



# **Aon Protect Travel** **Policy** Wording

Brought to you by

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underwritten by

**CHUBB®**

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## Welcome you're now Chubb Insured

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### **Insurer(s):**

Chubb Insurance South Africa Limited  
Registration number: 1973/008933/06, FSP number: 27176  
Ground Floor, The Bridle, Hunts End Office Park, 38 Wierda Road West,  
Wierda Valley, Sandton, 2196  
PO Box 1192, Saxonwold, 2132  
Telephone: +27 [0] 11 722 5700  
Fax: +27 [0] 11 783 0812

### **Queries (Chubb travel insurance call centre):**

Telephone: 0800 467 467 from South Africa only or +27 (0) 10 211 5797  
Mon – Fro 08h00 – 17h00  
E-mail: [chubbtravel-sa@Chubb.com](mailto:chubbtravel-sa@Chubb.com)

### **Claims service centre:**

Telephone: +27 [0] 11 991 8286

### **Chubb assistance:**

Chubb Medical and personal assistance (Tel): +27 [0] 11 991 8705

### **Compliance service centre:**

Telephone: 0860 223 266 , 0860 numbers are operational from SA only  
Global address: [www.Chubb.com](http://www.Chubb.com)  
South Africa: [www.Chubb.com/za](http://www.Chubb.com/za)

## Welcome

Thank **you** for choosing Chubb Travel Insurance. This document, including **your** *Policy Schedule* and **your** *Schedule of Benefits*, together with the completed application form supplied when applying for this insurance is **your** Travel Insurance **Policy**, which constitutes a contract between **you** and **us**. In return for payment of the **Premium** when due, **we** agree to insure **you** during the **Period of Insurance**, subject to the **Policy** Terms, Conditions and Exclusions. This document contains full details of what is covered, what is not covered, the conditions that apply, how to get assistance in an emergency and how to make a claim.

**Your** *Schedule of Benefits* contains the level of cover that **you** have bought and whether **you** have bought cover under the optional *Winter Sports Extension*. **Your** *Schedule of Benefits* shows the maximum amount **we** will pay under each Section. **You** must tell **us** if any of the information **you** have given **us** changes.

A change in circumstances may affect **your** cover, even if **you** do not think a change is significant, and **we** may need to endorse this **Policy** accordingly. All changes in circumstances must be communicated to **us** without delay. **We** will endorse this **Policy** each time a change is agreed.

If **you** have any questions, please contact **us** and **we** will be happy to help



For and on behalf of Chubb Insurance South Africa limited

## Schedule of benefits

Sum insured figures in Rand		Excess	Travel Superior	Travel Plus	Travel Visa	Travel Seniors
Age Limits			6 months – 69 years inclusive	6 months – 69 years inclusive	6 months – 69 years inclusive	70 – 79 years inclusive
<b>Section 1 - Emergency medical and related expenses</b>						
1.1	Emergency Medical Expenses	500	Unlimited	40,000,000	1,000,000	750,000
1.2	Emergency Medical Repatriation Expenses	0	Actual expenses	Actual expenses	Actual expenses	Actual expenses
1.3	Emergency Medical Evacuation	0	Actual expenses	Actual expenses	Actual expenses	Actual expenses
1.4	Supplementary Expenses					
1.4.(a)	Accompanying Family Member	0	40,000	30,000	0	10,000
1.4.(b)	Burial Expenses	0	40,000	30,000	0	10,000
1.4.(c)	Return of Mortal Remains	0	Actual expenses	Actual expenses	Actual expenses	Actual expenses
1.4.(d)	Return of Children	0	40,000	30,000	0	10,000
1.5	Pre-Existing Medical Condition Extension (age <55)	2,500	500,000	0	0	0
1.6	Pre-Existing Medical Condition Extension (age 55-69)	2,500	250,000	0	0	0
<b>Section 2- Personal injury</b>						
2.1	Death	0	500,000	0	0	0
2.2	Public Conveyance (Aircraft only) - Additional Death Benefit	0	500,000	0	0	0
2.3	Permanent Disabling Injuries	0	1,000,000	0	0	0
<b>Section 3 -businessclass assistance</b>						
3.1	Chubb Medical and Personal Assistance	0	Assistance service	Assistance service	Assistance service	Assistance service
3.2	Security Assistance Services	0	Assistance service	Assistance service	Not applicable	Not applicable
<b>Section 4 - Cancellation &amp; curtailment and disruption</b>						
4.1	Cancellation	500	40,000	20,000	0	10,000
4.2	Curtailment, Alteration, Re-arrangement	500	40,000	20,000	0	10,000
4.3	Travel Delay	6 hrs	10,000	5,000	0	1,000
4.4	Missed Connection	6 hrs	10,000	5,000	0	1,000
<b>Section 5 – Baggage</b>						
5.1	Personal Belongings (single item limit 25% of Sum Insured)	500	30,000	20,000	0	10,000
5.1	Personal Belongings Delay	6 hrs	3,000	2,000	0	2,000
5.2	Money	500	7,500	5,000	0	2,000
5.3	Credit, Debit or Charge Card Misuse	500	7,500	5,000	0	2,000
5.4	Emergency replacement of Passport, Visa or Travel Documents and driving licence (single item limit 25% of Sum Insured)	500	7,500	5,000	0	2,000
<b>Section 6 - Political or natural disaster</b>						
6.1	Evacuation (Per Insured Event & Aggregate Limit)	0	500,000	0	0	0
6.2	Alternative Accommodation (2,000 / Day up to a max of)	0	30,000	0	0	0
<b>Section 7 - Personal security specialist expenses</b>						
7.1	Security Specialist Expenses	0	100,000	0	0	0
<b>Section 8 - Personal liability</b>						
8.1	Bodily Injury	1,000	25,000,000	10,000,000	0	0
8.2	Material Damage	1,000	25,000,000	10,000,000	0	0
<b>Section 9 - Legal expenses, hijack or kidnap and wrongful detention and Red24 assistance services</b>						
9.1	Hijack or Kidnap & Wrongful Detention Daily Benefit (10,000/ day)	24 hrs	50,000	0	0	0
9.2	Kidnap & Wrongful Detention Expenses	0	500,000	0	0	0
Aggregate limits			100,000,000	40,000,000	1,000,000	750,000

ACE has acquired Chubb, creating a global insurance leader operating under the renowned Chubb name. Chubb Insurance South Africa Limited (Reg. No. 1973/008933/06) is an authorised Financial Services Provider (FSP No. 27176), Ground Floor, The Bridle, Hunts End Office Park, 38 Wierda Road West, Wierda Valley, Sandton, 2196.

Sum insured figures in Rand		Excess	* Annual Multi-Trip - Travel Superior	* Annual Multi Trip -Travel Plus	** Travel Top-up
			6 months – 69 years inclusive	6 months – 69 years inclusive	6 months – 69 years inclusive
<b>Age Limits</b>					
<b>Section 1 - Emergency medical and related expenses</b>					
1.1	Emergency Medical Expenses	500	Unlimited	40,000,000	Unlimited
1.2	Emergency Medical Repatriation Expenses	0	Actual expenses	Actual expenses	Actual expenses
1.3	Emergency Medical Evacuation	0	Actual expenses	Actual expenses	Actual expenses
1.4	Supplementary Expenses				
1.4.(a)	Accompanying Family Member	0	40,000	30,000	40,000
1.4.(b)	Burial Expenses	0	40,000	30,000	40,000
1.4.(c)	Return of Mortal Remains	0	Actual expenses	Actual expenses	Actual expenses
1.4.(d)	Return of Children	0	40,000	30,000	40,000
1.5	Pre-Existing Medical Condition Extension (age <55)	2,500	500,000	0	500,000
1.6	Pre-Existing Medical Condition Extension (age 55-69)	2,500	250,000	0	250,000
<b>Section 2- Personal injury</b>					
2.1	Death	0	500,000	0	500,000
2.2	Public Conveyance (Aircraft only) - Additional Death Benefit	0	500,000	0	500,000
2.3	Permanent Disabling Injuries	0	1,000,000	0	1,000,000
<b>Section 3 -businessclass assistance</b>					
3.1	Chubb Medical and Personal Assistance	0	Assistance service	Assistance service	Assistance service
3.2	Security Assistance Services	0	Assistance service	Assistance service	Assistance service
<b>Section 4 - Cancellation &amp; curtailment and disruption</b>					
4.1	Cancellation	500	40,000	20,000	40,000
4.2	Curtailment, Alteration, Re-arrangement	500	40,000	20,000	40,000
4.3	Travel Delay	6 hrs	10,000	5,000	10,000
4.4	Missed Connection	6 hrs	10,000	5,000	10,000
<b>Section 5 – Baggage</b>					
5.1	Personal Belongings (single item limit 25% of Sum Insured)	500	30,000	20,000	30,000
5.1	Personal Belongings Delay	6 hrs	3,000	2,000	3,000
5.2	Money	500	7,500	5,000	7,500
5.3	Credit, Debit or Charge Card Misuse	500	7,500	5,000	7,500
5.4	Emergency replacement of Passport, Visa or Travel Documents and driving licence (single item limit 25% of Sum Insured)	500	7,500	5,000	7,500
<b>Section 6 - Political or natural disaster</b>					
6.1	Evacuation (Per Insured Event & Aggregate Limit)	0	500,000	0	500,000
6.2	Alternative Accommodation (2,000 / Day up to a max of)	0	30,000	0	30,000
<b>Section 7 - Personal security specialist expenses</b>					
7.1	Security Specialist Expenses	0	100,000	0	100,000
<b>Section 8 - Personal liability</b>					
8.1	Bodily Injury	1,000	25,000,000	10,000,000	25,000,000
8.2	Material Damage	1,000	25,000,000	10,000,000	25,000,000
<b>Section 9 - Legal expenses, hijack or kidnap and wrongful detention and Red24 assistance services</b>					
9.1	Hijack or Kidnap & Wrongful Detention Daily Benefit (10,000/ day)	24 hrs	50,000	0	50,000
9.2	Kidnap & Wrongful Detention Expenses	0	500,000	0	500,000
<b>Aggregate limits</b>			<b>100,000,000</b>	<b>40,000,000</b>	<b>100,000,000</b>

\* The Annual Multi-Trip plan options provide cover for up to 90 consecutive Days of travel per Journey undertaken by the Person Insured during the 365 Day Period of Insurance that the Policy is in place for. *Please refer to General Conditions pt 4 for more information.*

\*\* The Emergency Medical Expenses cover on the Travel Top-up plan option will only be activated, once the automatic Emergency Medical Expenses cover offered to the Person Insured by their Bank, Credit Card or Medical-aid provider has been exhausted. *Please refer to General Conditions pt 9 for more information.*

## Preamble

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### *Premium Payments*

**You** are responsible for paying the **Premium** to **us**. The **Premium** is due in advance. **We** will not be liable for any claims that occur prior to **Us** receiving **Premium**. **We** will not be obliged to accept **Premium** tendered to **us** after the due date, but may do so at **our** sole discretion and on such terms as **We** may determine. Notwithstanding anything to the contrary contained in this **Policy** cover in respect of this **Policy** will not commence before the **Premium**

The SARS Commissioner has directed in terms of sections 20(7) and 21(5) that a short-term insurer does not have to issue a tax invoice, credit note or debit note in respect of a supply of short term insurance. For the purposes of deducting input tax, the insured (being a vendor seeking to deduct the VAT as input tax) must be in possession of the policy document together with proof that the premium has been paid (for example, bank statements).

### *Consumer Protection Information*

This **Policy** should be read carefully to ensure that it has been prepared in accordance with requirements. If there are any queries, these should be directed to the Insurers. This **Policy** should be kept in a safe place - it may be needed for reference if a claim is made

### *Financial Service Board*

**We** are a short-term insurer duly authorised in accordance with the provisions of the Short-term Insurance Act no. 53 of 1998 and regulated by the Financial Services Board (FSB). Full details can be found on the FSB's Register by visiting [www.fsb.co.za](http://www.fsb.co.za) or by contacting the FSB on +27 [0] 12 428 8000

### *Complaints Procedures*

**We** are dedicated to providing a high quality service and want to maintain this at all times. If **you** have experienced any service issues, a complaint can be made to Chubb's Customer Service Manager or the intermediary you purchased the insurance from. Chubb's contact details are:

- I. Telephone: 0800 467 467
- II. Email: [chubbtravel-sa@chubb.com](mailto:chubbtravel-sa@chubb.com)
- III. Postal Address: PO Box 1192 Saxonwold 2032

The **Ombudsman for Short Term Insurance (OSTI)** may be approached for assistance in limited circumstances if there is still dissatisfaction with the Insurers' final response. These Complaints Procedures do not affect any right of legal action the Insured Person may have against the Insurers. The OSTI can be contacted at telephone number +27 [0] 11 726 8900, fax number +27 [0] 11 726 5501 and e-mail [info@osti.co.za](mailto:info@osti.co.za).

These Complaints Procedures do not affect any right of legal action that **You** may have against **Us**.

