

Policy Wording

Corporate Edge

Business Travel Accident Policy

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Important Notices

About this Policy

This Policy wording, together with the latest Policy Schedule for the applicable Benefits, the proposal form and any Endorsements, form the basis of the contract between the Policyholder and the Company. The Company agrees to provide the Insured Person the insurance cover for the applicable Benefits as listed in the Policy Schedule and described in this Policy provided that the Policyholder pays the premium when due and the Company accepts it subject to the terms and conditions of this Policy.

This Policy wording should be read carefully together with the Policy Schedule for applicable Benefits and any Endorsements to ensure that the terms and conditions are fully understood, and the coverage meets the requirement of the Policyholder/Insured Person(s). If there are any questions regarding the terms and conditions of this Policy wording, the Policyholder may contact the Company, or the Policyholder's intermediary, whichever applicable.

All terms and conditions of this Policy must be continuously satisfied by the Policyholder and Insured Person(s) for the Policyholder and Insured Person(s) to be eligible for coverage under this Policy.

Schedule of Benefits

Please refer to the Policy Schedule provided along with this Policy for selected Benefits and corresponding Sum Insured applicable to each Insured Person covered under this Policy. Benefits are applicable only if specified in the Policy Schedule.

Individual Benefits should be referred to for full details of coverage.

Ongoing Duty of Disclosure

The Policyholder and Insured Person(s) have a duty to take reasonable care not to make a misrepresentation when purchasing this Policy, to answer all questions fully, honestly, accurately and to the best of their knowledge and disclose any matter that they know to be relevant to the Company in accepting the risks and determining the rates and terms to be applied and any matter a reasonable person in the circumstances could be expected to know to be relevant.

This duty of disclosure shall continue until the time this Policy is entered into, varied or renewed with the Company. The Policyholder and Insured Person(s) also have a duty to tell the Company immediately if at any time after this Policy has been entered into, varied or renewed with the Company, any information given when the Policy was purchased is inaccurate or has changed.

Failure to do so may:

a. result in the Company reviewing the cover granted including withdrawing or amending cover previously approved;

b. void this Policy from inception (which means treating it as invalid) and the Company may not return the premium or may recover any unpaid premium;

c. result in refusal or reduction of claims that have been or will be made under the Policy;

d. change the terms of this Policy;

e. terminate this Policy and return any premium less the Company's cancellation charge or recover any unpaid premium;

f. entitle the Company to recover any shortfall in premium;

g. entitle the Company to recover from Policyholder and Insured Person(s) the total amount of any claim already paid under the Policy or any claim the Company has to pay under any relevant legislation, plus any recovery costs.

Eligibility

To be eligible for coverage under this Policy, an Insured Person must meet the criteria specified for an Insured Person as described in the Policy Schedule and continuously satisfy all requirements as specified under 'Age' section of this Policy.

Age

1. There are no age limits in this Policy

2. Once an Insured Person attains the age of seventy-five (75):

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a. the Sum Insured for 'Accidental Death and Permanent Disabilities Benefit' will be the lesser of the Sum Insured as specified in the Policy Schedule or $200,000;

b. no claim will be payable under Event 2 of the Schedule of Events.

3. The Sum Insured for Accidental death for an Insured Person who is aged under eighteen (18) years is limited to $50,000 except when an Insured Person is between sixteen (16) and eighteen (18) years of age and is employed as a Business Partner, C-Level Management or Employee of the Policyholder on the date of the Accident causing Bodily Injury in which case the full limit shall apply as shown in the Policy Schedule.

Important Note:

Age refers to the Insured Person's age as on his/her last birthday.

Operative Time of Cover

An Insured Person is only covered during the following Operative Time of Cover and as shown on the Policy Schedule.

OT1 - Business Travel (excluding Domestic Business Trips)

While an Insured Person is on a Business Trip outside his/her Country of Residence. This excludes any commuting between Insured Person's usual place of residence and usual place of work.

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General Policy Definitions

Wherever the following words or phrases appear in this Policy and begin in uppercase, the definitions with interpretation as set out below will apply. Where appropriate, words mentioned in the plural shall also have their singular meaning and vice versa. Please note that this Policy has been designed to offer multiple and optional Benefits and therefore not all the definitions listed herein will be relevant to the selected listed Benefits as shown in the Policy Schedule.

Please read each section/Benefit of this Policy for additional specific definitions where applicable.

Accident/Accidental

A sudden, unexpected, violent, visible and specific evnt which occurs at an identifiable time and place during the Business Trip.

Aggregate Limit

The maximum amount that is payable for all Insured Persons under 'Accidental Death and Permanent Disabilities Benefit' for the circumstances set out in the Policy Schedule or in an Endorsement.

For the avoidance of doubt:

a. Maximum limit Per Occurrence refers to the maximum amount that is payable for all Insured Persons under 'Accidental Death and Permanent Disabilities Benefit' arising from the same Occurrence or Accident or series of Accidents contributed to or caused by the same original cause, event or circumstance;

b. Maximum limit Per Conveyance or Any one (1) Conveyance Limit refers to the maximum amount that is payable for all Insured Persons under 'Accidental Death and Permanent Disabilities Benefit' arising from the same scheduled or unscheduled/non-scheduled Conveyance Accident or series of Conveyance Accidents contributed to or caused by the same original cause, event or circumstance;

c. Maximum limit Per Unscheduled/Non-Scheduled Aircraft refers to the maximum amount that is payable for all Insured Persons under 'Accidental Death and Permanent Disabilities Benefit' arising from the same Unscheduled/Non-Scheduled Aircraft Accident or series of Unscheduled/Non-Scheduled Aircraft Accidents contributed to or caused by the same original cause, event or circumstance.

The Company shall not be liable for any amount in excess of the Aggregate Limit as specified in the Policy Schedule or Endorsement. If the total loss amount is in excess of this Aggregate Limit, payment will be made proportionately to the Sum Insured for each Insured Person.

For the purpose of this definition only,

a. Occurrence means any incident that happens at a particular place and time.

b. Conveyance means any land vehicle, sea vessel or aircraft operated by a licensed registered operator providing regular scheduled transportation services for individuals who travel as fare paying passengers.

c. Unscheduled/Non-Scheduled Aircraft means any aircraft owned by the Policyholder or operated by a licensed registered operator who provides flight services for individuals who travel as fare paying passengers, that are not conducted in accordance with fixed schedules or over specific routes.

AIG Travel Protect

A twenty-four (24) hours worldwide emergency assistance service provided by the Company.

Annual Salary

The total gross basic annual salary (not including payments for overtime, commission, dividend or bonus unless declared to and agreed by the Company) payable by the Policyholder to the Insured Person on the date the Bodily Injury was sustained. For weekly paid Insured Persons, annual salary will be calculated by taking the average gross basic weekly salary of the Insured Person for the thirteen (13) weeks prior to sustaining Bodily Injury and multiplying this amount by fifty-two (52). If the Policyholder includes Employees paid in dividends as Insured Persons under this policy, such dividends will be treated as Annual Salary provided that such dividend payments are made instead of wages or salary, they are declared and included in Policyholder accounting statements and are consistent and reasonable with the Policyholder's trading position on a continuing basis.

