MSIG Insurance (Singapore) Pte. Ltd.

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PRODUCT SUMMARY TRAVEL INSURANCE FOR STANDARD CHARTERED BANK (SINGAPORE) LIMITED'S VISA INFINITE CREDIT CARD HOLDERS

Underwritten by MSIG Insurance (Singapore) Pte. Ltd.

PRODUCT INFORMATION

This policy is arranged by Standard Chartered Bank (Singapore) Limited ("Bank") for the Standard Chartered Bank (Singapore) Limited's Visa Infinite Credit Card holders under the Master Policy 28711676 SVI ("Policy") issued by MSIG Insurance (Singapore) Pte. Ltd. ("Insurer" or "Company"), to the Bank.

This insurance is subjected to the terms exclusions and conditions contained in or endorsed onto this Policy if during the **Period of Insurance** or any subsequent period for which the Policyholder shall have paid and the Insurer shall have agreed to accept the renewal premium, the Insurer will indemnify the **Insured Person** in accordance with the terms, exclusions and conditions of the Policy.

BENEFITS AND PREMIUMS

Summary of Benefits

Subject to the terms, conditions and exclusions of the Policy, the **Company** will pay the benefits as described below in respect of a **Journey**, when:

1. the **Insured Person** is travelling out of and return to Singapore in a conveyance and all of the travel fare for the **Insured Person**'s travel in that conveyance has been charged to the **Cardholder's** valid SCBSL Visa Infinite Card. (Note: Where the fare on the conveyance concerned is incorporated as part of the total cost of a package tour, this requirement is deemed to be satisfied if the total cost of that package tour was charged to that one valid SCBSL Visa Infinite Card);

Limit of Liability

2. the Policy is still in force at the time the **Insured Person** commences the **Journey**.

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Section 1- PERSONAL ACCIDENT COVER	
Pay compensation for death or disablement as described in Table of Compensation if an Insured Person suffers Injury while travelling solely as a fare paying passenger in a Common Carrier during the Journey which within one hundred and eighty (180) days of its happening is the sole cause of the death or such disablement as certified by a Medical Practitioner.	 up to \$\$1,000,000 per Insured Person (up to 69 years old) up to \$\$500,000 per Insured Person (aged 70 years old and above)
C. A 2 MEDICAL EXPENSES	
Section 2- MEDICAL EXPENSES	
Reimburse the Insured Person for the necessary medical, surgical, nursing and hospital charges incurred at the direction of a Medical Practitioner including emergency dental treatment expenses incurred to restore sound and natural teeth or a fractured jaw, as a result of Injury or Sickness suffered by the Insured Person during the Journey outside Singapore. Up to \$500 for emergency dental treatment expenses for any one Accident resulting in Injury .	Maximum Limit per Journey resulting in Injury or Sickness : - up to \$\$50,000 per Insured Person (up to 69 years old) - up to \$\$25,000 per Insured Person (aged 70 years old and above)
- If the Insured Person has obtained medical treatment during the Journey outside Singapore for an Injury or Illness suffered	

during the Journey outside Singapore, We will further pay for the medical expenses which are a continuation in Singapore of such overseas medical treatment. Provided such expenses are incurred not more than thirty (30) days after the **Insured Person**'s return to Singapore

- If the medical treatment is not first obtained outside Singapore, the **Insured Person** must seek medical treatment in Singapore within seventy-two (72) hours of his/her return to Singapore provided such medical expenses are incurred within thirty (30) days after the **Insured Person**'s return to Singapore.
- Subject to excess S\$150 of each and every claim under this Section other than emergency dental treatment expenses.