### *Data Protection*

**We** will use information given, together with other information supplied during the course of applying for and concluding the **Policy**, for the administration of this **Policy**, the handling of claims and the provision of customer services. The information may also be disclosed to and used by:

- a. **Our Service Providers** and agents;
- b. **Your** agents, where appointed; or
- c. Other insurers and regulatory bodies.

**We** may also transfer certain information to countries that do not provide the same level of data protection as South Africa. **You** acknowledge that the sharing of claims and underwriting information (including credit information) by **Us** is essential to enable the insurance industry to underwrite policies, assess risks, to reduce the incidence of fraudulent claims, is in the public interest and is with a view to limiting **Premiums**. **You** hereby waive all rights to privacy in respect of any insurance **Policy** or claim made or lodged and consent to such information being disclosed to any other insurance company or its agent. **You** acknowledge that the information provided may be verified against other legitimate sources or databases.

### *Important Information*

The words and phrases appearing in bold type and starting with a capital letter in this **Policy** are explained in the **General Definitions** and have the same meanings wherever they appear. The words and phrases appearing in italics and starting with a capital letter in this **Policy** refer to specific sections of this **Policy** and the *Policy Schedule*.

### *Your Policy and Policy Schedule*

Please check Your contract carefully to ensure that the cover provided meets **Your** needs, keep all documents in a safe place, take them with **You** when travelling, make a note of the *Important Phone Numbers* in **Your Policy Schedule** (or store them on **Your** mobile phone) and take them with **You** when travelling on a **Journey**. If **You** have any questions please contact **Us** on 0800 467 467

### Persons Covered

- a. To be covered under this **Policy**, throughout the **Period of Insurance You** must:
  - (i) be a named **Person Insured** in the *Policy Schedule*;
  - (ii) be 69 years or under – Applicable to the *Travel Superior, Travel Plus, Travel Visa and Travel Top Up Plans*
  - (iii) be 79 years or under – Applicable to the *Travel Seniors Plan*
  - (iv) be continually resident in the **Country of Domicile**;
- b. At the time **You** applied for this **Policy**, have been able to make the statements **We** asked **You** to make, and which appear in **Your Policy Schedule** under the Section entitled *your declaration to us*.
- c. **Your Policy** covers a **Journey** during the **Period of Insurance** that takes place as reflected in the *Policy Schedule*.

### When Cover Will Start

- a. Subject to (c) below, cover will start, in respect of *Section 4.1 – Cancellation* and *Section 4.3 – Travel Delay* when a **Journey** is booked, if this **Policy** is in force at the time of **Your** booking, or from the *Inception Date and Time* stated in **Your Policy Schedule**, if later;
- b. Subject to (c) below, cover will start, in respect of all *Other Sections* - when a **Person Insured** passes through passport control from within the **Country of Domicile** to commence a **Journey** during the **Period of Insurance**.
- c. Notwithstanding anything to the contrary contained in this **Policy** cover in respect of this **Policy** will not commence before the **Premium** is actually received by **Us**.

### When Cover Will End Automatically

- a. Cover under *Section 4.1 – Cancellation* will end when a **Person Insured** passes through passport control from within **Your Country of Domicile** to begin **Your Journey**.
- b. Under *All Other Sections* of the **Policy**, cover for **You** or **Your Partner** will end on the earlier of:
  - (i) The **Return Date** indicated on **Your Policy Schedule**;
  - (ii) the moment that **You** or **Your Partner** pass back through passport control from outside **Your Country of Domicile** to end their **Journey**;
  - (iii) **You** or **Your Partner's** 70<sup>th</sup> birthday (Applicable to the *Travel Superior, Travel Plus, Travel Visa and Travel Top Up Plans*);
  - (iv) **You** or **Your Partner's** 80<sup>th</sup> birthday (Applicable to the *Travel Seniors Plan*).
- c. Under *All Other Sections* of the **Policy**, cover in respect of a **Child** will end the earlier of:
  - (i) The **Return Date** indicated on **Your Policy Schedule**;
  - (ii) The moment he/she passes back through passport control from outside **Your Country of Domicile** to end their **Journey**;
  - (iii) The date that he/she gets married;
  - (iv) His/her 18<sup>th</sup> birthday prior to the departure date (or 25<sup>th</sup> birthday if still receiving full-time education); or
  - (v) The date that he/she stops being dependent on **You**.

If a **Journey** continues beyond the **Return Date** on **Your Policy Schedule** or a **Journey** has been booked which begins after the **Return Date**, **You** must contact **Us** and **We** may extend the cover at **Our** discretion. If **You** do not contact **Us**, the remaining period of the **Journey** or any future **Journey** which has been booked will not be covered after the **Return Date** of this **Policy**.

### Automatic Extension of the Period of Insurance

If **You** cannot return home from a **Journey** before **Your** cover ends, **Your Policy** will automatically be extended at no extra charge for up to 30-days (or any longer period agreed to by **Us** in writing before this automatic extension expires), provided that **You** cannot return home **Due To** a valid claim under any of the following Sections:

- a. Section 1 - Emergency Medical and Related Expenses
- b. Section 4 - Cancellation, Curtailment and Disruption
- c. Section 6 - Political or Natural Disaster
- d. Section 9 – Hijack, Kidnap and Wrongful Detention

### Covered Leisure Activities, Sports and Winter Sports

**You** are automatically covered when training for or participating in any of the leisure activities, sports listed under *Annexure 1A – Automatically Covered Leisure Activities*, on a recreational basis during **Your Journey**, subject to any terms, conditions and exclusions (noted in brackets next to the relevant sport or activity) and provided that:

- a. **You** wear the recommended/recognised safety equipment;
- b. **You** follow safety procedures, rules and regulations as specified by the activity organisers/providers;
- c. **You** are not racing or competing in or practising for speed or time trials of any kind; and



- d. It is not the main focus of, or, does not form a significant proportion of, **your Journey** (unless **you** have bought the optional *Winter Sports Extension* and are on a **Journey** specifically to take part in winter sports covered under this **Policy**).

If the optional *Winter Sports Extension* is shown as covered on **Your Policy Schedule**, the above list is extended to include the winter sports reflected under *Annexure 1B - Winter Sports Extension*, provided that **You** participate on a non-competitive basis only.

Please refer to *General Exclusions* and the relevant exclusions under each section of this **Policy**, which continue to apply. Please specifically note the exclusion under *Section 8 - Personal Liability: Specific Exclusions* relating to the ownership possession or use of vehicles, aircraft, hovercraft or watercraft firearms and buildings.

## General definitions

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The following General Definitions are applicable to the **Policy** as a whole:

1. **Chubb Medical and Personal Assistance** shall mean the medical and personal assistance services detailed under *Section 3.1 - Chubb Medical and Personal Assistance* rendered by the **Service Providers** who have entered into a contract of service to act for and behalf of **Us**.
2. **Chubb Security Assistance** shall mean the security assistance services detailed under *Section 3.2 - Chubb Security Assistance* rendered by the **Service Providers** who have entered into a contract of service to act for and behalf of **Us**.
3. **Accident** shall mean a sudden, external and identifiable **Event** that happens by chance and could not have been expected. The word **Accidental** shall be construed accordingly. If **you** suffer **Bodily Injury** as a result of unavoidable exposure to severe weather conditions, **we** will consider it as having been caused by an **Accident**.
4. **Aggregate Limit** shall mean the maximum amount shown in the *Schedule of Benefits* that **we** will pay for any one **Insured Event** or all **Insured Events** occurring during any one **Period of Insurance**. Where more than one **Policy**, *Policy Schedule* or *Schedule of Benefits* has been issued by **us** to **you**, one **Aggregate Limit**, the greatest, shall apply over all.
5. **Benefit(s)** shall mean the payment of any amounts by the Insurers in respect of the cover and amount of cover specified in the *Schedule of Benefits*.
6. **Bodily Injury** shall mean Injury which is caused solely by Accidental means and which independently of Illness or any other cause resulted in the Insured Person's death, disablement, coma or the incurring of Emergency Medical Expenses or Rehabilitation Expenses within 24-calendar months from the date of the Accident.
7. **Cancellation Expenses** shall mean loss of deposits, or charges for advance payments for Travel or Accommodation Expenses or other charges which have not been or will not be used, but which will be forfeited or payable under contract.
8. **Child/Children** shall mean any person who is unmarried and unde18-years of age or unde25 years of age if in full-time education and primarily dependent on the Insured Person for maintenance and support.
9. **Close Business Colleague** shall mean someone who you work with in **your Country of Domicile** and has to take over your work at your offices in order for **You** to go on or continue a **Journey**
10. **Country of Domicile** shall mean the country in which **You** are domiciled during the **Period of Insurance** as reflected in the *Policy Schedule*.
11. **Curtailment or Alteration of Itinerary Expenses** shall mean:
  - (a) Loss of deposits, or charges for advance payments for travel or accommodation or other charges which have not been or will not be used, but which be forfeited or payable under contract;
  - (b) Additional Travel and Accommodation Expenses; and
  - (c) **Reasonable Essential Expenses**
12. **Date of Loss** shall mean:
  - (a) For **Illness**, the first date of diagnosis or the date **You** first became aware of the **Illness** whichever occurs earlier;
  - (b) For **Bodily Injury**, the date of the **Accident**; or
  - (c) For **All Other Sections** of cover, the date of the **Insured Event**.
13. **Due To** shall mean directly or indirectly caused by, arising or resulting from or in connection with.
14. **Emergency Medical Expenses** shall mean reasonable costs necessarily incurred as a result of **Illness** or **Bodily Injury** for **Hospital**, nursing home, ambulance, surgical or other diagnostic or remedial treatment given or prescribed by a **Qualified Medical Practitioner**.
15. **Emergency Medical Evacuation** shall mean the transfer to the closest appropriate location to obtain necessary **Emergency Medical Treatment** if the facilities in the host country, in the opinion of **Chubb Medical and Personal Assistance**, are not adequate.
16. **Emergency Medical Evacuation Expenses** shall mean all reasonable costs necessarily incurred in an Emergency Medical Evacuation.
17. **Emergency Medical Repatriation** shall mean repatriation to the most suitable **Hospital** or to **your** home address in **Your Country of Domicile**, provided that such repatriation is medically necessary; and organised by Jubilee **Medical and Personal Assistance**.

18. **Emergency Medical Repatriation Expenses** shall mean all reasonable costs necessarily incurred in an Emergency Medical Repatriation.
19. **Emergency Medical Treatment** shall mean medical advice, treatment, consultations and prescribed or repeat maintenance medication, necessarily incurred by **you** on the advice of a **Qualified Medical Practitioner**.
20. **Event** shall mean all instances of **Bodily Injury** or any other **Accident, Insured Event**, loss or damage arising out of and directly occasioned by one sudden, unexpected, unusual and specific **Event** occurring at an identifiable time and place. The duration and extent of an **Event** shall be limited to 72-consecutive hours and within a 20-kilometer radius of the place where the **Event** occurred. No **Event** occurring outside such period and/or radius shall be included in that **Event**.
21. **Excess** shall mean the first amount, or period of a claim, expressed as a monetary amount, percentage of the loss or period of time, which **you** must bear.
22. **Hijack** shall mean the unlawful seizure or taking control of a **Public Conveyance** in which **You** are travelling as a fare-paying passenger.
23. **Hospital** shall mean an establishment, which is registered or licensed as a medical or surgical **Hospital** in the country in which it is located and where **You** are under the constant supervision of a **Qualified Medical Practitioner**.
24. **Illness** shall mean any fortuitous sickness or disease contracted, commencing or first manifesting itself during a **Journey**.
25. **Immediate Family Member** shall mean **your Partner** or fiancé(e), **Child**, brother, sister, parent, grandparent, grandchild, step-brother, stepsister, step-parent, parent-in-law, son-in-law, daughter-in-law, sister-in-law, brother-in-law, aunt, uncle, nephew, niece, of **you** or **your Partner**, or anyone noted as next of kin on any legal document, resident in the **Country of Domicile**, and is not a **Person Insured**.
26. **In-Patient** shall mean a **Person Insured** who has gone through the full admission procedure, a clinical case record has been opened and admission to a **Hospital** is necessary for medical care and treatment Due to **Bodily Injury** or **Illness** and not merely for any form of nursing, convalescence, rehabilitation, rest or extended care.
27. **Insured Event** shall mean an event stated in the *Schedule of Benefits*.
28. **International Journey** shall mean a **Journey** commencing when a **Person Insured** passes through passport control from within the **Country of Domicile**, to the *Destination(s)*, including the return **Journey** until they pass back through passport control.
29. **Journey** shall mean any **International Journey** detailed in the *Policy Schedule*, undertaken by an **You** which during the **Period of Insurance**, for which relevant **Premium** has been paid to **Us** and undertaken within 90-days of the *Inception Date and Time*.
30. **Kidnap** shall mean the illegal abduction and holding hostage of a **Person Insured** for the purpose of demanding payment of money or the performance of some or other action as a condition of release.
31. **Legal Representatives** shall mean the attorney, firm of attorneys, lawyer, and advocate or other appropriately qualified person firm or company appointed to act on behalf of **You**.
32. **Life-threatening Situation** shall mean any situation, other than **Hijack** or **Kidnap**, occurring outside the **Country of Domicile** where **Chubb Security Assistance** agrees that a **Person Insured's** life is in danger.
33. **Local Authorities** shall mean any appropriate, legally empowered, regulatory, governmental or local authority in the country or region in which a **Person Insured** is travelling.
34. **Loss of Hearing** shall mean total and irreversible loss of hearing of all sound confirmed by medical evidence relying on audio-metric and sound-threshold tests.
35. **Loss of Limb** shall mean:
  - (a) in respect of an arm
    - (i) permanent physical severance of the four fingers at or above the metacarpal phalangeal joints (where the fingers join the palm of the hand); or
    - (ii) the permanent total loss of use of an entire hand or arm; and
  - (b) in respect of a leg:
    - (i) physical severance or total loss of use above the level of the ankle (talo-tibial joint); or
    - (ii) the permanent total loss of use of an entire foot or leg.
36. **Loss of Sight** shall mean total and irreversible loss of sight confirmed by medical evidence of a qualified ophthalmic specialist and **we** are satisfied that the condition is permanent and without expectation of recovery.
37. **Loss of Speech** shall mean total and permanent loss of the ability to make a comprehensible word or an understandable verbal language.
38. **Manual Labour** shall mean physical labour involving the use of hands and where the work may be considered hard or arduous and shall include skilled labourers who use or operate mechanical or non-mechanical machinery and or equipment.
39. **Money** shall mean coins, bank notes, postal or money orders, signed traveller's cheques and other cheques, letters of credit, travel tickets, petrol coupons or other prepaid coupons which belong to or are in the custody and control of a **Person Insured** and are intended for travel, meals, accommodation and personal expenditure only.
40. **Other Insurance(s)** shall mean any **Insured Event** or claims covered, paid or payable for the whole or any part under any other policy, including any statutory insurance, other insurance, other travel insurance, automatic credit card travel insurance or medical aid cover.