Basic Monthly Salary (BMS)

The total gross monthly basic earned income including monthly variable component where applicable, but excluding payments for overtime, commissions, dividends or bonuses, payable by the Policyholder to the Insured Person at the date of Accident.

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Benefit

The benefits listed in the Policy Schedule and which are subject to the terms and conditions as stated under this Policy respectively.

Bodily Injury

An identifiable physical injury which is caused by an Accident solely and independently of any:

a. other causes including but not limited to any sickness, virus, bacterial or any kind of infection howsoever caused; or

b. congenital conditions (except Sickness directly resulting from, or medical or surgical treatment rendered necessary by such Bodily Injury); or

c. wear and tear, naturally occurring conditions or degenerative process(es).

Business Partner

Any person holding the position of partner or, in the case of a limited liability partnership, holding the position of member of the Policyholder.

Business Trip

Any trip approved and undertaken for the purpose of the Policyholder's business, during the Period of Insurance as shown on the Policy Schedule, up to a maximum duration of one hundred and eighty-three (183) consecutive days within the Geographical Area specified in the Policy Schedule.

Cover commences from the time the Insured Person leaves his/her place of residence or regular place of employment in Country of Residence and directly travels to his/her point of departure, whichever is the later, and stops on the earliest of the following:

a. the expiry of the current Period of Insurance; or

b. when the Insured Person returns directly to his/her usual place of residence or regular place of employment, whichever is the earlier, in Country of Residence.

Personal Deviation and Home Leave are included.

C-Level Management

The Policyholder's 'Directors', 'Managing Director', 'Chairman', 'President', 'Chief Executive Officer', 'Chief Financial Officer', 'Chief Operating Officer', 'Chief Risk Officer', 'Chief Information Officer', 'Head of Human Resources', 'Company Secretary' and the 'General Manager' or any other similar designation mentioned in the Policyholder's registration with 'Accounting and Corporate Regulatory Authority (ACRA)' or as agreed with the Company in writing during the Period of Insurance but prior to the commencement of their leisure trip.

Civil Commotion

A substantial violent disturbance by a large number of persons assembled together and acting with common purpose or intent.

Company

AIG Asia Pacific Insurance Pte. Ltd. (201009404M).

Contractor

Any person employed by the Policyholder on a temporary contract for services that the Policyholder has requested, and the Company agreed to include as an Insured Person.

Conveyance

Any land vehicle, sea vessel or aircraft which is a licensed registered operator providing regular scheduled transportation services for individuals who travel as fare paying passengers. It does not include cruise liners or any Conveyance if chartered or arranged as part of a tour even if such services are regularly scheduled.

Country of Residence

A country in which an Insured Person is a permanent resident in or is a holder of an employment permit or dependent pass (where applicable) granted by the relevant government authority.

Departure

The travel date and/or place upon which the Insured Person is scheduled to depart on or at/from as indicated on the ticket or in the Business Trip itinerary.

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Dependant Child(ren)

The biological children, legally adopted children or stepchildren of the Insured Person who are:

a. from the age of fifteen (15) days after birth up to nineteen (19) years old, or up to twenty-five (25) years of age if they are attending as a full-time student in an accredited institution of higher learning, who are unmarried and receive financial maintenance and support from the Insured Person; or

b. physically or mentally incapable of self-support.

A Dependant Child excludes any child in full-time national service.

Elder Dependant

An Insured's parent, parent-in-law, grandparent, grandparent-in-law, great grandparent or great grandparent-in-law (whether natural, step or adoptive) if that person is primarily dependent on the Insured Person for maintenance and support.

Employee

Any person under a contract of employment, contract of service or apprenticeship with the Policyholder who is not a Business Partner nor in C-Level Management.

Endorsement

A written notice to the Policyholder stating an amendment, deletion or addition made to this Policy.

Extension

The additional cover(s) to the Benefits listed in the Policy Schedule and which are subject to the terms and conditions as stated under this Policy respectively.

Facial Scar

A scar on the face, which is the area bordered by the natural hairline surrounding the forehead, the front of the ears and the lower jaw, which was sustained due to an Accident.

Finger

The digit of a Hand.

Felonious Assault

Any wilful or unlawful use of force upon the Insured Person:

a. with the intent to cause Bodily Injury to the Insured Person; and

b. that results in bodily harm to the Insured Person; and

c. is a criminal offence in the jurisdiction in which it occurs.

Foot

The entire foot below the ankle.

Fracture

A break completely across a bone, or a compound fracture where the bone breaks the skin.

Geographical Area

Either

a. 'Regional countries' which are Australia, Bangladesh, Brunei, Cambodia, China, Fiji, Hong Kong, India, Indonesia, Japan, Korea, Laos, Macau, Malaysia, Mongolia, Myanmar, Nepal, New Zealand, Pakistan, Papua New Guinea, Philippines, Sri Lanka, Taiwan, Thailand and Vietnam; or

b. 'Worldwide' which is any country in the world.

The applicable Geographical Area for this Policy will be specified in the Policy Schedule.

Hand

The entire hand below the wrist.

Hemiplegia

The Permanent, total and irrecoverable paralysis of one (1) leg below the hip and one (1) arm below the shoulder on the same side of the body.

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Home Country

The country of which the Insured Person holds a passport for. If the Insured Person holds more than one (1) passport, the home country means the country declared to the Company.

Home Leave

The contractual entitlement exercised by the Insured Person and approved by the Policyholder prior to the commencement of the trip. This refers to travel to Insured Person's Home Country from their Country of Residence. This does not include any travel for Leisure Travel or annual leave.

Hospital

Any institution lawfully operated for the care and treatment of sick or injured persons:

a. with organised facilities for diagnosis and surgery (including operating theatres) in the same premises;

b. with twenty-four (24) hours daily nursing service by registered nurses; and

c. operated under the supervision of Medical Practitioner(s); and

d. which is not a clinic, a nursing home, rest home, convalescence, palliative care, hospice or rehabilitation centres, a place used for custodial care, a place for the treatment of alcoholics or drug addicts, institution to treat mental or behavioural disorders, sanatorium, any transitional care centre or home for the aged or similar establishment even if located at the same place.

Hospitalisation/Hospitalised

The admission of the Insured Person to a Hospital as an Inpatient during the Period of Insurance. For the avoidance of doubt, Hospitalisation shall be evidenced by daily boarding charges imposed by a Hospital.

Immediate Relative

The Insured Person's or Partner's brother, child, parent, Partner, or sister.

