of Sri Lanka has imposed general or special travel restrictions, or against whom it may be impose such restrictions, or any country which has imposed or may impose subsequently, such restrictions against travel by a citizen of the Republic of Sri Lanka to such country.
54. The Insured engaging in air travel unless he flies as a passenger on an Airline. For the purpose of this exclusion, air travel means being in or on, or boarding an aircraft for the purpose of flying therein or alighting therefrom following a flight.

ANNEXURE I ENTITLEMENT FOR BENEFITS

A claim form must be completed by the Insured and submitted within 30 days of arrival to Sri Lanka. This time limit may be extended subject to prior approval of the Claims department where supporting accounts are not available in time. All accounts submitted in respect of expenditure incurred must be original and not photocopies. All claims requested relating to the travel benefits should be made to **ALLIANZ INSURANCE LANKA LTD**, No 46/10, Nawam Mawatha, Colombo 02, Sri Lanka by complying with the requisite claim formalities. The policy reference number for Platinum/Gold/Signature and Infinite Credit Cardholders is TPS/12682

DOCUMENTS REQUIRED FOR CLAIMS PROCESSING

Claim forms for all claims can be obtained from Allianz Insurance Lanka Ltd., Standard Chartered Bank Card Centre, or by sending an email to travel@allianz.lk.

1. All claims should be submitted within 30 days of arrival in Sri Lanka

2. Documents required and the procedure in respect of each type of claim (for all types of claims, proof of travel tickets purchased through the use of the Standard Chartered Bank credit card should be submitted);

TYPE OF CLAIMS

Accidental Death

Documents required

The beneficiary of the Insured should submit the following:

- The Claim form
- Birth Certificate
- Death Certificate
- Post Mortem Report
- Allianz Claims Dept will advise upon receipt of claim notification for any additional documentation/information.

Procedure

In case of a death or dismemberment whilst on a common carrier, all documents pertaining to the loss including correspondence with carrier should be submitted.

Accidental Dismemberment

Documents required

Same as Emergency Accident claims.

Procedure

Same as Emergency Accident claims

Overseas Emergency Accident & Sickness Medical Expenses (Excess USD 100)

Documents required

- The claim form
- Doctor's reports
- Original administration/ discharge card
- Original bills/receipts/prescriptions
- Original X-Ray reports/pathological/investigative reports
- Copy of passport/visa with entry and exit stamp

Procedure

In case of hospitalisation please keep all Insured's medical reports/bills/invoices/receipts safely.

Common Carrier Baggage Loss

Documents required

- The claim form
- Copy of the passport/visa with entry and exit stamp
- Copies of baggage tags
- Copies of correspondence with the airline authorities/common carrier/others about loss of checked in baggage
- Property Irregularity Report (obtained from airline/common carrier)
- Details of compensation received from airlines/ common carrier/other authorities, if any
- Original receipts of all additional expenses incurred due to the delay

Procedure

Intimate the airline/common carrier about Insured's loss and lodge complaints. All records pertaining to Insured's complaint and their response should be submitted.

Common Carrier Baggage Delay and/or Flight/Trip Delay**Documents required**

- The claim form
- Original bill of purchases made/expenses incurred due to the delay
- Copy of travel ticket and boarding pass
- Copies of correspondence with the airline authorities certifying the Delay.

Procedure

Please obtain a written clarification from the airline regarding the delay and the cause of delay. Keep a record of hours of delay from the scheduled time. Keep receipts of all additional expenses (meal, and lodging in particular) incurred due to the delay.

Trip Cancellation**Documents required**

- The claim form
- Original travel tickets/bills of prepaid non-refundable expenses (travel and accommodation only)
- Death Certificate of Immediate Family member in case of Death of Family member
- Police report in case of Burglary or attempt thereat at an Insured's place of residence or business.
- Allianz Claims Dept will advise upon receipt of claim notification for any additional documentation/information.

Personal Liability**Documents required**

- Full statement of the facts in writing
- Witness statements
- Any other documents relevant to the incident, including summons, legal notices etc.
- Any other information relevant to the incident.
- Allianz Claims Dept will advise upon receipt of claim notification for any additional documentation/information.
- Copy of Return Air Ticket

Procedure

Do not commit any benefit/compensation or enter into any agreements. Submit all documents along with a detailed statement to Allianz

Loss of Passport**Documents required**

- Copy of the new passport with exit stamp
- Original bills/invoices of expenses incurred for obtaining a new passport
- Copy of the Police Report
- Copy of Return Air Ticket

Procedure

Do not commit any benefit/compensation or enter into any agreements. Submit all documents along with a detailed statement to Allianz

Legal Fees

Documents required

- All information relating to the subject legal expenses to be give in writing along with the invoice.
- Allianz Claim Dept will advice upon receipt of claim notification and will contact the Insured for any additional information.
- Copy of Return Air Ticket

Procedure

Submit the duly signed claim form and all the documents to Allianz address given below:

Allianz Insurance Lanka Ltd.
No. 46/10, Nawam Mawatha,
Colombo 02, Sri Lanka
Tel: +94 11 2300400 Fax: +94 11 2304404

Notes:

- Above listed documents and procedures are guidelines only. Allianz may call for additional documents/information as relevant and it is your duty as the Insured to take all reasonable actions/precautions to prevent/minimize any accident/loss/damage.
- If any hospital does not submit a bill to you for the treatment/service rendered please intimate Allianz Global Assistance before you leave the hospital. The contact details of Allianz Global Assistance are as follows;

Type	Contact
Phone	00911244343955
Email	travel.assistance@allianz-assistance.in
Fax	00911244343900