41. **Partner** shall mean a person recognised in South African Law as **Your** spouse, or someone of either sex with whom **You** co-habit with as though they are **Your** spouse.
42. **Permanent Disabling Injury** shall mean disability which has lasted for at least 12-months and which in **Our** opinion is beyond hope of recovery and will in all probability continue for the remainder of a **Person Insured's** life.
43. **Period of Insurance** shall mean the period between:
  - (a) the inception date and time shown in **Your Policy Schedule**; and
  - (b) the **Return Date** shown in **Your Policy Schedule**.
44. **Person(s) Insured**, shall mean **You**, and **Your Partner** and **Children** if they are shown as insured on the *Policy Schedule*.
45. **Personal Belongings** shall mean personal articles other than business equipment, **Valuables** and **Money**, which are **your** property and for which **you** are responsible and which are taken on or acquired during a **Journey**.
46. **Policy** shall mean this document, the *Policy Schedule*, the *Schedule of Benefits* and any subsequent endorsements to the aforesaid documents together with the completed application form supplied when applying for this insurance.
47. **Political or Natural Disaster Accommodation Expenses** shall mean the reasonable costs of alternative accommodation which are of a standard up to, but not exceeding, that in which **you** were or would have been travelling or staying during the course of the **Journey**, necessarily incurred where it is not possible to evacuate **you** to **Your Country of Domicile** or nearest place of safety.
48. **Political or Natural Disaster Evacuation Expenses** shall mean the costs of additional accommodation, transportation and other expenses reasonably and necessarily incurred in evacuating an **Insured Person to Your Country of Domicile** or the nearest place of safety and returning when the situation has stabilised and when the **Local Authorities** advise it is safe to do so.
49. **Political or Natural Disaster Event** shall mean:
  - (a) the British Foreign and Commonwealth Office, **Chubb Security Assistance** or the South Africa Department of Foreign Affairs issue a travel advice for a particular country or region in which **You** are travelling, recommending that certain categories of person, which includes **You**, should leave that country or region; or
  - (b) Local Authorities:
    - (i) declare a state of emergency necessitating immediate evacuation;
    - (ii) formally recommend or instruct that **You** or certain categories of person, including **You**, should leave that country or region for safety reasons;
    - (iii) seize, confiscate or expropriate the Insured Person's property and/or the Insured Person's property;
    - (iv) expel **You** or declare **You** persona non-grata.
50. **Pre-Existing Medical Conditions** shall mean any condition giving rise to a claim for which, within the 6-consecutive months prior to the *Inception Date and Time*, a **Person Insured** has consulted a **Qualified Medical Practitioner** and/or has received Medical Treatment or advice for that condition or the manifestation of symptoms would have caused a reasonable person to seek medical advice. This shall include any condition that a **Person Insured** is on a waiting list for treatment or has been recommended to commence or continue with treatment. This shall exclude the conditions noted under *Annexure 2 – Allowable Pre-Existing Conditions*.
51. **Premium** shall mean the amount shown on the *Policy Schedule* to be paid by **You** in respect of the specified **Journey** or any amount which subsequently becomes due as a result of endorsement of the **Policy**.
52. **Professional** shall mean any person who earns in excess of 50% of their income from performing as a professional sportsperson or entertainer or who participates in sport or entertainment that remunerates them as a means of livelihood.
53. **Public Conveyance** shall mean any scheduled or chartered aircraft, sea vessel or on-land conveyance legally licensed to carry passengers for hire operating commercially in accordance with all locally applicable laws and regulations and in which **You** are travelling as a fare-paying passenger, including taxis and hired motor vehicles but excluding non-standard motor vehicles and non-pressurised single engine piston aircraft.
54. **Qualified Medical Practitioner** shall mean a person registered with a current legal licence to practice medicine under the laws of the country in which they practice other than:
  - (a) a **Person Insured**; or
  - (b) a member of **your** immediate family.
55. **Reasonable and Customary Charges** shall mean the charges which:
  - (a) are medically required for the treatment or the supply or medical services to treat a **Person Insured's** condition;
  - (b) do not exceed the usual level of charges for similar treatment, supplies or medical services in the locality where the expenses are incurred, and
  - (c) do not exceed the charges for treatment that would have been made if no insurance existed.
56. **Reasonable Essential Expenses** shall mean the reasonable cost of telephone calls, meals and non-alcoholic beverages, of necessity incurred by the Insured Person.
57. **Return Date** shall mean the **Return Date** in **Your Policy Schedule**.
58. **Security Specialists** shall mean the **Chubb Security Assistance Service Provider**.
59. **Security Specialists Expenses** shall mean the reasonable and necessary costs of, and costs and expenses incurred by, **Security Specialists**.

60. **Service Provider(s)**
- (a) Europ Assistance, the **Chubb Medical and Personal Assistance** provider appointed by **Us** to render assistance in terms of *Section 3.1.1 - Medical Assistance* and *Section 3.1.2 - Personal Assistance*; and
  - (b) red24, the **Chubb Security Assistance** providers appointed by **us** to render assistance in terms of *Section 3.2 - Chubb Security Assistance*
61. **Specific Conditions and Specific Exclusions** shall mean those conditions and exclusions more specifically stated in the Sections to which they specifically apply.
62. **Supplementary Expenses** shall mean reasonable additional costs necessarily incurred:
- (a) For **Travel and Accommodation Expenses** and **Reasonable Essential Expenses** of up to 1-relative or close friend of a **Person Insured** who on written medical advice from a **Qualified Medical Practitioner** is advised to travel to / or remain with a **Person Insured** until resumption of their **Journey**, completion of their **Journey**, return to their **Country of Domicile** or their death, whichever occurs first;
  - (b) For burial expenses incurred for a **Person Insured's** burial or cremation on a **Journey**; or
  - (c) In transporting a **Person Insured's** body or ashes for burial to **Your Country of Domicile**.
  - (d) In transporting a **Person Insured's Children** back to **Your Country of Domicile** with a qualified escort if necessary, provided that the **Children** are insured under this **Policy**
63. **Travel and Accommodation Expenses** shall mean reasonable and necessary travel expenses and accommodation expenses, which are of a standard up to, but not exceeding that in which **you** were or would have been travelling or staying during the course of the **Journey**.
64. **Travelling Companion** shall mean someone **You** have arranged to go on a **Journey** with, including a **Person Insured**, and who it would be unreasonable to expect **You** to travel or continue **your Journey** without.
65. **Traumatic Event** means a violent criminal act or attempt where such violence is intended or made to overpower or subdue.
66. **Unattended** means where **you** are not in full view of or in a position to prevent unauthorised taking or interference with **Your Personal Belongings** or vehicle.
67. **Valuables** shall mean cameras and other photographic equipment, telescopes and binoculars, audio/video equipment (including radios, cassette/compact disc players, ipods, mp3 and mp4 players, camcorders, DVD, video, televisions, and other similar audio and video equipment), mobile phones, satellite navigation equipment, computers and computer equipment (including PDAs, personal organisers, laptops, notebooks, ipads, netbooks and the like), computer games equipment (including consoles, games and peripherals), wallets, jewellery, watches, furs, precious and semi-precious stones and articles made of or containing gold, silver or other precious metals for which **You** are responsible and which are taken on or acquired during the **Journey**.
68. **War** shall mean armed conflict between nations, invasion, act of foreign enemy, civil war, military or usurped power.
69. **Wrongful Detention** shall mean the arbitrary or capricious act of involuntary confinement of a **Person Insured** by persons acting as agents or with the approval of any government or government entity, or acting or purporting to act on behalf of any insurgent party, organisation or group. A connective series of **Wrongful Detentions** will be considered as one **Wrongful Detention**.
70. **We/Us/Our** shall mean the Chubb Insurance Limited.
71. **You/Your/Yourself** means the principal person insured shown in the *Policy Schedule* and in respect of whom the **Premium** has been paid.

## General conditions

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The following **General Conditions** are applicable to the **Policy** as a whole:

1. This document, the *Policy Schedule*, the *Schedule of Benefits*, and any endorsements thereto, together with the contents of the completed application form supplied when applying for this insurance, shall be read together as one contract and any word or expression to which specific meaning has been attached shall, unless the context otherwise requires, bear such meaning wherever it may appear.
2. This Policy covers Persons Insured
  - (a) from 6-months of age up to and including 69-years of age at the date of an Insured Event, unless We have agreed in writing to extend cover - under the Travel Superior, Travel Plus, Travel Visa and Travel Top up Plans);
  - (b) from 70 years of age up to and including 79-years of age at the date of an Insured Event, unless We have agreed in writing to extend cover - under the Travel Seniors Plan.
3. The period of any one **Journey** is specified in **Your Policy Schedule** and is limited to a maximum of 180-consecutive days, unless the **Person Insured** has purchased an Annual Multi-trip **Policy**.
4. For an Annual Multi-trip **Policy**, the **Person(s) Insured**, as listed on the *Policy Schedule*, may travel on multiple **Journeys** provided the period of insurance for each **Journey** is no longer than 90 days and they have the same trip itinerary.
5. No sum payable by **Us** under this **Policy** shall carry interest.

6. We may cancel this **Policy** by giving 30-days' written notice to **You** at **Your** last known address and in such event the **Premium** for the period up to the date when the cancellation takes effect shall be calculated and **We** shall promptly return any unearned portion of the **Premium** paid provided no claim has been made against this **Policy**.
7. **You** may cancel this **Policy** by giving **Us** written notice within 14 days of receipt but before the trip departure date. Provided no claim has been made.
8. The Credit Card Top Up plan may only be purchased if **You** qualify for the automatic travel insurance on **Your** South African issued Credit Card. The **Emergency Medical Expenses** cover offered on the automatic cover that **You** qualify for, will serve as the excess deductible on **Your** Credit Card Top Up plan.
9. In respect of *Section 1 – Emergency Medical and Related Expenses*, **We** will only be liable to pay any claim submitted in terms of this **Policy** after the full benefit limit of cover has been exhausted on the automatic cover that **You** qualify for on **Your** South African issued credit card.
10. With the exception of *Section 1 - Emergency Medical and Related Expenses*, **We** will only be liable to pay **Our** pro-rata portion of any claim submitted in terms of this **Policy** if **You** or any **Person Insured** has **Other Insurance**, subject to the following:
  - (a) if in **Our** discretion **We** decide to pay the claim in full, then **We** will not be obliged to make payment unless **You** cede to **Us** all of **Your** rights in respect of the **Other Insurance**;
  - (b) if **We** have already paid **Benefits** in terms of this **Policy**, all of **Your** rights in respect of the **Other Insurance** will be ceded automatically to **Us**;
  - (c) a cession in terms of **General Conditions 9.a or 9.b** will allow **Us** to do all things necessary to claim against any other insurer, company or organization and institute legal proceedings against them if the **Other Insurance** is not paid; without limiting any provision of this **Policy** or any legal obligation, **You** must co-operate fully with **Us** in relation to the (d) **Other Insurance** or legal proceedings including:
    - (i) not doing anything to prejudice or limit **our** rights;
    - (ii) Providing **Us** with all relevant information and documents **we** require;
    - (iii) signing any document or affidavit that **we** may request to enable **us** to exercise **our** rights.
11. Notwithstanding **General Condition 7**, the **Benefits** under this **Policy** may not be ceded and/or assigned by **You**. **We** shall not be bound to accept or be affected by any notice or any trust, charge, lien, purported cession and/or assignment or other dealing with or relating to this **Policy**.
12. This **Policy** is between **You** and **Us** only and all of its provisions and conditions are for the sole and exclusive benefit of the said parties. Nothing in this **Policy**, express or implied, is intended to confer upon any other person any rights, benefits or remedies of any nature whatsoever under this **Policy** or any of its provisions. Without limitation, no third party shall have any rights under this **Policy** or any right to receive **Policy Benefits**.
13. **We** have the right to commence or take over legal proceedings in **Your** name for the defence or settlement of any claim, or to sue or prosecute any other party to recover monies payable by them at law. **You** must co-operate with **Us** and may not do anything to hinder or prejudice **Our** rights.
14. This **Policy** will be voidable in the event of misrepresentation, misdescription or non-disclosure of any material particular by or on behalf of **You**, subject to the provisions of the Short-term Insurance Act 53 of 1998.
15. **You** agree that:
  - (a) this **Policy** shall be governed and construed in accordance with the Law of the Republic of South Africa and the South African courts alone shall have jurisdiction in any dispute; and
  - (b) communication of and in connection with this **Policy** shall be in the English language.
16. **We** do not accept any liability for any other products including financial products and/or services sold, insurance or assurances provided or underwritten in conjunction with this **Policy** by any other person, company, organisation including **Service Providers**, medical aid societies, financial services companies, insurance companies, assistance companies or the like that are not specifically appointed by **Us** and acting on **Our** behalf.
17. **Specific Conditions** relevant to the individual Sections of this **Policy** are located and contained in the appropriate Section.
18. All sums insured will be deemed VAT inclusive.
19. This insurance does not apply to the extent that trade or economic sanctions or other laws or regulations prohibit us from providing insurance, including, but not limited to, the payment of claims. All other terms and conditions of the policy remain unchanged.