Infectious Disease

Any of the following infectious diseases contracted during the Period of Insurance, which is classified as an 'Infectious Disease' under Section 2, the 'First Schedule' and the 'Second Schedule' of the Infectious Disease Act, Cap 137, and requires notification to Singapore's Ministry of Health as per Section 6 of the Infectious Disease Act, Cap 137, within twenty-four (24) hours upon diagnosis by a Medical Practitioner:

a. Ebola Virus Disease (EVD)

b. Middle East Respiratory Syndrome Coronavirus Infection (MERS- CoV)

c. Severe Acute Respiratory Syndrome (SARS)

d. Dengue Fever or Dengue Hemorrhagic Fever

e. Avian Influenza

f. Malaria

g. Chikungunya Fever

h. Zika Virus Infection

i. Yellow Fever

Infectious Disease Testing or Virus Testing

Expenses for a test or tests given to an Insured Person to detect the presence of antibodies, antigens or other indicators of the presence of an Infectious Disease or Virus that:

a. are ordered and provided under the care or supervision of a Medical Practitioner and carried out by a licensed medical facility;

b. do not exceed the usual level of charges for similar testing expense in the locality where the expense was incurred;

c. meet generally accepted standards of medical practice; and

d. does not include charges that would not have been incurred if no insurance existed.

Inpatient

The Insured Person is confined in a Hospital as a registered patient for Medically Necessary treatments of a covered Bodily Injury or Sickness suffered by the Insured Person for at least an overnight stay and such confinement is certified as necessary by the attending Medical Practitioner.

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Insured Person

Any person described on the Policy Schedule as being an Insured Person who is nominated by the Policyholder from time to time to be insured under this Policy during a valid Period of Insurance. Cover applies until the end of the Period of Insurance or the date upon which the Insured Person ceases his/her employment, affiliation or association with the Policyholder, whichever occurs first.

Intoxicating Substance(s)

Anything which if taken into the body may alter or impair normal mental or physical functions.

Legal Guardian

An individual who is given legal guardianship over a Dependant Child and is the primary caregiver until he/she reaches the age of eighteen (18). The Legal Guardian is either appointed by the court or by the Dependant Child's biological parents.

Leisure Travel

Travel solely for the purpose of leisure, which is private, not taken in conjunction with any Business Trip and is unrelated to business for the entire duration of the trip, as declared by the Policyholder, to be undertaken by C-level Management and their accompanying Partner and Dependant Child(ren), provided that such travel involves a flight or pre-booked overnight stay.

Limb

The entire limb between the shoulder and the wrist or the entire limb between the hip and the ankle.

Medical Expenses

The actual, reasonable and Medically Necessary expenses incurred to treat an Insured Person or as prescribed by a Medical Practitioner for any of the following:

a. medical treatment or supplies;

b. room and board charges for Hospitalisation;

c. medical or surgical services and nursing treatment;

d. ambulance charges;

e. any dental treatment where such treatment is necessarily incurred to restore sound and natural teeth following an Accident; and/or

f. optical and pregnancy/childbirth expenses incurred following an Accident.

Medically Necessary

A medical service provided on Medical Practitioner's recommendation/advice which is:

a. consistent with the diagnosis and customary medical treatment for a covered Bodily Injury or Sickness;

b. in accordance with standards of good medical practice, consistent with current standard of professional medical care and of proven medical benefits;

c. not of an experimental, investigational, research, preventive or screening in nature; and

d. for which charges are fair and does not exceed the general level of charges being made by others of similar standing in the locality where the charge is incurred, when furnishing like or comparable treatment, services or supplies to individuals of the same sex and of comparable age for a similar Injury in accordance with accepted medical standards and practice that could not have been omitted without adversely affecting the Insured Person's Bodily Injury or Sickness.

Medical Practitioner

A legally registered and qualified medical practitioner with a medical degree in western medicine and authorised by the medical licensing authority of that country to provide medical or surgical service within the scope of his/her license, specialised accreditation and training.

For dental treatment only, a Medical Practitioner is defined as a dental practitioner who holds a specialist dental accreditation or who specialises in a specific branch of dentistry.

Medical Practitioner cannot be:

a. the Policyholder or an Insured Person;

b. a Business Partner, C-Level Management or agent with any relation to the Policyholder or Insured Person; or

c. a Relative of the Policyholder or Insured Person.

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Money

Currency notes or travellers' cheques.

Natural Catastrophe

Cyclone, flood, hurricane, earthquake, landslide, tornado, tsunami, typhoon, volcanic eruption, windstorm, hailstorm and wildfire.

Operative Time

The Operative Time selected by the Policyholder for this Policy and as shown in the Policy Schedule and shall have the respective meaning as shown under Important Notices - 'Operative Time of Cover'.

Overseas

Outside the territorial limits of the Country of Residence.

Paraplegia

The Permanent and entire paralysis of both legs and part or whole of the lower half of the body.

Partner

Someone the Insured Person is legally married to or in a civil partnership with, or someone he/she has been living with for a minimum of three (3) months at the same registered address as if they were married or in a civil partnership.

Period of Insurance

The period of time as shown on the Policy Schedule during which cover applies for the Insured Person and for which premium has been paid.

Permanent

Lasting for at least twelve (12) consecutive months and at the end of that time is certified by a Medical Practitioner as being beyond hope of recovery and will in all probability continue for the remainder of the Insured Person's natural life.

Permanent Disability/Disabilities

A Bodily Injury that results in Events 2 - 29 listed under the Schedule of Events under 'Accidental Death and Permanent Disabilities Benefit'.

Permanent Total Disablement – applicable to Business Partners, C-Level Management or Employees of the Policyholder

A Permanent, total and irrecoverable disablement which totally prevents an Insured Person from working in his/her usual occupation which in all probability will continue for the remainder of his/her natural life as determined by a Medical Practitioner.

Permanent Total Disablement – applicable to Insured Persons who are not Business Partners, C-Level Management or Employees of the Policyholder

A Permanent, total and irrecoverable disablement which totally prevents an Insured Person from working in paid employment for which he/she is suited by training, education or employment which in all probability will continue for the remainder of his/her natural life as determined by a Medical Practitioner.

Personal Deviation

It refers to personal vacation taken by an Insured Person immediately before, during or immediately after a Business Trip and within the applicable Geographical Area that the Insured Person is covered for in the Policy Schedule, provided the maximum duration for such covered travel for:

a) Insured Persons who are not C-Level Management, does not exceed 60% of the Business Trip and the total trip in entirety does not exceed the maximum duration allowed for a Business Trip; or
b) C-Level Management's total trip in entirety does not exceed the maximum duration allowed for a Business Trip.

Personal Deviation does not include personal vacation taken immediately before, during or immediately after Home Leave.

Policy

This insurance contract which consists of the Policy wording, the latest Policy Schedule and any other documents the Company may issue to the Policyholder or Insured Person at the request or with agreement of the Policyholder or the Insured Person as the case may be, that will form part of this Policy (e.g. Endorsements).

Policyholder

The legal entity or organisation named as the Policyholder in the Policy Schedule. The Policyholder is responsible for premium payments and has the right to exercise all privileges under this Policy.

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Policy Schedule

The document showing details of the Period of Insurance and the particulars of the Policyholder and eligible Insured Persons, including the Policy modules and Benefits and the respective Sums Insured, which should be read with this policy.