Section 3 – TRAVEL ASSISTANCE SERVICES

3.1) Emergency Medical Evacuation & Repatriation

- Organise the air and/or surface transportation, medical care during transportation, communications and all usual ancillary services made available to Us which are required when moving the Insured Person to the nearest hospital where appropriate medical care is available, in the event should an Insured Person suffer Injury or Sickness during the Journey outside Singapore which results in a Serious Medical Condition.
- Following the Emergency Medical Evacuation referred above and if deemed medically necessary by Us, We will arrange and pay for the repatriation of the **Insured Person** to Singapore by scheduled airline flight (on economy class) or any other appropriate means of transportation, including any supplementary cost of transportation to and from the airport, if his/her original ticket is not valid for the purpose, provided that the **Insured Person** shall surrender any unused portion of his/her ticket to the **Company**.

3.2) Medical & Travel Assistance Service

- The following Medical and Travel Assistance Services are made available to an **Insured Person** by Our appointed assistance company. Please note that all cost and expenses incurred for the services listed below are to be borne by the **Insured Person**:
 - 1) Medical Assistance Services
 - Telephone Medical Advice
 - Medical Service Provider Referral
 - Arrangement of Hospital Admission
 - Guarantee of Medical Expenses incurred during Hospitalisation
 - 2) Travel Assistance Services
 - Embassy / Interpreter Referral
 - Lost Luggage Assistance
 - Lost Travel Document Assistance
 - Legal Referral
 - Emergency Message Transmission
 - Children Escort Assistance

Maximum Limit in respect of each **Insured Person** for all services and benefits under Sections 3.1 & 3.3 shall not exceed the limit of S\$100,000 for any one Journey regardless of the number of events involved.

Limit of Amount Payable under Section 3.3 – Compassionate Visit, up to S\$5,000 per **Insured Person**

3.3) Compassionate Visit

- In the event that an **Insured Person** is hospitalised outside Singapore as a result of **Injury** or Illness for more that seven (7) consecutive days and no Adult member of the **Insured Person**'s family is with him/her, We will pay for the cost of a return scheduled airline (on economy fare basis) and hotel accommodation of up to \$200 per day incurred by one memer of the **Insured Person**'s immediate family who, on the written advice of a Medical Practitioner, is required to travel Singapore Singapore to be with the **Insured Person** until the **Insured Person** is able to resume his/her Journey or return to Singapore, whichever occurs.

Section 4.1 – DELAYED BAGGAGE

In the event the **Insured Person**'s checked-in baggage is temporarily lost in transit or misdirected by the carrier and not restored to the **Insured Person** within six (6) hours after his/her arrival at the baggage pick up point of the scheduled destination outside Singapore, the **Company** will pay S\$200 for every full six (6) consecutive hours of delay up to the Limit of Amount Payable.

Where the delay occurs in Singapore, We will only pay a maximum sum of S\$200 provided a minimum of six (6) consecutive hours of delay has lapsed.

Limited of Amount Payable:

Up to S\$1,000 per Insured Person

Section 4.2 – LOSS OF BAGGAGE

In the event the **Insured Person**'s personal baggage and effects are damaged, lost or destroyed by any **Accident** or misfortune anywhere in the world during the Journey, the **Company** will pay the **Insured Person** for the cost of replacement or repair of such article(s). Subject to maximum limit of S\$1,000 per article, pair or set of articles.

Limit of Amount Payable: Up to \$\$5,000 per **Insured Person**

The maximum liability of the **Company** in respect of all **Insured Persons** travelling in one conveyance shall not exceed the Conveyance Limit of S\$10,000,000 or the total amount of Compensation payable in respect of such **Insured Persons**, whichever is the lesser.

If the total amount of all claims for **Insured Persons** travelling in one conveyance exceeds the Conveyance Limit, the **Company's** liability in respect of each of such **Insured Persons** will be a rateable proportion of the benefits due in respect of that person.

SOME DEFINITIONS

- **Accident** means means a sudden and unexpected event that is caused by direct violent external and visible means which gives rise to a result which the **Insured Person** did not intend or anticipate
- Cardholder means means an individual who had been issued with a Standard Chartered Bank (Singapore) Limited's Visa Infinite Credit Card
- Common Carrier means any land, water or air conveyance operating as a form of public transport under a licence for the regular and scheduled transportation of fare-paying passengers which any member of the public can join at a recognised stop and pay a fare. Common Carrier includes taxi service, but exclude tour coach or any mode of transportation that is chartered or arranged for the tour.
- **Injury** means bodily **Injury** to the **Insured Person** occurring during the **Journey** caused solely by **Accident** and not by **Sickness**, disease or gradual physical or mental wear and tear.
- Insured/Policyholder means Standard Chartered Bank (Singapore) Limited ("SCBSL").