Whenever coverage, benefit or claim payment provided by this policy would be in violation of the United Nations Resolutions or the trade and economic sanctions, laws or regulations of the [European Union, United Kingdom,] [national law] or United States of America, such coverage, benefit or claim payment shall be null and void.

### *Eligibility Condition*

To be covered under this Policy You and all other persons insured under this Policy must have your main residence in South Africa and be in South Africa when this Policy is taken out.

### *Claims Conditions*

The following Claims Conditions are applicable to the Policy as a whole:

1. If **You** sustain **Bodily Injury** or **Illness** on a **Journey** and need:

- (a) **In-Patient** treatment, specialist treatment, medical tests, scans, **Emergency Medical Evacuation** or **Emergency Medical Repatriation**, **You** must contact **Chubb Medical and Personal Assistance** immediately on +27 [0] 11 991 8286. If **You** cannot do this **Yourself**, **You** must arrange for a personal representative to do this for **You**. If this is not possible because **your** condition is serious, **You** or **Your** personal representative must contact **Chubb Medical and Personal Assistance** as soon as possible. If **Chubb Medical and Personal Assistance** are not contacted, **We** may reject **Your Claim** or reduce its payment.
- (b) **Emergency Medical and Related Expenses** other than the claims specified in *Claims Condition 1.a* above, **you** must follow the procedure detailed under *Claims Condition 2* below. **You** can make use of the services provided by **Chubb Medical and Personal Assistance**, as appropriate (refer *Section 3.1 - Chubb Medical and Personal Assistance*).
2. In respect of all other **Claims**, **You** must notify **us** immediately by telephone on +27 [0] 11 991 8286 and thereafter send **us** a Claim Form within 30-days of the **Date of Loss**.
  3. **You** shall, at **Your** expense, provide **Us** with all documents, certificates, signed medical certificates, receipts, information and evidence as **We** may from time to time reasonably require in the form prescribed by **Us**. **We** shall be allowed at **Our** expense, upon reasonable notice, to request a medical examination as appropriate.
  4. We shall have the right to access **Your** current or prior medical records in order to finalise and/or proceed with the assessment of a claim and/or render medical assistance. As provided for by this clause, **You** shall be deemed to have given **Us** written consent to access any of **Your** current or prior medical records.
  5. We have the right to utilise **Your Public Conveyance** ticket to offset **Our** expenses in the purchase of a replacement **Public Conveyance** ticket.
  6. Any **Excess**, where applicable, will apply separately under each Section, in respect of each claim and for each **Person Insured**.
  7. Claims involving foreign currency will be converted into the currency in which the **Premium** and **Benefits**/indemnity limits are shown, at the selling rate of exchange published by **Our** bankers on the day nearest to the date of payment.
  8. If any claim under this **Policy** shall be in any respect fraudulent or if any fraudulent means or devices were used by **You**, a **Person Insured** or anyone acting on **Your** behalf to obtain **Benefit** under this **Policy**, **We** shall be under no liability in respect of such claim.
  9. Where **You** dispute **Our** rejection of **Your Claim** or cancellation of **Your Policy**, **You** must make representation to **Us** in respect of the decision within 90-Days of the date of **Our** rejection or cancellation letter. Thereafter, **You** must take legal action by way of the service or summons against **Us** within 180-Days of the date of **Our** rejection or cancellation letter, failing which **You** will forfeit **Your** claim and no liability can arise in terms of such claim.
  10. **You** must comply with the *General Conditions* and the *Specific Conditions* detailed in the relevant Sections of this **Policy**.
  11. **You** must send **Us** any original written, summons, legal process or other correspondence received in connection with a Claim immediately as it is received and without answering it.
  12. **You** and each **Person Insured** must take ordinary and reasonable care to safeguard against loss, damage, **Accident**, **Bodily Injury** or **Illness** as though **You** were not insured. If **We** believe **You** or any **Person Insured** has not taken reasonable care of property, the **Claim** may not be paid. The items insured under this **Policy** must be maintained in good condition.
  13. **You** must not do the following without **Our** written agreement:
    - (a) Admit liability, or offer or promise to make any payment; or
    - (b) Dispose of items sell or otherwise dispose of any item or property for which a **Claim** is being made, or abandon any item or property.
  14. **You** and each **Person Insured** must recognise **Our** right to:
    - (a) choose either to pay the amount of a Claim (less any **Excess** and up to any **Policy** limit) or repair, replace or reinstate any item or property that is damaged, lost or stolen;
    - (b) inspect and take possession of any item or property for which a **Claim** is being made and handle any salvage in a reasonable manner;
    - (c) take over and deal with the defence or settlement of any **Claim** in **Your** name and keep any amount recovered;
    - (d) settle all Claims in Rands;
    - (e) be reimbursed within 30-days for any costs or expenses that are not insured under this **Policy**, which **We** pay to **You** or on **Your** behalf;
    - (f) receive appropriate original medical certificates where required before paying a **Claim**, supplied by **You** at **Your** expense; and
    - (g) request and carry out a medical examination and insist on a post-mortem examination, if the law allows **Us** to ask for one, at **Our** expense.
  15. Where **You**, or **Your** personal representatives do not comply with any obligation to act in a certain way specified in this **Policy**, **We** reserve the right not to pay a claim.
  16. **Benefits** are payable as follows and will be a valid discharge of **Our** liability under this **Policy**:
    - (a) *Section 1 - Emergency Medical and Related Expenses* on a **Journey**, the Benefits could be paid either directly to **You** or as directed by **You** and agreed by **Us**.
    - (b) *Section 2.1 – Death*:

- (i) where **Bodily Injury** results in **Your** Death, the **Benefit** will be paid to **Your** estate and the receipt given to **Us** by **Your** personal representatives shall be a full discharge of all liability by **Us** in respect of the **Claim**;
  - (ii) where **Bodily Injury** results in Death of a **Person Insured** over 18-years other than you, **We** will pay any **Claim** for Death to their estate and the receipt given to **Us** by their personal representatives shall be a full discharge of all liability by **Us** in respect of the **Claim**; or
  - (iii) If a **Person Insured** other than you is under 18-years, **We** will pay any **Claim** for Death to **You** and the receipt given to **Us** by **You** shall be a full discharge of all liability by **Us** in respect of the **Claim**.
- (c) All other **Sections**
- (i) **We** will pay the **Claim** to **You** and **Your** receipt shall be a full discharge of all liability by **Us** in respect of the **Claim**.

## General exclusions

The following *General Exclusions* are applicable to the **Policy** as a whole. **We** shall not be liable for payment of any loss, claim, indemnity or **Benefit** amount **due to**:

1. A **Person Insured** travelling specifically to obtain medical, dental or cosmetic treatment;
2. A **Person Insured** travelling to an area Chubb Security Assistance describe as an Extreme Risk Areas. If **You** are unsure please check their website ([www.red24.com/Chubbsa](http://www.red24.com/Chubbsa)) or +27 [0] 21 700 3820.
3. A **Person Insured's** intention to immigrate.
4. A **Person Insured** not meeting the eligibility criteria detailed under *Persons Covered* in the *Preamble* of this **Policy**.
5. Any **Insured Event** which takes place on a **Journey** described under *Journey's Not Covered* in the *Preamble* of this **Policy**.
6. Any **Insured Event** occurring during a local journey.
7. A **Person Insured** committing or attempting to commit any illegal act.
8. A **Person Insured** committing or attempting to commit suicide, intentionally inflicting self-injury, regardless of the state of their mental health, or needlessly exposing themselves to danger, except in an attempt to save human life.
9. Pregnancy of or childbirth (except for unexpected medical complications or emergency occurring during the first 26-weeks of the pregnancy).
10. A **Person Insured** travelling to any country which is, or whose armed forces are, engaged in **War** where that part of a **Journey** commences after the outbreak of such **War**.
11. A medical condition for which a **Person Insured** chose not to take medication or other recommended treatment as prescribed or directed by a **Qualified Medical Practitioner**.
12. A tropical disease where the **Person Insured** has not had the vaccinations or taken the medication recommended or required by the authorities in the country being visited, unless they have written confirmation from a **Qualified Medical Practitioner** that they should not be vaccinated or take the medication, on medical grounds.
13. A **Journey** undertaken against the advice of a **Qualified Medical Practitioner** or where the purpose of the **Journey** is to receive medical treatment or advice.
14. A **Person Insured** suffering from any anxiety state, stress, depression, or any phobia or mental or nervous disorder, that was diagnosed before the **Period of Insurance** commenced or the **Journey** was booked (whichever is later).
15. Strike, labour dispute, mechanical breakdown or failure of the means of transport (other than disruption of road and rail services by avalanche, snow or flood) which existed or the possibility of which existed and for which advance warning had been given before the date on which the **Journey** was booked.
16. A **Person Insured** engaging in aviation or air travel, other than as a fare paying passenger, unless it is specifically covered as an activity under *Covered Leisure Activities, Sports and Winter Sports* in the *Preamble* of this **Policy** or **We** have specifically agreed in writing to extend cover in this regard.
17. Under the influence of alcohol or solvents or ingesting drugs except for drugs which are properly prescribed.
18. A **Person Insured** driving a vehicle of any kind whilst the alcohol level in their blood or breath exceeds the legal limit of the country in which they are driving.
19. A **Person Insured** being a full time member of the armed forces of any nation or international authority or a member of any reserve forces called out for permanent service.
20. Any **Pre-existing Medical Condition**, unless **You** are under the age of 70 and **You** have purchased the *Travel Superior Plan*.
21. A **Person Insured** taking part in any of the following while on a **Journey**:
  - (a) leisure activities, sports or winter sports not specifically covered under *Covered Leisure Activities, Sports and Winter Sports* in the *Preamble* of this **Policy**; unless **We** have specifically agreed in writing to extend cover in this regard.
  - (b) performing as a **Professional** in any leisure activities, sports or winter sports;
  - (c) competitive winter sports; or

- (d) **Manual Labour** of any description, unless **We** have agreed in writing to extend this cover; or
  - (e) engaging in occupational activities underground or requiring the use of explosives.
22. Any epidemic and pandemic events.
  23. **We** will not be liable to make any payment under this **Policy** where the **Insured Person** does not meet the **Eligibility Condition** detailed on Page 9.
  24. This insurance does not apply to the extent that resolutions of the United Nations or the trade and economic sanctions, laws or regulations of the European Union, the member states of the European Union or United States of America prohibit **Us** from providing insurance, including but not limited to the payment of claims or the provision of any other **Benefit**. In particular, **We** will not pay any claims or provide any other **Benefits** arising out of or relating to any Insured Person whose main residence is in Cuba and/or arising out of or relating to any travel to, from or in Cuba or any travel which starts, ends or has a scheduled stop in Cuba.