Psychological Therapy Expenses

Expenses charged for any individual, joint or family mental health counselling session that is ordered and provided under the care or supervision of a Medical Practitioner; and (1) do not exceed the usual level of charges for similar expenses in the locality where the expenses were incurred; (2) meet generally accepted standards of medical practice and (3) do not include charges that would not have been made if no insurance existed.

Quadriplegia

The Permanent and entire paralysis of both legs and both arms.

Quarantine

A legal directive by a Medical Practitioner or relevant delegated government authority, enabled by an order, notice, regulation, statute or statutory instrument issued under national Government legislation, to enforce an Insured Person to be mandatorily quarantined or isolated. The directive must always require the Insured Person to stay at the place of quarantine or isolation until the expiry of the period of confinement for the individual detailed within the directive and state that the Insured Person may face legal consequences for noncompliance.

Relative

The Insured Person's or Partner's aunt, brother, child, grandchild, grandparent, nephew, niece, parent, Partner, sister or uncle.

Rental Vehicle

A four-wheeled motor vehicle designed to run primarily on roads for passenger transportation which must be rented or hired from a licensed motor vehicle rental company for the sole purpose of carrying the Insured Person and his/her travelling companions.

Scheduled Aircraft

An aircraft that holds a valid certification from the civil aviation authority to carry passengers and that flies on a regular published schedule.

Serious Injury or Serious Illness

When applied to the Insured Person, it shall mean that the Insured Person consults a Medical Practitioner for an Injury or Sickness and which results in the Insured Person being certified by the Medical Practitioner as being unfit to travel or continue with his/her original Business Trip. When applied to the Relative, it shall mean that the Relative is Hospitalised due to a Bodily Injury or Sickness and is certified by the attending Medical Practitioner that his/her life is in imminent danger resulting in the Insured Person's discontinuation of his/her original Business Trip.

Sexual Assault

Any involuntary sexual act in which a person is coerced or physically forced to engage against his/her will. Verification of Sexual Assault requires: (1) a police report and (2) Hospital documentation.

Sickness

An illness, disease or other physical conditions characterised by a pathological deviation from the normal healthy state. For the avoidance of doubt, Sickness includes but not limited to infectious diseases, heatstroke, decompression sickness, hypothermia and mountain sickness.

Strike

A lockout or total or partial work stoppage to enforce demands made on an employer or to protest against an act or condition.

Sum Insured

The amount payable for a Benefit as shown on the Policy Schedule or as otherwise specified in this Policy.

Telemedicine

The use of telecommunications technology (e.g. video calls, telephone calls) to obtain medical services from a Medical Practitioner remotely.

Terrorism

Any actual or threatened use of force or violence, of any person or group(s) of persons, whether acting alone or on behalf of or in connection with any organisation(s), directed at or causing damage, injury, harm or disruption, or committing of an act dangerous to human life or property, against any individual, property or government, with the stated or unstated objective of pursuing economic,

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ethnic, nationalistic, political, racial or religious interests, whether such interests are declared or not. The act must be verified or recognised by the relevant government as an act of terrorism.

Third Degree Burns

Full thickness burns which result in the destruction of both the epidermis (the outer layers of the skin) and dermis (the layers of the skin that contain hair follicles, nerve endings, sweat and sebaceous glands), that can also affect deeper tissues, as diagnosed by a Medical Practitioner. These burns usually require surgery or skin grafting. An assessment of the percentage of body affected by these burns will be determined by a Medical Practitioner using the Rules of Nines System or its equivalent medical assessment tool that is recognised by local authority.

Thumb

The first digit of the hand.

Toe

The digit of the foot.

Total Loss

The Permanent total and irrecoverable loss of use or Permanent loss by physical severance (separation).

a. In the case of a loss of a leg or lower Limb

   i. Loss by Permanent physical severance at or above the ankle; or

   ii Permanent, total and irrecoverable loss of use of a complete leg or Foot.

b. In the case of a loss of an arm or upper limb

   i. Loss by Permanent physical severance of the four (4) Fingers at or above the metacarpophalangeal joints (where the Fingers join the palm of the hand); or

   ii. Permanent, total and irrecoverable loss of use of a complete arm or Hand.

c. In the case of a loss of Thumb, Finger, Big Toe or Toe

   i. Loss by Permanent physical severance of the entire Thumb, Finger, Big Toe or Toe; or

   ii. Permanent, total and irrecoverable loss of use of a complete Finger or Toe.

d. In the case of loss of sight

   i. Permanent, total and irrecoverable physical loss of one (1) or both eyes or Total Blindness in one (1) or both eyes. The Company will consider Total Blindness in one (1) or both eyes if confirmed by a certified ophthalmologist. For the purpose of this definition, Total Blindness means a person cannot see anything, including light.

e. In the case of loss of speech

   i. Permanent, total and irrecoverable loss of speech resulting in the ability to articulate any three (3) of the four (4) sounds which contribute to speech such as the labial sounds, the alveololabial sounds, the palatal sounds and the velar sounds; or

   ii. Total Loss of vocal cord; or

   iii. damage of speech centre in the brain resulting in aphasia.

f. In the case of loss of hearing

   i. Permanent, total and irrecoverable loss of hearing resulting in inability of the Insured Person to hear sounds quieter than ninety (90) decibels across frequencies between five hundred (500) Hz and three thousand (3,000) Hz when tested by a qualified audiologist.

Travel Arrangements

Travel and/or accommodation arrangements made for the Insured Person's Business Trip. Travel Arrangements will not include any registration fees, credit or debit card fees or any insurance premiums.

Travel Documents

Passports, required travel visas or other essential travel documents.

Triplegia

The Permanent, total and irrecoverable paralysis of:

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a. both legs below the hip and one (1) arm below the shoulder; or

b. both arms below the shoulder and one (1) leg below the hip.

Valid Claim

Any claim under this Policy which, according to the terms of the Policy, the Policyholder or Insured Person is entitled to receive a payment from the Company.

War

Declared or undeclared hostile action between two (2) or more nations or states.

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Core Module

The Policyholder or Insured Person must refer to the Policy Schedule for applicable Benefits to their Policy as not all the Benefits listed below will apply to their Policy or a particular Insured Person.

1. Accidental Death and Permanent Disabilities

1.1 Accidental Death and Permanent Disabilities Benefit

If, while on a Business Trip, an Insured Person sustains a Bodily Injury that directly results in one (1) of the events listed in the Schedule of Events below, within twelve (12) months from the date of Accident, the Company will pay the Sum Insured as specified in the Policy Schedule subject to the applicable percentage as set out in the Schedule of Events.