- **Insured Person** means any Standard Chartered Bank (**Singapore**) **Limited**'s Valid Visa Infinite Principal Credit Card Holder and his/her legal spouse.
- **Journey** means the entire return trip not exceeding ninety (90) consecutive days from the time during the **Period of Insurance** that the **Insured Person** leaves his/her home or workplace within Singapore for the sole purpose of commencing a trip abroad and ending up to three (3) hours after the **Insured Person** arrives back to Singapore or returns directly to his/her home or workplace in Singapore, whichever is sooner.
- **Sickness** means any sudden and unexpected deterioration of health of an **Insured Person** due to a medical condition contracted, commencing or manifesting during the **Journey** outside Singapore which requires the treatment by a **Medical Practitioner**.
- We / Us / Our / Company means MSIG Insurance (Singapore) Pte. Ltd.

KEY PRODUCT PROVISIONS

The following are some provisions/conditions found in the policy contract of this plan. This is only a brief summary and you are advised to refer to the exact terms and conditions applicable to the policy contract. Please call our Customer Service Hotline at 6827 7605 should you require further explanation.

COMMUNICATION IN WRITING

Every notice or communication to be given or made under this Policy shall be delivered in writing to the **Company**.

RENEWAL

This Policy is renewable from year to year by mutual agreement between the **Insured** and the **Company**.

PRECAUTION

The **Insured Persons** must take all reasonable steps to prevent loss, damage or accident and recover any missing property.

WHO WE WILL PAY

If a claim is admitted by Us under the Policy, We will pay to the **Insured Person** who is the SCBSL Visa Infinite Card **Cardholder** unless he/she is deceased, We will then pay to his/her estate.

NON-ASSIGNMENT AND DISCHARGE

The **Company** will not recognise or be affected by any notice of trust, charge or assignment relating to this Policy. The receipt of the **Insured Person**, or **Insured Person's** legal personal representatives or of any person(s) to whom any benefit is expressed to be payable shall in all cases effectively discharge the **Company's** liability.

SUBROGATION

The **Company** shall be entitled to use the **Insured** and/or the **Insured Person's** name to enforce recovery against anyone else whether before or after payment of the claim. **Insured** and the **Insured Persons** will have to give Us all information and assistance that We require.

OTHER INSURANCE (Applicable to Section 2 – Medical Expenses, Section 3.3 – Compassionate Visit and Section 4.2 – Loss of Baggage)

When an incident results in a claim under this Policy and there is other insurance which covers the same loss, damage or expense, the **Company** will pay only Our proportionate share. This condition does not apply to Section 1 - Personal Accident Cover.

FRAUD

If **Insured Person** or anyone acting for **Insured Person** makes a claim under this Policy knowing the claim to be dishonest, fraudulent or intentionally exaggerated in any way, We will not pay the claim and all benefits under this Policy shall be forfeited. We reserve the right to notify the Police of any such claim.

CANCELLATION

- (a) The **Company** may cancel this Policy by sixty (60) days' notice in writing to the **Insured** at the Insured's last known address and in such event will return to the **Insured** the premium paid less the pro-rata portion thereof for the period the Policy has been in force.
- (b) The Policy may be cancelled at any time by the **Insured** by giving thirty (30) days' notice to the **Company** and provided no claim has arisen during the then current **Period of Insurance** the **Insured** shall be entitled to a return of premium paid on a pro-rated basis less the period the Policy has been in force and subject to any adjustment of premium required by the terms or conditions of this Policy.