## Benefits

### Section 1 - Emergency medical and related expenses

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- 1.1. **Emergency medical expenses**  
If a **Person Insured** sustains a **Bodily Injury** or suffers an **Illness** during a **Journey**, **we** will indemnify **you** in respect of **Emergency Medical Expenses** up to the limits stated in the *Schedule of Benefits*.
- 1.2. **Emergency medical repatriation expenses**  
If a **Person Insured** requires an **Emergency Medical Repatriation Due to Bodily Injury** or **Illness** sustained during a **Journey**, **We** will indemnify **You** in respect of **Emergency Medical Repatriation Expenses** up to the limits stated in the *Schedule of Benefits*.
- 1.3. **Emergency medical evacuation expenses**  
If a **Person Insured** requires an **Emergency Medical Evacuation Due to Bodily Injury** or **Illness** sustained during a **Journey**, **We** will indemnify **You** in respect of **Emergency Medical Evacuation Expenses** up to the limits stated in the *Schedule of Benefits*.
- 1.4. **Supplementary Travel**  
If a **Person Insured** sustains **Bodily Injury** or suffers an **Illness** during a **Journey**, **We** will indemnify **You** in respect of **Supplementary Expenses** up to the amount shown in the *Schedule of Benefits*.
- 1.5. **Pre-existing medical condition extension (Under 55)**  
If **You** are under the age of 55-years, *Exclusion 2 of Section 1 - Emergency Medical and Related Expenses: Specific Exclusions* relating to **Pre-Existing Medical Conditions** does not apply up to the maximum amount stated in *Schedule of Benefits* under 1.5 - *Pre-Existing Medical Condition Extension*.
- 1.5. **Pre-existing medical condition extension (55-70)**  
If **You** are between the ages of 55-years and 70-years, *Exclusion 2 of Section 1 - Emergency Medical and Related Expenses: Specific Exclusions* relating to **Pre-Existing Medical Conditions** does not apply up to the maximum amount stated in *Schedule of Benefits* under 1.6 - *Pre-Existing Medical Condition Extension*.

#### *Section 1 - Emergency medical and/or related expenses: Specific conditions*

1. If **You** sustain **Bodily Injury** or **Illness** on a **Journey**, **you** must follow the procedure detailed under *Claims Conditions* in this **Policy**. If **You** do not, **We** may reject your claim or reduce the amount that **We** pay **You**.
2. **You** must not make or attempt to make arrangements without the involvement and agreement of **Chubb Medical and Personal Assistance**.
3. If **You** require **us** to pay for any **Insured Event** in excess of R 10,000, **You** must contact **Chubb Medical and Personal Assistance** for authorisation, failing which **Our** liability will be limited to R 10,000.
4. **You** shall obtain and follow the advice of a **Qualified Medical Practitioner** and **We** shall not be liable for any consequences of **Your** failure to obtain and follow such advice and use such appliance or remedies as may be prescribed.
5. **Chubb Medical and Personal Assistance** may at any time, if they believe that it is necessary and safe to do so.:
  - (a) move a **Person Insured** from one **Hospital** to another; or
  - (b) return a **Person Insured** to **your** home in **your Country of Domicile**; or
  - (c) move a **Person Insured** to the most suitable **Hospital** in **Your Country of Domicile**;
6. Any **Emergency Medical Repatriation** or **Emergency Medical Evacuation** must be organised by **Chubb Medical and Personal Assistance**, where applicable who will use the most appropriate method including, if



necessary, the use of air services and arrange for qualified medical staff to accompany a **Person Insured** if medically required.

7. **Supplementary Expenses** must be authorised in advance by **Chubb Medical and Personal Assistance**.
8. All original receipts must be kept and provided to support a **Claim**.

### *Section 1 - Emergency medical and related expenses: Specific exclusions*

**We** shall not be liable for payment of any loss, claim, indemnity or **Benefit** amount under *Section 1 - Emergency Medical and Related Expenses* for:

1. Treatment or any medication, which commenced prior to the commencement date of the **Journey**, which a **Person Insured** has been advised to continue whilst on a **Journey**.
2. Any **Emergency Medical** and **Related Expenses** incurred for any **Pre-existing Medical Condition** that a **Person Insured** suffers from.
3. Surgery, medical or preventative treatment which can be delayed in the opinion of the **Qualified Medical Practitioner** treating **Person Insured** until their return to **Your Country of Domicile**.
4. For any expenses incurred more than 12 months after the date of an **Insured Event occurring, where You** sustain **Bodily Injury** or are diagnosed with **Illness**.
5. Cosmetic surgery or treatment or services provided by any convalescent or nursing home, rehabilitation centre or health spa;
6. Routine dental treatment incurred other than for emergency dental or optical treatment required to relieve pain or restore dental function provided by a registered and **Qualified Medical Practitioner**.
7. Any routine treatments.
8. Investigatory treatment, cosmetic surgery or any other treatment not immediately necessary as specified by a **Qualified Medical Practitioner**;
9. Costs incurred following a **Person Insured's** decision not to move **Hospital** or return to **Your Country of Domicile** after the date when, in the opinion of **Chubb Medical and Personal Assistance**, they should do so.
10. Expenses recoverable from any **Other Insurance**.
11. Any incurred claims costs or fees that fall within **Your** automatic credit card benefit limit.
12. Expenses incurred which have not been authorised in advance by **Chubb Medical and Personal Assistance**.
13. The amount of the **Excess** shown in the *Schedule of Benefits*.
14. Search and rescue operations.
15. Preventative treatment, including but not limited to any vaccination and/or immunisation.
16. Contraceptive devices, prosthetic devices and/or artificial aids and dentures.

## Section 2 – Personal injury

**We** will pay the **Benefit** stated in the *Schedule of Benefits* if an **Accident** occurs during a **Journey** and causes **Bodily Injury** to a **Person Insured** resulting in any of the following:

### **2.1. Death**

Where **Bodily Injury** results in Death, **We** will pay the amount shown in the *Schedule of Benefits*. If a **Person Insured** disappears and after a suitable period of time the evidence is that the most probable conclusion is that they have died as a result of **Bodily Injury**, the Death **Benefit** shall become payable subject to a signed undertaking that if the belief is subsequently found to be wrong, the Death **Benefit** shall be refunded to **Us**.

### **2.2. Public conveyance - Additional death benefit**

In addition to the **Benefit** payable under *Section 2.1 – Death*, **We** will pay **You** the amount shown in the *Schedule of Benefits* for **Bodily Injury** caused on a **Journey** while a **Person Insured** is travelling in, boarding or alighting any scheduled or chartered aircraft **Public Conveyance** resulting in Death.

### **2.3. Permanent Disabling Injury**

Where **Bodily Injury** results in a **Permanent Disabling Injury**, **We** will pay up to the amount shown in the *Schedule of Benefits*. The percentage payable will be as shown in the following *Scale of Permanent Disabling Injuries*.

#### Scale of Permanent Disabling Injuries

a.	<b>Loss of limb</b> (one or more limbs)	100%
b.	<b>Loss of sight</b> (in one or both eyes)	100%
c.	<b>Loss of speech</b>	100%
d.	<b>Loss of hearing</b> (in both ears)	100%

### *Section 2 - Personal injury: Specific conditions*

1. In the event of compensation being due under more than one of the **Benefits** referred to in the Scale of Permanent Disabling Injuries above as a consequence of any one **Accident**, the maximum amount payable hereunder shall not exceed 100% of the total reflected in the Schedule of Benefits.
2. Where more than one **Policy** or Schedule of Benefits has been issued by **Us**, the greatest limit shall apply over all.
3. If a Person Insured sustains a Permanent Disabling Injury and the claim in relation to that disability is admitted and accepted, the Permanent Disabling Injury Benefit will be paid and all cover under *Section 2 – Personal Injury* shall immediately cease.
4. Any **Benefit** payable in respect of **Children** may be subject to maximum **Benefit** legislation applicable at the time.
5. Any contributory degenerative condition or disability (determined by a **Qualified Medical Practitioner**) in existence at the time of sustaining **Bodily Injury** will be taken into account by **Us** in assessing the level of **Benefit** payable

### *Section 2 - Personal injury: Specific exclusions*

We shall not be liable for payment of any loss, claim, indemnity or **Benefit** amount under *Section 2 – Personal Injury Due To:*

1. **Bodily Injury** resulting from an Illness which is itself not the direct result of **Bodily Injury**.
2. **Permanent Disabling** Injury arising from a repetitive stress injury or syndrome or any gradually operating cause.
3. Payment for *Section 2.1 - Permanent Disabling Injuries* in respect of a **Child**.

## Section 3 – Chubb assistance

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### 3.1 Chubb Medical and Personal Assistance

#### 3.1.1 Medical Assistance

- (a) Telephone medical advice: 24-hours a day, 365-days a year multi-lingual telephonic medical advice.
- (b) Subject to a valid claim in respect of **Hospitalisation, Chubb Medical and Personal Assistance** will assist and arrange **Your** admission to **Hospital** as an **In-Patient**.
- (c) Telephonic access to the name, address, telephone number of **Qualified Medical Practitioner, Hospitals, clinics, dentists and dental clinics**.
- (d) **Chubb Medical and Personal Assistance** will monitor **Your** medical condition during and after **Hospitalisation**, subject to any and all obligations in respect of confidentiality and relevant authorisation.
- (e) **Chubb Medical and Personal Assistance** will arrange for telephonic medical translation.
- (f) Where medically necessary, **Chubb Medical and Personal Assistance** will arrange to deliver, at **Your** expense, essential medicine, drugs and medical supplies that are medically necessary for a **Person Insured's** care and/or treatment but which are not available at **Your** location. The delivery of such medicine, drugs and medical supplies will be subject to the laws and regulations applicable locally.
- (g) **Chubb Medical and Personal Assistance** will, upon authorisation from **Us**, assist **You** by guaranteeing on **Your** behalf **Emergency Medical Expenses** incurred during **Hospitalisation**.
- (h) Where medically necessary, **Chubb Medical and Personal Assistance** will arrange for the provision of air and/or surface transportation, medical care during transportation, communications and all usual ancillary services required to move a **Person Insured** to the nearest **Hospital (Emergency Medical Evacuation)** where appropriate medical care is available. **Chubb Medical and Personal Assistance** will arrange for the provision of appropriate communication and linguistic capabilities, mobile medical equipment and a medical escort.
- (i) Where medically necessary, **Chubb Medical and Personal Assistance** will arrange for the provision of air and/or surface transportation, medical care during transportation, communications and all usual ancillary services required to move a **Person Insured** to their home or a **Hospital in Your Country of Domicile (Emergency Medical Repatriation)** where appropriate. **Chubb Medical and Personal Assistance** will arrange for the provision of appropriate communication and linguistic capabilities, mobile medical equipment and a medical escort.
- (j) **Chubb Medical and Personal Assistance** will assist in arranging with **Supplementary Expenses**.
- (k) Upon **Your** request, **Chubb Medical and Personal Assistance** will arrange for one-way transport to return **Your** minor children to **Your** usual **Country of Domicile** if they are left **Unattended** as a result of **Your Illness, Bodily Injury, In-Patient treatment, Emergency Medical Evacuation** or **Emergency Medical Repatriation**. An escort will be provided where appropriate.
- (l) Upon **Your** request, **Chubb Medical and Personal Assistance** will arrange for **Your** hotel accommodation related to an incident requiring an **Emergency Medical Evacuation, Emergency Medical Repatriation** or **Hospitalisation**.

### 3.1.2 Personal assistance

**Chubb Medical and Personal Assistance** will/ shall:

- (a) assist a **Person Insured** who has lost their luggage on a **Journey** by referring them to the appropriate authorities involved.
- (b) assist **You** if a **Person Insured** loses their passport while travelling outside **Your Country of Domicile** by referring them to the appropriate authorities involved.
- (c) provide **You** with the name, address, telephone numbers, office hours for referred lawyers and legal practitioners. **Chubb Medical and Personal Assistance** will not give any legal advice to **You**.
- (d) provide the address, telephone number and office hours of the nearest appropriate consulate and embassy worldwide.
- (e) transmit urgent (personal) messages on behalf of a **Person Insured**.

### 3.1.3 Contact Details

To access Chubb Medical and Personal Assistance, You should call +27 [0] 11 991 8286. You will be requested to provide:

- (a) **Your** Name;
- (b) **Your** Policy Number;
- (c) Nature of assistance required;
- (d) Details of **Other Insurance** covering the same event; and
- (e) A contact number or address

Calls will be recorded. Whilst **We** take every care in selecting **Service Providers** to provide assistance services, **We** cannot accept responsibility for any advice or service given or information provided.