Schedule of Events

No.	Event	Percentage of Sum Insured payable per Insured Person as specified in the Policy Schedule
1	Accidental Death (see Note 1 below)	100%
2	Permanent Total Disablement	100%
3	Permanent Total Disablement due to Paraplegia or Quadriplegia	100%
4	Permanent Total Disablement due to Hemiplegia or Triplegia	100%
5	Permanent Total Loss of sight of both eyes	100%
6	Permanent Total Loss of sight of one eye	100%
7	Permanent Total Loss of two Limbs	100%
8	Permanent Total Loss of use of two Limbs	100%
9	Permanent Total Loss of one Limb	100%
10	Permanent Total Loss of use of one Limb	100%
11	Permanent Total Loss of the lenses of both eyes	100%
12	Permanent Total Loss of the lens of one eye	50%
13	Permanent Total Loss of hearing in both ears	75%
14	Permanent Total Loss of hearing in one ear	15%
15	Third degree burns and/or resultant disfigurement which extend to cover more than 40% of the entire external body	50%
16	Permanent Total Loss of use of four Fingers and Thumb of either Hand	70%
17	Permanent Total Loss of use of four Fingers of either Hand	40%
18	Permanent Total Loss of use of one Thumb of either Hand – both joints	30%
19	Permanent Total Loss of use of one Thumb of either Hand – one joint	15%
20	Permanent Total Loss of use of Fingers of either Hand – three joints	10%
21	Permanent Total Loss of use of Fingers of either Hand – two joints	7%
22	Permanent Total Loss of use of Fingers of either Hand – one joint	5%
23	Permanent Total Loss of use of Toes of either Foot – all Toes	15%
24	Permanent Total Loss of use of Toes of either Foot – both joints of big Toe	5%
25	Permanent Total Loss of use of Toes of either Foot – one joint of big Toe	3%
26	Permanent Total Loss of use of Toes of either Foot – any Toes other than big Toe	1%

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27	Loss of at least 50% of sound and natural teeth and capped or crowned teeth but excluding first teeth and dentures	$250 per tooth, up to a maximum of $8,000
28	Permanent shortening of the leg by at least 5 cm	10%
29	Permanent Partial Disablement not otherwise provided for under Events 2 to 28 above	Such percentage of the sum insured payable which the Company has absolute discretion in determining and in its opinion is consistent with the Sum Insured provided under abovementioned 'Events'. The maximum amount payable under Event 29 will be 75% of the applicable Sum Insured shown on the Policy Schedule.

Specific Conditions applicable to 'Accidental Death and Permanent Disabilities Benefit' – In addition to this Policy's General Policy Conditions

1 If an Insured Person has an existing physical impairment or existing medical condition prior to the date of the Accident the calculation of the Sum Insured payable for Events 2 to 29 of the Schedule of Events will be based on the difference between the Insured Person's physical impairment or medical cndition before and after the covered Accident. The Company has absolute discretion in determining Sum Insured payable in the event the Insured Person has an existing physical impairment.

2 Any medical assessment required for the purpose of adjudicating a claim under this Benefit will be made, at the Company's sole discretion, by either the Insured Person's Medical Practitioner or an Independent Medical Practitioner as nominated and selected by the Company. The Company may decide to use more than one (1) independent Medical Practitioner and shall use the medical reports they provide to determine the percentage to be applied to the Sum Insured shown on the Policy Schedule.

3 The degree of disability under Event 29 of the Schedule of Events shall be as certified by a Medical Practitioner. The Company has the discretion to appoint an independent Medical Practitioner to conduct an assessment.

4 The Company will reduce any Sum Insured due for Accidental death under Event 1 of the Schedule of Events by any payment which the Company had already made to the Insured Person for:

a. Any Permanent Disability under the Schedule of Events for the same Accident; and

b. Any event under the Table of Burns, Table of Facial Scars and Table of Fractures.

5 Limitation on multiple Benefits: If an Insured Person sustains one (1) or more Bodily Injuries from the same Accident for which amounts are payable under more than one (1) of the events as listed in the above Schedule of Events under 'Accidental Death and Permanent Disabilities Benefit', the maximum amount payable under all of the events combined will not exceed 100% of the Sum Insured as shown on the Policy Schedule.

6 If a claim or series of claims from one (1) Accident exceeds the Aggregate Limit shown on the Policy Schedule or Endorsements during any one (1) Period of Insurance, the Company will pay the limit shown on the Policy Schedule or Endorsements or reduce each payable claim proportionately until the combined total does not exceed the applicable limit shown on the Policy Schedule or Endorsements.

7 If an Insured Person sustains a Bodily Injury resulting in any one (1) of the above Events where the percentage of the Sum Insured is 100%, the Company will not be liable under the Policy for any subsequent Bodily Injury to that Insured Person. The Policy will continue as if this Benefit had been cancelled for that Insured Person.

1.2 Accident Survivor Living Benefits

a. Cosmetic Surgery

If, while on a Business Trip, an Insured Person sustains a Bodily Injury (excluding Bodily Injury resulting from a surgical procedure) that results in a Valid Claim under any of Events 2 to 7 or 9 in the Schedule of Events under 'Accidental Death and Permanent Disabilities Benefit', the Company will reimburse the costs for cosmetic reconstructive treatment for Bodily Injury prescribed by a Medical Practitioner incurred within twelve (12) months from the date of Accident up to the Sum Insured specified in the Policy Schedule for any one (1) Accident.

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b. Prosthesis

If, while on a Business Trip, an Insured Person sustains a Bodily Injury that results in a Valid Claim under either Event 7 or 9 in the Schedule of Events under 'Accidental Death and Permanent Disabilities Benefit', the Company will pay the costs of providing prosthesis prescribed by a Medical Practitioner incurred within twelve (12) months of an Accident up to the Sum Insured specified in the Policy Schedule for any one (1) Accident.

c. Psychological Assistance

If, while on a Business Trip, an Insured Person sustains a Bodily Injury that results in a Valid Claim under any event with percentage payable exceeding 50% in the Schedule of Events under 'Accidental Death and Permanent Disabilities Benefit', the Company will pay the cost of professional psychological counselling treatment (including medication) prescribed by a Medical Practitioner that is incurred within twelve (12) months from the date of Accident, up to the Sum Insured specified in the Policy Schedule for any one (1) Accident.

d. Wheelchair Benefit

If, while on a Business Trip, an Insured Person sustains a Bodily Injury that results in a Valid Claim under any of Events 2 to 4, 7 or 8 of the Schedule of Events under 'Accidental Death and Permanent Disabilities Benefit', the Company will reimburse the cost of purchasing a wheelchair prescribed by a Medical Practitioner that is incurred within twelve (12) months from the date of Accident, up to the Sum Insured specified in the Policy Schedule for any one (1) Accident.