DUE OBSERVANCE

The due observance and fulfillment of the terms provisions and conditions of this Policy insofar as they relate to anything to be done or not to be done by the **Insured**, **Insured Person** or claimant and the truth of the statements and answers in the proposal shall be conditions precedent to any liability of the **Company** to make any payment under this Policy.

LEGAL PERSONAL REPRESENTATIVE

The terms exclusions and conditions of this Policy, so far as applicable and with any necessary modifications, shall apply to the **Insured Person's** legal personal representative(s).

APPLICABLE LAW

This contract of insurance is governed by and is to be construed in accordance with the laws of Singapore. The court of competent jurisdiction in Singapore shall have the exclusive jurisdiction over all matters relating to the construction, validity and performance of this contract of insurance.

CURRENCY

All amounts shown are in Singapore dollars.

CONDITION PRECEDENT

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

- (a) for the risk insured, the named **Insured** 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 named **Insured** has declared that it 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 named **Insured** 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 named **Insured** to the **Company** before cover incepts.

EXCLUSION OF RIGHTS UNDER THE 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 (Cap 53B) to enforce any of its terms.

KEY EXCLUSIONS

There are certain situations under which no benefits will be payable. These are stated as General Exclusions in the Policy contract. The following is a list of some of the exclusions for this Policy.

The **Company** will not be liable for any claims, damages, losses, death or disablement, **Injury**, **Sickness** or liability directly or indirectly caused by, or in connection with, or arising from:

- sexually transmitted disease, HIV (Human Immunodeficiency Virus) and/or any HIV related Illness including AIDS (Acquired Immune Deficiency Syndrome) and/or any mutant derivative or variations thereof howsoever caused.
- pregnancy, childbirth, miscarriage, abortion or menopause.
- suicide or attempted suicide, intentional self-inflicted **Injury** or any act which could reasonably be considered as exposure to danger (except when undertaken in an attempt to save human life), insanity, or whilst the **Insured Person** is under the influence of intoxicating liquor, drugs or other substance abuse (other than drugs taken under medical supervision and not for the treatment of drug addiction).
- any anxiety state and/or depression suffered by the **Insured Person** and diagnosed prior to the date of arranging the **Journey**.
- the **Insured Person** engaging in or practising for 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; rafting or canoeing involving white water rapids, bungee jumping, jet skiing, underwater activities involving artificial breathing apparatus, winter sports and activities including skiing and snowboarding, the use of bobsleigh or skeleton, hunting, pot-holing, mountaineering or rock climbing that ordinarily requires the use of ropes or guides and extreme sports which involve speed, height, danger, a high level of physical exertion, highly specialised gear or spectacular stunts; taking part in or practising for speed or time trials, competitions, sprints or racing of any kind, or as a professional sportsperson (where one could earn income, remuneration or sponsorship from engaging in such sport or activity) or any organised team football; manual work of any kind; taking

- part in expeditions or the crewing of a vessel from one country to another or engaging in active service in the armed forces of any nation.
- the **Insured Person** 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 explosives, ammunitions or firearms; any wilful, malicious, criminal or unlawful acts committed by the **Insured Person** or any person acting on **Insured Person**'s behalf; any prohibitions or regulations by any Government or local authority; any consequential loss not specified in the Policy.
- Additionally:-
 - We will not pay for the cost of any elective (non emergency) treatment or surgery, including exploratory tests, which are not directly related to the **Sickness** or **Injury** which necessitated the **Insured Person**'s admittance into Hospital; any form of cosmetic surgery or treatment; treatment or service provided by a health spa, convalescent or nursing home or any rehabilitation centre; any claim if the **Insured Person** is under treatment not recommended by or undertaken by a **Medical Practitioner**; any claim if the **Insured Person** is travelling against the advice of a **Medical Practitioner** or for the purpose of obtaining medical treatment during the **Journey**.
- War & Terrorism Exclusion
- Institute Radioactive Contamination, Chemical, Biological, Biochemical and Electromagnetic Weapons Exclusion Clause.
- Political Risks Exclusion

TERMS AND LIMITATIONS APPLICABLE TO SECTION 3.1, 3.2 and 3.3

Worldwide medical and travel assistance services referred in Section 3.1, 3.2 and 3.3 are arranged by Us through our appointed assistance company where applicable to assist the **Insured Person** in any emergency during his/her **Journey** outside Singapore through the MSIG Assist 24 hour Hotline +65 6323 8288.