## 3.2 Chubb security assistance

The following Chubb Security Assistance services are available on [www.red24.com/Chubbsa](http://www.red24.com/Chubbsa) or at +27 [0] 21 700 3820:

- (a) The following services, are available to all **Person's Insured** on +27 [0] 21 700 3820: How to avoid **Kidnap or Wrongful Detention** and what steps to take in the event of **Kidnap or Wrongful Detention**, general advice (e.g. business, social customs and driving restrictions), political and security situations, health precautions (including vaccination requirements), visa and entry permit requirements and travel advisories (Extreme Risk Countries/Regions)
- (b) Travel security website: Security information for over 180-countries worldwide.
- (c) Subscribe to email reports sent each weekday, covering political stability, civil unrest, disease outbreaks, crime patterns and terrorism news from around the world.
- (d) SMS travel alerts: Free mobile phone text alerts (where available) or email alerts notifying a **Person's Insured** of high-risk events happening on or near a **Person's Insured's** current location (including terrorism, civil unrest and severe weather risks).
- (e) If a **Person Insured** experience serious difficulties or a life-threatening situation abroad (missing, attacked or the safety of a **Person's Insured's** location has deteriorated rapidly), red24's team of 400 global specialists will be available on +27 [0] 21 700 3820 to assist a **Person Insured** in person. Refer to *Section 6 - Political or Natural Disaster* or *Section 7 - Personal Security Specialists Expenses* for relevant terms, conditions and exclusions.
- (f) High Risk Travel Safety Briefings: **Chubb Security Assistance** will email a **Person Insured** a security briefing tailored to their travel itinerary should it be classified as a high or extreme risk region by red24 at the time of the request. This will cover the risks, preventative measures and important contacts required to help remain safe while travelling abroad

## Section 4 – Cancellation, curtailment and disruption

### 4.1. Cancellation

**We** will refund **you Cancellation Expenses** which **You** have paid or are contracted to pay and which cannot be recovered from any other source up to the maximum stated in the *Schedule of Benefits*, if, during the **Period of Insurance**, it becomes necessary to Cancel **Your Journey due to**

1. **You, Your Travelling Companion**, someone **You** have arranged to stay with on **Your Journey**, **Your Immediate Family Member**, **Your Travelling Companion's Immediate Family Member** or a **Close Business Colleague**:
  - (a) dying;
  - (b) suffering sudden and serious **Bodily Injury**;
  - (c) suffering sudden and serious **Illness**;
  - (d) suffering from complications in pregnancy (as diagnosed by a **Qualified Medical Practitioner**);
  - (e) suffering a **Traumatic Event** within 30-days of the commencement of the **Journey**; or

- (f) being compulsorily quarantined on the orders of a treating **Qualified Medical Practitioner**; provided that such Cancellation is confirmed as medically necessary by the treating **Qualified Medical Practitioner**
- 2. **You** or **Your Travelling Companion** being made redundant and registered as unemployed with the UIF.
- 3. Non availability of the person in charge of **Your** minor or disabled Children due to their unexpected death, **Illness** or **Bodily Injury** within 30-days of the *Inception Date and Time* stated in **Your Policy Schedule**.
- 4. Serious fire, storm, flood, theft, subsidence or malicious damage to **You** or **Your Travelling Companion's** home provided that such damage occurs within the 7-days immediately prior to the commencement of **Your Journey**.
- 5. The police requiring **You** or **Your Travelling Companion's** presence following a burglary or attempted burglary at **You** or **Your Travelling Companion's** home.
- 6. **You** compulsory subpoena.
- 7. **You** being subject to a **Hijacking**.
- 8. Cancellation or diversion of **Your Public Conveyance** service, including by reason of strike or other industrial action, riot or civil commotion unless there was media warning before the trip was booked, if this **Policy** was in force at the time of **Your** booking, or from the *Inception Date and Time* in **Your Policy Schedule** if later, that this was likely to occur.
- 9. Theft of travel documents (travel tickets, passports and visas)

#### 4.2. **Curtailment and alteration of itinerary**

We will indemnify **You** in respect of **Curtailment or Alteration of Itinerary Expenses** incurred up to the amount shown in the *Schedule of Benefits* for any one **Journey**, if during a **Journey** a **Person Insured** is forced to Curtail or Alter the itinerary of any part of a planned **Journey** or **due to**:

- 1. **You, Your Travelling Companion**, someone **You** have arranged to stay with on **Your Journey**, **Your Immediate Family Member**, **Your Travelling Companion's Immediate Family Member** or a **Close Business Colleague**
  - (a) dying;
  - (b) suffering sudden and serious **Bodily Injury**;
  - (c) suffering sudden and serious **Illness**;
  - (d) suffering from complications in pregnancy (as diagnosed by a **Qualified Medical Practitioner**);
  - (e) suffering a **Traumatic Event** within 30-days of the commencement of the **Journey**; or
  - (f) being compulsorily quarantined on the orders of a treating **Qualified Medical Practitioner**; provided that such *Cancellation* is confirmed as medically necessary by the treating **Qualified Medical Practitioner**
- 2. Serious fire, storm, flood, theft, subsidence or malicious damage to **You** or **Your Travelling Companion's** home provided that such damage occurs after **Your Journey** commences.
- 3. The police requiring **You** or **Your Travelling Companion's** presence following a burglary or attempted burglary at **You** or **Your Travelling Companion's** home.
- 4. Cancellation or diversion of **Your Public Conveyance** service, including by reason of strike or other industrial action, riot or civil commotion unless there was media warning before the trip was booked, if this **Policy** was in force at the time of **Your** booking, or from the *Inception Date and Time* in **Your Policy Schedule** if later, that this was likely to occur.
- 5. Theft of travel documents (travel tickets, passports and visas).

#### 4.3. **Travel delay**

If a **Person Insured** is delayed for at least 6-hours because the scheduled departure of the **Public Conveyance** is affected by strike, industrial action, adverse weather, mechanical breakdown or grounding of an aircraft **due to** mechanical or structural defect, we will pay **Reasonable Essential Expenses** and **Travel and Accommodation Expenses** to the maximum stated in the *Schedule of Benefits*.

#### 4.4. **Missed connection**

We will reimburse you for **Reasonable Essential Expenses and Travel and Accommodation Expenses** (including the extra cost of economy class transportation by the most direct route to rejoin a tour or continue with **Your** original itinerary) up to the amount shown in the *Schedule of Benefits*, necessarily incurred by missing an onward travel connection at the transfer point during a **Journey** due to the late arrival of **You** incoming confirmed connecting **Public Conveyance** and no onward transportation is available within 6-consecutive hours of **Your** arrival, if not provided or compensated by the **Public Conveyance** or any third party.

### Section 4 – Cancellation, curtailment and disruption: Specific conditions

- 1. Written proof of the reason for and length of any delay from the transport provider must be submitted with any claim and **Our** liability is subject to **Us** receiving original receipts for **Cancellation Expenses, Curtailment or Alteration of Itinerary Expenses, Reasonable Essential Expenses and Travel and Accommodation Expenses** incurred.

2. Should **You** need to curtail or alter the itinerary of any part of a planned **Journey** for any reason, **Chubb Medical and Personal Assistance** must be contacted beforehand to assist in making and approving any alternative travel arrangements.
3. If **You** require **Us** to pay for any claim, loss or expenses in excess of R10,000, **You** must contact **Chubb Medical and Personal Assistance** for authorisation. If cover authorisation is not granted, **Our** liability will be limited to R10,000 in respect of any one **Event**.
4. **You** must notify the local police within 24-hours of discovery stolen **Travel Documents** and if stolen from a hotel, **You** must notify hotel management and provide **Us** with a copy of the original written reports.
5. **You** must.
  - (a) Check-in before the scheduled departure time shown on **Your** travel itinerary; and
  - (b) Comply with the travel agent, tour operator and **Public Conveyance** operator's contract terms

#### *Section 4 – Cancellation, curtailment and disruption: Specific exclusions*

**We** shall not be liable for payment of any loss, claim, indemnity or **Benefit** amount under

*Section 4 - Cancellation, Curtailment and Disruption due to:*

1. Any serious, chronic or recurring **Pre-existing Medical** condition affecting any person upon whom **Your Journey** depends that was diagnosed before **your Journey** was booked (or commencement of the Period of Insurance if later) and which could result in **You** having to Curtail **Your Journey**.
2. Any expenses incurred **Due To** of adverse changes in **Your** financial circumstances.
3. Any expenses incurred **Due To** the default, financial failure, insolvency or the inability or unwillingness to fulfil any part of their obligation to **You** of any **Public Conveyance** or accommodation provider, any agent acting for them or any agent acting for **You**.
4. Withdrawal from service temporarily or otherwise of an aircraft, sea vessel or other **Public Conveyance** on the orders or recommendation of the manufacturer, the Civil Aviation Authority, Rail Authority or Port Authority or any similar body in any country.
5. Any expenses incurred as a result of disinclination of a **Person Insured** or **Your Travel Companion** to travel or, if on a **Journey**, disinclination to continue.
6. A delay in notifying the tour operator, travel agent, or transport or accommodation provider that it is necessary to cancel a booking.
7. Any charge or expense paid for with, or settled using, any kind of promotional voucher or points, timeshare, holiday property bond or holiday points scheme, or any **Claim** for management fees, maintenance costs or exchange fees associated in relation to timeshares or similar arrangements.
8. **Travel and Accommodation Expenses** where the alternative transport or accommodation is of a standard which is superior to that of the original **Journey**.
9. Redundancy where **You** or **Your Travelling Companion**:
  1. were unemployed or knew that **You** or they may become unemployed, at the time the **Journey** was booked;
  2. are voluntarily made redundant or made redundant as a result of misconduct or following resignation; or
  3. are self-employed or a contract worker.
10. Any expenses incurred as a result of regulations or order made by any Public Authority or Government.
11. Any expenses incurred as a result of strike, labour dispute, mechanical breakdown, weather, natural disaster or failure of the means of transport (other than disruption of road and rail services by avalanche snow or flood) which existed or the possibility of which existed and for which advance warning had been given before the date on which the **Journey** was booked.
12. Any loss that is covered by any **Other Insurance** or which will be paid or refunded by a hotel, airline, travel agent or any other provider of travel or accommodation.
13. In respect of *Section 4.3 - Travel Delay*, **You** cancelling the **Journey** and being eligible for indemnity for **Cancellation Expenses**.
14. Any loss arising from failure of **Yours** to check-in according to the published itinerary.
15. Any loss arising where **You** failed to obtain written proof from the **Public Conveyance** operator or their handling agents of the reason for and length of any delay from the transport provider or original receipts for **Cancellation Expenses, Curtailment or Alteration of Itinerary Expenses, Reasonable Essential Expenses and Travel and Accommodation Expenses** incurred.
16. The amount of the **Excess** shown in the *Schedule of Benefits*;

## Section 5 – Personal Property

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### 5.1. Personal belongings

If during a **Journey** a **Person Insured** sustains loss, theft or damage to **Personal Belongings**, **we** will indemnify **you** in respect of such loss, theft or damage up to the amount shown in the *Schedule of Benefits* for any one **Journey**.

### 5.2. Personal Belongings Delay

If during any stage of a **Journey**, other than the final return stage to **Your Country of Domicile**, access is denied to all or part of a **Person Insured's Personal Belongings** for more than 6-hours for any reason outside **Your** control, **We** will reimburse **You** in respect of expenses for the purchase of necessary and essential items of replacement clothing or toilet requisites, incurred of necessity up to the maximum shown in the *Schedule of Benefits*.

**5.3. Money**

**We** will indemnify **You**, if during a **Journey** a **Person Insured** sustain loss or theft to **Money** held by **you** for **your** own personal use in respect of such loss up to the amount shown in the *Schedule of Benefits* for any one **Journey**.

**5.4. Credit, Debit or Charge Card Misuse**

**We** will indemnify **You** for financial loss directly as a result of a credit, debit or charge card being lost or stolen from a **Person Insured** during a **Journey** and subsequently being used fraudulently by any person other than a relative, travel companion, employee or acquaintance of **Yours** up to the amount shown in the *Schedule of Benefits* for any one **Journey**.

**5.5. Emergency Replacement of Passport, Visa or Travel Documents and Driving Licence**

If during a **Journey** a **Person Insured** sustains loss, theft or damage to:

- (a) **Your** passport, visa or other essential travel documents, **We** will indemnify **You** up to the amount shown in the *Schedule of Benefits* in respect of fees charged and any reasonable additional **Travel or Accommodation Expenses** and fees incurred in replacing them; or
- (b) **Your** Driving Licence or International Driving Licence, **We** will indemnify **You** in respect of fees charged by the appropriate authorities in obtaining any official temporary driving licence or replacement licence

*Section 5 – Personal property: Specific conditions*

1. Loss, theft or damage occurring in the custody of an airline or other transport carrier must be reported immediately to the appropriate authorities upon discovery and, in the case of an airline, a Property Irregularity Report obtained.
2. There is a single item limit of 25% of the sum insured for loss, theft or damage of **Personal Belongings and Emergency Replacement of Passport, Visa or Travel Documents and Driving Licence**.
3. **You** must notify the local police within 24-hours of discovery of the lost or stolen **Personal Belongings** or **Money** or the misuse of Debit, Credit or Charge Card and:
  - (a) if lost or stolen from a hotel, **you** must notify hotel management; or
  - (b) if **Money** lost or stolen includes traveller's cheques, **You** must notify the local branch or agent of the issuing company; andprovide **us** with a copy of the original written reports.
4. Where **Personal Belongings** are temporarily lost or misplaced by an airline or other carrier **We** must be provided with original written confirmation from such airline or other carrier or the tour representative that the delay lasted for at least 12 hours after **You** arrived at **Your** destination.
5. **Valuables** and **Money** must be attended by **You** at all times when not contained in a locked safe or safety deposit box.
6. **You** must take reasonable care to keep **your Personal Belongings, Valuables** and **Money** safe. If **your Personal Belongings, Money** or **Valuables** are lost or stolen **you** must take all reasonable steps to get it back.
7. In respect of any one insured article the sum insured shall not be reduced by the amount of any loss during any one **Journey** and no additional **Premium** shall be payable for such automatic reinstatement of cover.
8. In the event of total loss or destruction of an insured article of **Personal Belongings**, the basis of settlement shall be the cost of replacing the article as new provided that:
  - (a) the replacement article is substantially the same but not better than the original article when new; and
  - (b) proof of purchase/ownership is provided for articles valued in excess of R2,000; and
  - (c) the receipt for the replacement item is provided.
9. **We** shall be entitled at **Our** own option to take and keep possession of the damaged or recovered article and to deal with salvage in a reasonable manner.
10. In respect of *Section 5.5 - Emergency Replacement of Passport, Visa or Travel Documents and Driving Licence*, **You** must comply fully with all the terms and conditions under which such cards were issued.
11. Any amounts paid under *Section 5.2 – Personal Belongings Delay* will be deducted from any subsequent amounts payable under *5.1 - Personal Belongings* in respect of the same loss

*Section 5 – Personal Property: Specific Exclusions*

**We** shall not be liable for payment of any loss, claim, indemnity or **Benefit** amount under *Section 5 - Personal Property*:

1. For more than the amount stated in the *Schedule of Benefits* for:
  - (a) **Personal Belongings** during any one **Journey**;
  - (b) Single item limit for any single article, pair or set article;
  - (c) **Personal Belongings Delay**; and
  - (d) **Money**.
2. Loss, theft or damage of **Valuables** or **Money** if left **Unattended** unless contained in a locked safe or safety deposit box.