Loss of mobility must be solely and directly caused by an Accident, and this Benefit will not be payable if the Insured Person required usage of a wheelchair prior to Accident.

e. Domestic Help

If, while on a Business Trip, an Insured Person sustains a Bodily Injury that results in a Valid Claim under any of Events 2 - 29 of the Schedule of Events under 'Accidental Death and Permanent Disabilities Benefit', the Company will pay the reasonable and necessary expenses incurred within twelve (12) months from the date of Accident up to the Sum Insured specified in the Policy Schedule for any one (1) Accident:

i. to hire an external service for in-home domestic services while recovery is in progress; and/or

ii. to hire a chauffeur service to and from the Insured Person's usual place of work if the Insured Person is medically certified as being unable to drive a vehicle or travel on public transport.

f. Home and Car Alteration

If, while on a Business Trip, an Insured Person sustains a Bodily Injury that results in a Valid Claim under any of Events 3 - 10 of the Schedule of Events under 'Accidental Death and Permanent Disabilities Benefit', the Company will pay the reasonable and necessary expenses up to the Sum Insured specified in the Policy Schedule for any one (1) Accident for the physical alterations required to be done at the Insured Person's usual residence and/or private car because of his/her disability. The Company must provide written approval and consent to reasonable expenses prior to claim being paid, and the request for alteration must be received by the Company within twelve (12) months from the date of Accident.

g. Hospital Visitor Expense

If, while on a Business Trip, an Insured Person sustains a Bodily Injury that results in a Valid Claim under the Schedule of Events under 'Accidental Death and Permanent Disabilities Benefit' and the Insured Person is admitted as an Inpatient to a Hospital, the Company will reimburse the transportation costs of a visitor to the Hospital. This benefit is payable for one (1) admission period only per event and must be incurred during the twelve (12) months period immediately following the date of Accident. The amount payable shall not exceed the daily/maximum Sum Insured specified in the Policy Schedule for any one (1) Hospital Admission.

h. Comatose State

If, while on a Business Trip, an Insured Person sustains a Bodily Injury that results in a Comatose State for a minimum period of three (3) days and is admitted as an Inpatient to a Hospital, the Company will pay a daily benefit for the period the Insured Person remains in this state. This daily benefit is payable in the twelve (12) months period immediately following the date of Accident and shall not exceed the daily/maximum Sum Insured specified in the Policy Schedule for any one (1) Accident.

i. Burns

If, while on a Business Trip, an Insured Person sustains a Bodily Injury resulting in one (1) of the events listed in the Table of Burns below, the Company will pay the Sum Insured as specified in the Policy Schedule subject to the applicable percentage as set out in the table.

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Table of Burns	
Third Degree Burns Benefit	Percentage Payable
Third Degree Burns covering more than 27% but less than 40% of the body surface	100%
Third Degree Burns covering between 18% and up to 27% of the body surface	50%
Third Degree Burns covering between 9% and up to 18% of the body surface	25%

Specific Condition applicable to 'Burns' Benefit– In addition to this Policy's General Policy Conditions

An assessment of the percentage of body affected by burns will be determined by a Medical Practitioner using the Rules of Nines System or its equivalent medical assessment tool that is recognised by local authority.

j. Facial Scarring

If, while on a Business Trip, an Insured Person sustains a Bodily Injury resulting in one (1) of the events listed in the Table of Facial Scars below as confirmed by a Medical Practitioner, the Company will pay the Sum Insured as specified on the Policy Schedule subject to the applicable percentage as set out in the table.

Table of Facial Scars	
Facial Scarring Benefit	Percentage Payable
Permanent Facial Scar that is over 5 centimetres in length or square centimetres in area	100%
Permanent Facial Scar that is 2.5 to 5 centimetres in length or square centimetres in area	50%

k. Fractures

If, while on a Business Trip, an Insured Person sustains a Bodily Injury resulting in one (1) of the events listed in the Table of Fractures below as confirmed by a Medical Practitioner, the Company will pay the Sum Insured as specified on the Policy Schedule subject to the applicable percentage as set out in the table.

Table of Fractures	
Fracture Benefit	Percentage Payable
Fracture of neck or spine	100%
Fracture of hip or pelvis	80%
Fracture of skull (excluding jaw or nose) or shoulder blade	30%
Fracture of collar bone or upper or lower leg	30%
Fracture of upper arm, kneecap, forearm or elbow	15%
Fracture of jaw, wrist (excluding Colles' fracture), cheek, ankle, Hand or Foot	10%
Fracture of ribs (per rib)	10%
Fracture of Finger, Thumb, Toe (per Finger, Thumb, Toe)	3%
Maximum Compensation for Fracture Benefits with any one (1) Accident limit	100%

Specific Condition applicable to 'Fractures' Benefit – In addition to this Policy's General Policy Conditions

For those Insured Persons who were diagnosed with osteoporosis prior to the date of the Accident or as the result of the Accident, the Fracture Benefit will only be payable once during the lifetime of this Policy.

l. Sexual/Felonious Assault Psychological Therapy

If, while on a Business Trip, an Insured Person suffers psychological trauma as diagnosed by a Medical Practitioner as a result of being a victim of Sexual Assault or Felonious Assault or witness to a murder, violent armed robbery or an act of Terrorism, the Company will reimburse the Insured Person the Psychological Therapy Expenses (including medication) incurred within twelve (12) months of the reported incident. The maximum Sum Insured payable per session and in totality are as specified in the Policy Schedule.

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m. Sexual/Felonious Assault Hospital Visitor Benefit

If, while on a Business Trip, an Insured Person falls victim to Sexual Assault or Felonious Assault and is admitted to a Hospital or medical facility, the Company will pay the expenses incurred to bring one (1) person, as nominated by the Insured Person, to the area where the Hospital or medical facility is located. Expenses for the purpose of this Benefit shall include transportation, lodging and meals costs for up to seven (7) days. The maximum Sum Insured payable per day and in totality are as specified in the Policy Schedule.

n. Sexual/Felonious Assault Infectious Disease or Virus Testing

If, while on a Business Trip, an Insured Person falls victim to Sexual Assault or Felonious Assault and undergoes Infectious Disease Testing or Virus Testing within sixty (60) days from the date of the incident, the Company will reimburse the cost of the tests up to the maximum Sum Insured payable per test and in totality as specified in the Policy Schedule.

1.3 Family Care Benefits

a. Dependant Child Additional Payment

If, while on a Business Trip, an Insured Person sustains a Bodily Injury that directly results in a Valid Claim under Event 1 of the Schedule of Events under 'Accidental Death and Permanent Disabilities Benefit', the Company will pay an additional amount for each of his/her Dependant Child up to a maximum of five (5) Dependant Children as specified in the Policy Schedule.

Specific Condition applicable to 'Dependant Child Additional Payment' Benefit– in addition to this Policy's General Policy Conditions

Only one (1) claim is payable for the same event under:

a. this Benefit; or

b. 'Common Disaster Additional Payment' Benefit below.

b. Common Disaster Additional Payment

If, while on a Business Trip, an Insured Person and his/her Partner sustain Bodily Injuries that directly result in a Valid Claim under Event 1 of the Schedule of Events under 'Accidental Death and Permanent Disabilities Benefit', the Company will pay an additional amount for each of their Dependant Child up to a maximum of five (5) Dependant Children as specified in the Policy Schedule.