The **Insured Person** and persons acting on behalf of the **Insured Person** will be required to always identify themselves by their full names, type of Visa Infinite card that they are holding and Policy number.

The maximum limit in respect of each **Insured Person** for all services and benefits under Sections 3.1 & 3.3 shall not exceed the limit of \$100,000 for any one **Journey** regardless of the number of events involved.

The services provided are rendered on a worldwide basis. However, We and our appointed assistance company shall not be required to provide such services to **Insured Persons** located in areas which make such services impossible or reasonably impracticable.

We and our appointed assistance company cannot be held responsible for failure to provide services or for delays caused by conditions beyond Our control including but not limited to, strikes or where local laws or regulatory agencies prohibit Us and our appointed assistance company from rendering such services. We are not responsible for any act or failure to act on the part our appointed assistance company, the professionals or other persons such as, and not limited to, physicians, hospitals and clinics, to whom the **Insured Person** is being referred, as they are independent contractor to the **Company**.

We may at any time at Our own expense and without prejudice to Section 3.1 & 3.3 take proceedings in or the name of the **Insured Person**(s) to obtain compensation or secure an indemnity from any third party in respect of any loss or **Injury** or **Sickness** giving rise to the provision of services under this Section.

SPECIFIC EXCLUSIONS APPLICABLE TO SECTION 3.1, 3.2 & 3.3

The **Company** shall not be liable for:

- (a) Any expenses paid or incurred by the **Insured Person**(s) for services not arranged or approved by Us.
- (b) All circumstances described under the Exclusions of this Policy.

CLAIMS CONDITIONS

The payment of claims under this Policy is dependent upon observance of its terms and conditions by the Insured Persons.

- 1. Notice shall be given to the Company as soon as possible but in any case within thirty (30) days of the happening of any occurrence in respect of which a claim is to be made.
- 2. The Insured Person shall at his/her own expense furnish to the Company such certificates, receipts, information and evidence as the Company may reasonably require.
- 3. The Insured Person shall employ the services of a Medical Practitioner soon after the happening of any Injury and shall undergo any treatment from a Medical Practitioner as deemed necessary by the Medical Practitioner.
- 4. The Insured Person may have to undergo further medical examination required by the Company at Our expense if this is not forbidden.
- 5. The Company shall in the case of the death of any Insured Person be entitled to have a post mortem examination at Our own expense if it is not forbidden by law.
- 6. If there is any dispute as to the liability and/or amount to be paid under this Policy, such dispute shall be determined by arbitration in accordance with the statutory provisions on arbitration in that behalf for the time being in force. it is hereby expressly stipulated that it shall be a condition precedent to any right of action or suit upon this Policy that an arbitration award shall be first obtained.

 If the dispute shall not within twelve (12) months from the date of disclaimer of liability or date of
 - If the dispute shall not within twelve (12) months from the date of disclaimer of liability or date of rejection of the offer made have been referred to arbitration under the provisions herein contained, then such claim shall for all purposes be deemed to have been abandoned and shall not thereafter be recoverable hereunder.
- 7. If an action or suit is not commenced within twelve (12) months after the arbitration award is made under Claim Condition 6 of this Policy, the Company shall not be liable for such claim under this Policy and such claim shall for all purposes be deemed to have been abandoned and shall not thereafter be recoverable against the Company.

IMPORTANT NOTES:

This Product Summary is not a contract of insurance. Full details of the terms, conditions and exceptions of this insurance are provided in the Policy that is issued to and lodged with the Bank.

This policy is protected under the Policy Owners' Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your 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 MSIG or visit the GIA or SDIC websites (www.gia.org.sg or www.sdic.org.sg).