3. Loss, theft or damage of any **Personal Belongings** (other than **Valuables**) if left **Unattended** unless:
  - (a) contained in and there is evidence of forced entry to:
    - (i) a locked room;
    - (ii) a locked safe or safety deposit box; or
    - (iii) the locked glove box or boot of a vehicle or in the luggage space at the rear of a locked estate car or hatchback under a top cover and out of view; or
  - (b) in the custody or control of an airline or other **Public Conveyance** operator.
4. Loss or corruption of or damage to software, information or data contained in any computer, tapes or recording equipment or any consequential loss arising there-from.
5. loss or damage due to:
  - (a) moth, vermin, wear and tear, atmospheric or climatic conditions or gradual deterioration;
  - (b) inherent mechanical or electrical failure, breakdown or derangement; or
  - (c) any process of cleaning, restoring, repairing or alteration.
6. Loss, theft or damage to:
  - (a) antiques, musical instruments, pictures, household goods, contact or corneal lenses, dentures, or dental fittings, hearing aids, business equipment, tools, samples or merchandise, bonds, securities or documents of any kind;
  - (b) sports equipment whilst being used (except for winter sports equipment if the optional *Winter Sports Extension* is shown as covered in the *Policy Schedule*), vehicles or their accessories, watercraft and ancillary equipment, glass, china or similar fragile items and pedal cycles.
7. Loss due to confiscation or detention by customs or any other authority.
8. Loss or theft of credit, debit or charge cards, loss, theft or damage to passport, driving licence or other travel documents not reported to the police or appropriate authorities within 24-hours of discovery or earlier if required by the card issuer.
9. For traveller's cheques:
  - (a) unless the loss or theft is reported immediately to the local branch or agent of the issuing company;
  - (b) if the issuing company provides a replacement service.
10. In respect of *Section 5.3 - Money*, loss due to devaluation of currency or shortages due to errors or omission during monetary transaction.
11. The amount of the **Excess** shown in the *Schedule of Benefits*

## Section 6 - Political or Natural Disaster

If during the **Period of Insurance** whilst **you** are travelling on a **Journey** a **Political or Natural Disaster Event** occurs, **we** will indemnify **you** for

- 6.1. Political or Natural Disaster Evacuation Expenses or**  
**6.2. Political or Natural Disaster Accommodation Expenses**  
 up to the amount stated in the *Schedule of Benefits*

### *Section 6 - Political or natural disaster: Specific conditions*

6. Where **you** are entitled to a refund on an unused ticket, **we** shall be entitled to deduct the value of the unused portion from any claim.
7. **Chubb Security Assistance** must be informed immediately of any **Political or Natural Disaster Event** or as soon as reasonably possible thereafter.
8. If the total of all claims under this sub-section in any **Period of Insurance** exceeds the **Aggregate Limit**, the amount payable for each **Person Insured** shall be proportionately reduced until the total does not exceed the **Aggregate Limit**

### *Section 6 - Political or Natural Disaster: Specific Exclusions*

**We** shall not be liable for payment of any loss, claim, indemnity or **Benefit** amount under *Section 6 - Political or Natural Disaster*:

1. If a **Person Insured** has violated the laws or regulations of the country where the **Political or Natural Disaster Event** occurs.
2. If a **Person Insured** fails to produce or maintain immigration, work, residence or similar visas, permits or other relevant documentation for the country where they are on a **Journey**.
3. For **Political or Natural Disaster Accommodation** or **Political or Natural Disaster Evacuation Expenses** incurred more than 30-days before or after a **Political or Natural Disaster Event**.
4. If property of a **Person Insured** is repossessed by a titleholder or other interested party, to satisfy any debt, insolvency, financial failure or other financial obligation.

5. If a **Person Insured** fails to honour any contractual obligation, bond or specific performance condition in a license.
6. If a **Person Insured** is a national of the country in which the **Political or Natural Disaster Event** occurs
7. If the conditions leading to a **Person Insured's** departure were in existence prior to them entering the country or where such conditions were reasonably foreseeable prior to them entering the country on a **Journey**.
8. For more than one **Event** in any one **Period of Insurance**.
9. For any amount in excess of the **Aggregate Limit** reflected on the *Schedule of Benefits*.

## Section 7 - Personal security specialists expenses

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If during a **Period of Insurance** and during a **Journey**, a **Person Insured** becomes involved in a **Life-threatening Situation**, We will indemnify **You** for **Security Specialist Expenses** incurred by **Chubb Security Assistance** in extricating **You** from such situation up to the **Aggregate Limit** shown in the *Schedule of Benefits*.

### *Section 7 - Personal security specialists expenses: Specific conditions*

1. **Chubb Security Assistance** must be informed immediately or as soon as reasonably possible of any emergency that may potentially give rise to a claim.
2. **You** must provide **Chubb Security Assistance** with all information in a timely manner and must not make or attempt to make arrangements without the reasonable involvement and agreement of **Chubb Security Assistance**.
3. Any extrication must be organised by **Chubb Security Assistance** who will use the most appropriate method including, if necessary, the attendance of a **Security Specialist** to accompany **You** if required.
4. **You** will reimburse **Us** in respect of all costs incurred in the event of security services being provided by **Chubb Security Assistance** in good faith to any person not insured under this **Policy**.
5. If the total of all claims under this sub-section in any **Period of Insurance** exceeds the **Aggregate Limit**, the amount payable for each **Person Insured** shall be proportionately reduced until the total does not exceed the **Aggregate Limit**.

### *Section 7 - Personal security specialists expenses: Specific exclusions*

We shall not be liable for payment of any loss, claim, indemnity or **Benefit** amount under *Section 7 - Personal Security Specialists Expenses*:

9. Incurred in any country or region or that part of a country or region where:
  - (a) prior to the commencement of the **Journey**, warnings were issued by **Chubb Security Assistance** or the British Foreign and Commonwealth Office against all travel to such country or region or part of such country or region;
  - (b) after commencement of a **Journey**, warnings to leave or evacuate had been given by **Chubb Security Assistance** or the British Foreign and Commonwealth Office and such warnings had not been heeded by **You** in a timely manner; and
  - (c) A **Person Insured** deliberately exposes themselves to undue peril.
2. Exceeding the **Aggregate Limit** reflected on the *Schedule of Benefits*.
3. Where the **Life-threatening Situation** was due to any:
  - (a) unpaid debt of; or
  - (b) a fraudulent, dishonest or criminal act committed or attempted by **You**.
4. Incurred within **Your Country of Domicile**.
5. Incurred where a **Person Insured** was on a **Journey** exceeding a 180-day duration.
6. Incurred in relation to **Hijack** or **Kidnap**.
7. Any sums a **Person Insured** becomes legally liable to pay as the result of any legal action for damages, including legal costs incurred by a **Person Insured** in defence of such action, as the result of alleged negligence or incompetence in extrication from the **Life-threatening Situation** or alleged negligence in not preventing the involvement of a **Person Insured** in such a situation

## Section 8 - Personal liability

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We will indemnify **You** for all such damages payable occurring during the **Period of Insurance** and arising out of the **Journey**, in respect of each occurrence or a series of occurrences arising directly or indirectly from one source or original cause up to the amount shown in the *Schedule of Benefits*, if **You** become legally liable to pay damages in respect of **Bodily Injury** and/or **Accidental** loss of or damage to material property as set forth below

### **8.1. Bodily Injury**

We will indemnify **You** for all such damages payable occurring during the **Period of Insurance** and arising out of the **Journey**, in respect of each occurrence or a series of occurrences arising directly or indirectly from one source or original cause up to the amount shown in the *Schedule of Benefits* if a **Person Insured** becomes legally liable to pay damages in respect of **Bodily Injury** (which shall include death, **Illness** and disease to any person).



## 8.2. Material damage

We will indemnify **You** for all such damages payable, occurring during the **Period of Insurance** and arising out of the **Journey**, in respect of each occurrence or a series of occurrences arising directly or indirectly from one source or original cause up to the amount shown in the *Schedule of Benefits* if a **Person Insured** becomes legally liable to pay damages in respect of **Accidental** loss of or damage to material property

We will also pay:

1. All costs and expenses recoverable by a claimant from a **Person Insured**.
2. All costs and expenses incurred with **Our** written consent

### Section 8 - Personal liability: Specific conditions

1. Except that in respect of occurrences happening in or claims or legal proceedings brought or originating in the United States of America and Canada or any other territory within the jurisdiction of either such country, costs and expenses described in 1,2 and 3 above are deemed to be included in the amount shown in the *Schedule of Benefits*.
2. No admission, offer, promise or indemnity shall be made without **Our** consent, which **We** shall be entitled to take over and conduct in **Your** name the defence or settlement of any claim or to prosecute in **Your** name for **Our** own Benefit any claim for indemnity or damages or otherwise and shall have full discretion in the conduct of any proceedings and in the settlement of any claim and **You** shall give all information and assistance as **We** may require. Every letter, claim, writ, summons and process shall be forwarded to **Us** on receipt. Written notice shall be given to **Us** immediately that **You** have notice of any prosecution or inquest in connection with any circumstances which may give rise to liability under this Section.
3. We may at any time pay to **You** in connection with any claim or series of claims the amount shown in the Schedule of Benefits (after deduction of any sum already paid as compensation) or any lesser amount for which such claim can be settled and upon such payment being made, **We** shall relinquish the conduct and control of and be under no further liability in connection with such claim except for the payment of costs and expenses recoverable or incurred prior to the date of such payment.
4. **You** shall observe, fulfil and be subject to the terms, **Specific Exclusions and Specific Conditions** of this Section

### Section 8 - Personal liability: Specific exclusions

**We** shall not be liable for payment of any loss, claim, indemnity or **Benefit** amount under *Section 8 - Personal Liability due to:*

1. Liability incurred by a **Person Insured** in respect of **Bodily Injury** to any other person who is:
  - (a) under a contract of service or apprenticeship with a **Person Insured** when such **Bodily Injury** arises out of and in the course of their employment with a **Person Insured**; or
  - (b) a member of insured person's family.
2. Liability in respect of loss of or damage to property belonging to or held in trust by or in the custody or control of a **Person Insured** other than temporary accommodation occupied by **you** in the course of a **Journey**.
3. Liability in respect of **Bodily Injury**, loss or damage caused directly or indirectly in connection with the ownership, possession or use by a **Person Insured**, their servants or agents of:
  - (a) mechanically propelled vehicles (other than golf buggies used on golf courses and not on public roads);
  - (b) aircraft, hovercraft, watercraft (other than non-mechanically powered watercraft less than 30 feet in length used on inland waters); or
  - (c) firearms (other than sporting guns).
4. Liability in respect of **Bodily Injury**, loss or damage arising directly or indirectly in connection with:
  - (a) the ownership, possession or occupation of land or buildings, immobile property or caravans other than temporary accommodation occupied by a **Person Insured** in the course of a **Journey**; or
  - (b) any wilful or malicious act; or
  - (c) the carrying on of any trade, business or profession.
5. Any liability assumed by a **Person Insured** under any contract or agreement unless such liability would have attached in the absence of such contract or agreement.
6. Any liability directly or indirectly occasioned by the happening through or in consequence of War in the Republic of South Africa or Country of Domicile; or
7. Punitive or exemplary damages, fines and penalties.