Specific Conditions applicable to 'Common Disaster Additional Payment' Benefit – in addition to this Policy's General Policy Conditions

i. Only one (1) claim is payable for the same event under:

a. this Benefit; or

b. 'Dependant Child Additional Payment' Benefit above.

ii. For this Benefit to be payable, both the Insured Person and his/her Partner must be the legal parents of the Dependant Child(ren).

c. Childcare Expenses

If, while on a Business Trip, an Insured Person sustains a Bodily Injury that directly results in a Valid Claim under Event 1 of the Schedule of Events under 'Accidental Death and Permanent Disabilities Benefit', the Company will pay the reasonable and necessary expenses incurred by the Legal Guardian, for each Dependant Child under the age of five (5) years, up to a maximum of five (5) Dependant Children who reside(s) with the Legal Guardian to attend an accredited childcare facility. These expenses must be incurred within the twelve (12) months period immediately following the date of Accident. The maximum Sum Insured payable per child and in totality are as specified in the Policy Schedule.

d. Tuition Benefit - Child

If, while on a Business Trip, an Insured Person sustains a Bodily Injury that directly results in a Valid Claim under Event 1 of the Schedule of Events under 'Accidental Death and Permanent Disabilities Benefit', the Company will pay an additional amount for each Dependant Child enrolled in a full-time institution for learning to cover the reasonable,

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actual education expenses up to a maximum of five (5) Dependant Children. These expenses must be incurred within the twelve (12) months period immediately following the date of Accident. The maximum Sum Insured payable per child and in totality are as specified in the Policy Schedule.

e. Elder Dependant

If, while on a Business Trip, an Insured Person sustains a Bodily Injury that directly results in a Valid Claim under Event 1 of the Schedule of Events under 'Accidental Death and Permanent Disabilities Benefit', the Company will pay an additional amount for each Elder Dependant of the Insured Person up to a maximum of four (4) Elder Dependants. These expenses must be incurred within the twelve (12) months period immediately following the date of Accident. The maximum Sum Insured payable per Elder Dependant and in totality are as specified in the Policy Schedule.

f. Tuition Benefit – Partner

If, while on a Business Trip, an Insured Person sustains a Bodily Injury that directly results in a Valid Claim under Event 1 of the Schedule of Events under 'Accidental Death and Permanent Disabilities Benefit', the Company will reimburse the reasonable, actual costs of education incurred by the Partner if he/she is already enrolled in an institution of higher education or professional or trade training, or enrolls within four (4) months of the date of the Accidental death of the Insured Person. The maximum Sum Insured payable per year is as specified in the Policy Schedule and is payable for up to two (2) years in total.

g. Executor Expenses

If, while on a Business Trip, an Insured Person and his/her Partner sustain Bodily Injuries that directly result in a Valid Claim under Event 1 of the Schedule of Events under 'Accidental Death and Permanent Disabilities Benefit', the Company will reimburse the reasonable and necessary administrative costs incurred by the executor of the estate of the Insured Person whilst the administration of the estate including Policy payment is being carried out. These expenses must be incurred within the twelve (12) months period immediately following the date of Accident. The maximum Sum Insured payable is as specified in the Policy Schedule.

1.4 Partner/Dependant Child Benefits

a. Partner/Dependant Child Paralysis

If, while on a Business Trip, an Insured Person is accompanied by his/her Partner and/or Dependant Child and either Partner and/or Dependant Child sustains a Bodily Injury resulting in Paraplegia, Hemiplegia, Triplegia or Quadriplegia, the Company will pay the Sum Insured as specified in the Policy Schedule.

b. Independent Financial Advice

If, while on a Business Trip, an Insured Person sustains a Bodily Injury that directly results in a Valid Claim under Events 1 – 11 of the Schedule of Events under 'Accidental Death and Permanent Disabilities Benefit', the Company will reimburse the reasonable and necessary expenses incurred for the professional, financial, taxation and/or investment advice provided by a licensed and registered independent financial advisor in respect of the Benefit paid by the Company. These expenses must be incurred within the twelve (12) months period immediately following the date of Accident. The maximum Sum Insured payable is as specified in the Policy Schedule.

Specific Condition applicable to 'Independent Financial Advice' Benefit– In addition to this Policy's General Policy Conditions

The Independent Financial Advisor cannot be:

i. the Policyholder or an Insured Person;

ii. a Business Partner, C-Level Management or agent with any relation to the Policyholder or Insured Person; or

iii. a Relative of the Policyholder or Insured Person.

c. Retraining Expenses - Partner

If, while on a Business Trip, an Insured Person sustains a Bodily Injury that directly results in a Valid Claim under Events 2 - 4 of the Schedule of Events under 'Accidental Death and Permanent Disabilities Benefit', the Company will reimburse, at the Policyholder's request, up to the maximum Sum Insured as specified in the Policy Schedule the actual expenses incurred for the training or retraining of the Insured Person's Partner for gainful employment or to improve his/her employment prospects or to enable him/her to improve the quality of care he/she can provide for the Insured Person. These expenses must be incurred within the twelve (12) months period immediately following the date

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of Accident.

1.5 Workplace Changes or Alteration Costs

a. Temporary Personnel Replacement Costs

If, while on a Business Trip, an Insured Person sustains a Bodily Injury that directly results in a Valid Claim under Events 1 - 4 of the Schedule of Events under 'Accidental Death and Permanent Disabilities Benefit' the Company will reimburse up to the maximum Sum Insured as specified in the Policy Schedule, the actual reasonable costs incurred by the Policyholder to employ a person on a temporary basis to directly replace the Business Partner, C-Level Management or Employee. These expenses must be incurred within the three (3) months period immediately following the date of Accident.

b. Recruitment Costs

If, while on a Business Trip, an Insured Person sustains a Bodily Injury that directly results in a Valid Claim under Events 1 - 4 of the Schedule of Events under 'Accidental Death and Permanent Disabilities Benefit', the Company will reimburse up to the maximum Sum Insured as specified in the Policy Schedule, the actual reasonable costs incurred by the Policyholder for the recruitment of an employee to replace the Insured Person on a permanent basis. Such costs must be incurred within the six (6) months period immediately following the date of claim payment.

Specific Condition applicable to 'Recruitment Costs' Benefit – In addition to this Policy's General Policy Conditions

Only one (1) claim is payable for the same event under:

i. this Benefit; or

ii. 'Re-Training Costs' Benefit.

c. Re-Training Costs

If, while on a Business Trip, an Insured Person sustains a Bodily Injury that directly results in a Valid Claim under Events 5 - 14 of the Schedule of Events under 'Accidental Death and Permanent Disabilities Benefit', the Company will reimburse up to the maximum Sum Insured as specified in the Policy Schedule, the reasonable and necessary expenses incurred in re-training the said Insured Person for an alternative occupation. These expenses must be incurred within the twelve (12) months period immediately following the date of claim payment.