## Section 9 – Hijack, kidnap or wrongful detention

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### 9.1. Hijack, Kidnap or Wrongful Detention daily benefit

We will pay the amount shown in the *Schedule of Benefits* for each complete day that a **Person Insured** is forcibly or illegally detained up to the maximum amount shown in the *Schedule of Benefits*, if during a **Journey**

- (a) the **Public Conveyance** in which **You** are travelling in is **Hijacked**;
- (b) **You** are **Kidnapped**; or
- (c) **You** are **Wrongfully Detained**

### 9.2. Kidnap or wrongful detention expenses

If during a **Journey** a **Person Insured** is **Kidnapped** or **Wrongfully Detained**, **We** will indemnify **You** for the following losses up to the maximum amount shown in the *Schedule of Benefits*:

- (a) **Travel and Accommodation Expenses** incurred by **You** while attempting to negotiate an incident covered under **Kidnap or Wrongful Detention**;
- (b) Reasonable Travel costs of a **Person's Insured** to join their immediate family upon their release;
- (c) Post traumatic stress disorder counselling expenses, deemed necessary and reasonable by a **Qualified Medical Practitioner** appointed by **us, for you, your Partner** and **Children**

### **Section 9 - Hijack or kidnap or wrongful detention: Special conditions**

1. Cover in respect of this Section applies to incidents anywhere in the world except for:
  - (a) any country where the British Foreign and Commonwealth Office, **Chubb Security Assistance** or the South African Department of Foreign Affairs has issued a travel warning; and
  - (b) any other country in which the United Nations Armed Forces are present and active.
2. **You** will use all reasonable efforts not to disclose the existence of the cover provided by this **Section** or any **Other Insurance Policy**.
3. For each **Kidnap or Wrongful Detention Event**, the maximum limit and **Aggregate Limit** of **Our** liability will not exceed the sum insured stated in the *Schedule of Benefits* by reason of any one **Event**, except where stated to the contrary.
4. **You** will use due diligence and do and concur in doing all things reasonably practicable to avoid or diminish any loss insured under this **Policy**.
5. The insurance provided under this *Section* will be in excess over any **Other Insurance**.
6. **You** will file a detailed affidavit with **Us** as soon as possible after the **Insured Event**. **We** will specify information that is to be furnished to **Us** in order to consider the claim.
7. **You** will co-operate with **Us** in all matters relating to this insurance. This may include attending hearings and trials, securing and giving evidence, obtaining the attendance of witnesses, assisting in achieving settlements, and in conducting litigation, arbitration or other proceedings.
8. No suit, action or proceeding for recovery of any loss under this *Section* will be sustainable in any court of law, equity or other tribunal unless all requirements of this *Section* are complied with and it is commenced within 12-consecutive months after **You** have filed a statement of loss with **Us**.
9. We have the right to utilise **Your Public Conveyance** ticket to offset **Our** expenses in the purchase of a replacement **Public Conveyance** ticket.

### **Section 9– Hijack, kidnap or wrongful detention: Special exclusions**

**We** shall not be liable for payment of any loss, claim, indemnity or **Benefit** amount under *Section 9 - Hijack, Kidnap or Wrongful Detention*

1. Any demand for ransom monies.
2. Actual loss of or damage to property of any description, including intellectual property, as a result of an **Insured Event**.
3. Any loss from **Kidnap** if a **Person Insured** is permanently residing or staying for a duration of more than 180-days in the country where the event occurs.
4. Any violation of the laws of the host country by a **Person Insured** or failure to maintain and possess duly authorised and required documents and visas.
5. A **Person Insured's** failure to evacuate from the host country within 7-days after the issuance of an advisory or travel to countries after an advisory has been issued.
6. A **Person Insured** taking part in the operations as a member of any governmental organisation, official law enforcement or military force.
7. Any travel to a country or region where the British Foreign and Commonwealth Office, **Chubb Security Assistance** or the South African Department of Foreign Affairs have issued a travel warning.

## Annexure 1 – Schedule of covered sports

1a - Automatically covered leisure activities	
Archery (provided supervised by a qualified person)	Land sailing
Arm Wrestling	Laser games
Badminton	Long jump
Basketball	Maxi-basketball
Beach basketball	Mini-basketball
Beach cricket	Motorcycling up to 125cc provided <b>You</b> wear a crash helmet, and hold a full (not provisional) South African motorcycle licence and licence to operate a motorcycle in country of destination if <b>You</b> are in control of the motorcycle.
Beach football	Motor rallies
Beach volleyball	Netball
Bocce	Paddleball
Body boarding	Parascending (provided over water)
Bowls	Pony trekking
Bowling	Racquetball
Canoeing, kayaking and rafting on inland waters only (excluding white water)	Rambling (up to 1,000 metres in height, not usually necessitating the use of guidelines and/or ropes)
Carriage or hay or sleigh rides	Roller skating
Clay-pigeon shooting (supervised by a qualified person)	Roller blading
Cricket	Rounders
Croquet	Rowing (on inland waters only)
Curling	Running
Cycling (except BMX)	Safari (camera only and professionally organised)
Deep sea fishing (excluding competitions)	Sail boarding
Dinghy sailing (on inland or coastal waters only)	Sailing (on inland and coastal waters only)
Dry skiing	Scuba diving (not exceeding 18 meters and provided that <b>you</b> are accompanied by a qualified instructor or <b>you</b> are qualified and not diving alone)
Elephant riding (less than 2 days)	Snorkelling
Fell walking	Soccer
Fencing (provided supervised by a qualified person)	Squash
Fishing	Softball
Footbag (hacky sack)	Streetball
Football (Association)	Surfing
Go karting (provided <b>you</b> wear a crash helmet)	Swimming
Golf	Table Tennis
Gym (weight training and aerobic exercise)	Tennis
Handball	Trampolining
Hiking (up to 1,000 metres in height, not usually necessitating the use of guidelines and/or ropes)	Trekking (up to 1,000 metres in height, not usually necessitating the use of guidelines and/or ropes)
Hill walking (up to 1,000 metres in height, not usually necessitating the use of guidelines and/or ropes)	Triple jump
Horse riding (provided no hunting, jumping or polo)	Tug of war
Hot air ballooning (provided it is professionally organised, and <b>you</b> travel as a passenger only)	Twirling
Ice skating (excluding Ice hockey and speed skating)	Volleyball
In line skating	Water polo
Javelin	Water skiing
Jet skiing up to a maximum 250cc	Wind surfing
Korfball	Yachting (on inland and coastal waters only)
Lacrosse	
1b - Winter sports extensions	
Skiing on-piste	Snow boarding on-piste
Skiing off-piste (accompanied by or under the instruction of a qualified local guide)	Snow boarding off-piste (when accompanied by or under the instruction of a qualified local guide)
Tobogganing	

**Leisure activities or sports not specifically covered under 1A - Automatically Covered Leisure Activities, or, where the Winter Sports Extension has been purchased, winter sports not specifically covered under 1B - Winter Sports Extensions are excluded this Policy**

## Annexure 2 – Allowable pre-existing conditions

### 2a – Allowable pre-existing conditions

Acne

ADHD

Allergic rhinitis

Arthritis (the affected person must be able to walk independently at home without using mobility aids)

Asthma (the affected person must be aged under 50 and the asthma controlled by no more than 2 inhalers)

Blindness or partial sightedness

Carpal tunnel syndrome

Cataracts

Chicken pox - if completely resolved

Common cold or flu

Cuts and abrasions that are not self-inflicted and require no further treatment

Cystitis - provided there is no ongoing treatment

Deafness

Diabetes (which is controlled by diet or tablets only)

Diarrhoea and vomiting - if completely resolved

Eczema

Enlarged prostate - benign only

Essential tremor

Glaucoma

Gout

Haemorrhoids

Hay fever

Ligament or tendon injury - provided **you** are not currently being treated

Macular degeneration

Menopause

Migraine - provided there are no ongoing investigations

Nasal polyps

Nut allergy that, if left untreated, does **not** require hospital treatment

Premenstrual tension

Repetitive strain injury

Sinusitis - provided there is no ongoing treatment

Skin or wound infections that have completely resolved with no current treatment

Tinnitus

Underactive thyroid (Hypothyroidism)

Urticaria

Varicose veins in the legs

## Notice to short-term insurance policy holders

DISCLOSURE AND OTHER LEGAL REQUIREMENTS Important – please read carefully

(This notice does not form part of the Insurance Contract or any other document)

As a policyholder, or prospective policyholder, you have the right to the following information:

Statutory notice	Information
<p><b>About the intermediary (insurance broker or representative)</b></p> <p>a) a. Name, physical address and postal address and telephone number.            b) b. Legal status and any interest in the insurer.            c) c. Whether or not in possession of professional indemnity insurance.            d) d. Detail of how to institute a claim.            e) e. Rand amount of fees and commission payable.            f) f. Written mandate to act on behalf of insurer.</p>	<p>Your insurance advisor should provide this information to you when you are provided with a quotation or take out a policy. If your advisor does not do so after you have requested it please contact Chubb Insurance South Africa Limited who will assist in obtaining it.</p>
<p><b>About the insurer</b></p> <p>a) Name, physical and postal address and telephone numbers.            b) Telephone number of compliance department of the insurer.            c) Details of how to institute a claim and/or complaint.            d) Type of policy: refer to your policy schedule.            e) Extent of premium obligations, manner of payment of premium, due date of premiums and consequences of non-payment: refer to policy schedule.            f) Fees: The premium displayed on your quote, policy schedule or renewal will be payable.            g) Complaints procedure: visit our website <a href="http://www.chubb.com/za">www.chubb.com/za</a>            h) Chubb Insurance South Africa Limited is in possession of Professional Indemnity Cover.</p>	<p><b>Contact Details:</b>            Chubb Insurance South Africa Limited            Reg No: 1973/008933/06            PO Box 1192, Saxonwold, 2132</p> <p><b>Located at:</b>            Ground Floor, The Bridle, Hunts End Office Park            38 Wierda Road West, Wierda Valley            Sandton            Tel: 011 722 5700            FSP No: 27176</p> <p><b>Compliance Officer:</b>            Arnold Schoombee            PO Box 1192            Saxonwold            2132            Tel: 011 722 5700            Fax: 011 783 0812</p>
<p><b>Other matters of importance</b></p> <p>a) You must be informed of any material changes to the information referred to in paragraph 1 and 2.            b) If the information in paragraphs 1 and 2 was given orally, it must be confirmed in writing within 30 days.            c) If any complaint to the intermediary or insurer is not resolved to your satisfaction, you may submit the complaint to the Financial Sector Conduct Authority.            d) Polygraph or any lie detector test is not obligatory in the event of a claim and the failure thereof may not be the sole reason for repudiating a claim.            e) If premium is paid by debit order:                a. it may only be in favour of one person and may not be transferred without your approval; and                b. the insurer must inform you at least 30 days before the cancellation thereof, in writing, of its intention to cancel such debit order.            f) The insurer and not the intermediary must give reasons for repudiating your claim.            g) Your insurer may not cancel your insurance merely by informing your intermediary. There is an obligation to make sure the notice has been sent to you.            h) You are entitled to a copy of the policy free of charge.</p>	
<p>Should you have any complaints about the availability or adequacy of information herein, or about our claims or underwriting service, please bring this to the attention of our compliance officer.</p> <p>Our Complaints resolution procedure can be viewed at our website: <a href="http://www.chubb.com/za">www.chubb.com/za</a></p> <p>Your policy document contains the details of procedures to follow in the event of a claim. Should anything not be clear, please contact your insurance advisor or Chubb Insurance South Limited for assistance.</p>	
<p><b>Warning</b>            Do not sign any blank or partially completed application form.            Complete all forms in ink.            Keep all documents handed to you. Make note as to what is said to you.            Don't be pressurized to buy the product. Incorrect or non-disclosure by you of relevant facts may influence an insurer on any claims arising from your contract of insurance.</p>	
<p><b>Particulars of Short term Insurance Ombudsman who is available to advise you in the event of claim problems, which are not satisfactorily resolved by the insurance intermediary and/or the insurer.</b></p>	<p>PO Box 32334            BRAAMFONTEIN, 2017            Tel: (011) 726-8900            Fax: (011) 726-5501            info@osti.co.za</p>
<p><b>Particulars of the Financial Sector Conduct Authority (FSCA)</b></p>	<p>PO Box 35655            MENLO PARK, 0102            Tel: (012) 428-8000            Fax: (012) 347-0221</p>
<p><b>Particulars of the FAIS Ombud</b></p>	<p>PO Box 74571            LYNWOOD RIDGE, 0040            Tel: (012) 470 9080            Fax: (012) 348 3447</p>

<b>Particulars of SASRIA</b>	Sasria Soc Limited Reg No: 1979/000287/06 FSP: 39117 36 Fricker Road, Illovo PO Box 653367, Benmore, 2010 Tel: (011) 214 0800 Fax: (011) 447 8630
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(You may be required to sign a copy of this document)

**OTHER IMPORTANT INFORMATION**

<b>Claims</b>	Procedures for the submission of claims and your responsibilities are detailed in the policy document in the section of the policy headed GENERAL CONDITIONS. In the event of a possible claim you must notify your advisor or Chubb Insurance South Africa Limited as soon as reasonably possible and submit a completed claim form as soon as practicable but within 30 days. When we are dealing with any claim you must give us any information and help we reasonably ask for.
<b>General</b>	The policy wording and schedule must be read as one document. If you need advice on any aspect of your policy, first amounts payable [excesses], claims procedures or your responsibility to pay premiums, please contact your insurance advisor or Chubb Insurance South Africa Limited.  Should you at any time suspect fraudulent dealings on the part of the Insurer or any other person dealing with your insurance claim, please contact the Insurer on 011 722 5700 or the Insurance Fraudline on 0860 002526.

Aon South Africa (Pty) Ltd

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