Specific Condition applicable to 'Re-Training Costs' Benefit – In addition to this Policy's General Policy Conditions

Only one (1) claim is payable for the same event under:

i. this Benefit; or

ii. 'Recruitment Costs' Benefit.

d. Workplace Alteration Costs

If, while on a Business Trip, an Insured Person sustains a Bodily Injury that directly results in a Valid Claim under Events 5 - 29 of the Schedule of Events under 'Accidental Death and Permanent Disabilities Benefit', the Company will reimburse, up to the maximum Sum Insured as specified in the Policy Schedule, the actual reasonable and necessary expenses incurred, to make alterations to the Insured Person's normal place of business/work to accommodate the physical changes necessarily required in living with the permanent disablement. These expenses must be incurred within the twelve (12) months period immediately following the date of claim payment.

Specific Condition applicable to Benefits under 'Workplace Changes or Alteration Costs' of Core Module – In addition to this Policy's General Policy Conditions

Recruitment Costs' Benefit, 'Re-Training Costs' Benefit and 'Workplace Alteration Costs' Benefit must be reasonable, necessary, documented and agreed in writing by the Company before they are incurred.

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2. Medical Expenses

2.1 Medical Expenses Benefit

If, while on a Business Trip, an Insured Person sustains a Bodily Injury or suffers Sickness , the Company will reimburse, up to the Sum Insured specified in the Policy Schedule, any Medical Expenses incurred (including the cost of consultation and medication for treatment obtained via Telemedicine) in the Geographical Area in which the Insured Person is travelling within twelve (12) months from the date of Accident or Sickness diagnosed during the Business Trip.

2.2 Hospitalisation Benefit

If, while on a Business Trip, an Insured Person sustains a Bodily Injury or Sickness resulting in Hospitalisation, the Company will pay a Sum Insured as specified in the Policy Schedule for each day he/she is Hospitalised as an Inpatient outside his/her Country of Residence up to the maximum Sum Insured as specified in the Policy Schedule and for up to the twelve (12) months period immediately following the date of Bodily Injury or Sickness.

An additional amount, as specified in the Policy Schedule, is payable per day if the Insured Person is an Inpatient on a public holiday in the country of Hospitalisation.

2.3 Post-Hospitalisation Convalescence

If, following a period of stay as an Inpatient at a Hospital where 'Hospitalisation Benefit' is payable, and an Insured Person is advised by a Medical Practitioner to further convalesce prior to continuing the Business Trip, the Company will pay a Sum Insured as specified in the Policy Schedule for each day up to a maximum of thirty (30) days.

2.4 Post-Journey Medical Expenses

The Company will reimburse Medical Expenses incurred for treatment or follow-up treatments in Country of Residence after the Business Trip for Bodily Injury or Sickness diagnosed while on the Business Trip, up to the Sum Insured shown on the Policy Schedule or the maximum Benefit period, whichever occurs first. The time limits from date of return from the Business Trip for seeking such medical treatment is as follows:

i. Three (3) consecutive months from date of return from the Business Trip if prior treatment had already been sought during the Business Trip; or

ii. Two (2) consecutive months from date of return from the Business Trip if prior treatment had not been sought during the Business Trip, provided the first treatment is sought within seven (7) days immediately following the date of return from the Business Trip.

2.5 Infectious Disease Additional Benefit

If, while on a Business Trip, an Insured Person contracts an Infectious Disease and is Hospitalised as an Inpatient whilst Overseas for at least fourteen (14) consecutive days, the Company will pay the Sum Insured as specified in the Policy to assist the Insured Person financially.

2.6 Psychological Support due to Contraction of Infectious Disease

If, while on a Business Trip, an Insured Person contracts an Infectious Disease and is Hospitalised as an Inpatient whilst Overseas for at least fourteen (14) consecutive days and suffers from psychological trauma directly contributed by his/her Hospitalisation, the Company will reimburse the actual Psychological Therapy Expenses (including medication) to attend mental health or psychological counselling sessions provided that the first counselling session commences within six (6) months from the date of discharge from Hospital. These expenses must be incurred within the six (6) months period immediately following the date of first session of Psychological Therapy treatment. The maximum Sum Insured payable per session and in totality are as specified in the Policy Schedule.

Specific Conditions applicable to Benefits under 'Medical Expenses' of Core Module – In addition to this Policy's General Policy Conditions

a. In the event the Policyholder or an Insured Person becomes entitled to a refund or reimbursement of all or part of Medical Expenses from any other source, including but not limited to any other insurance, the Company will only pay for the amount not recoverable from such other source or insurance.

b. Telemedicine services must be sought from Medical Practitioners who are: (i) in the same locality / country that the Insured Person is in at the time of seeking consultation; and (ii) registered and licensed with the applicable regulatory and licensing bodies in that locality / country to be providing Telemedicine services.

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c. The Policyholder or an Insured Person must contact AIG Travel Protect as soon as possible in respect of Bodily Injury or Sickness that results in the need for Inpatient Hospital treatment. Emergency Helpline: +65 6419 3002 (24 hours).

Specific Exclusions applicable to Benefits under 'Medical Expenses' of Core Module – In addition to this Policy's General Policy Exclusions

The Company will not pay under these Benefits any claim arising from, resulting in or in connection with:

a. mental, psychiatric or nervous disorder (including any neuroses and their physiological or psychosomatic manifestations), sleep disturbance disorder, alcoholism, Intoxicating Substance or drug addition, anxiety, stress or depression. For avoidance of doubt, this exclusion does not apply to the 'Psychological Support due to contraction of Infectious Disease' Benefit;

b. miscarriage (except Accidental miscarriage if available in this Policy and not attributed to any natural causes and/or Sickness), abortion, sterilisation, contraception as well as treatment for infertility or birth control treatments or any complications;

c. any injuries to teeth occurring during eating activities (e.g.biting and chewing), unsound and/or unnatural teeth;

d. expenses incurred for continuing treatment including any medication commenced prior to the Business Trip that Insured Person had been advised to continue during his/her Business Trip by a Medical Practitioner;

e. any expenses incurred for non-medical incidental products or services including but not limited to newspapers, magazines, telephone, television and the like;

f. health advisory or travel related vaccinations and any resultant complications;

g. experimental, elective or investigative procedures;

h. any cosmetic surgery unless reconstructive surgery is required following a covered Bodily Injury suffered whilst on a Business Trip, and the Company agrees it is Medically Necessary;

i. any expenses incurred from using a Hospital for addiction treatment or as a nursing, convalescent or rehabilitation place;

j. any health supplements including but not limited to vitamins, prebiotics, probiotics and skin care products whether prescribed by a Medical Practitioner or purchased over the counter.

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3. Emergency Medical Evacuation, Repatriation of Mortal Remains and other Emergency Travel Expenses

3.1 Emergency Medical Evacuation

If, while on a Business Trip, an Insured Person sustains Bodily Injury or suffers Sickness and it is in the opinion of the Company that it is medically appropriate to move an Insured Person to another location for medical treatment or return the Insured Person to the Country of Residence, AIG Travel Protect will arrange for the evacuation utilising the means best suited based on the medical severity of the Insured Person's condition. The Company will pay directly to AIG Travel Protect such expenses reasonably and necessarily incurred for such evacuation up to the maximum Sum Insured specified in the Policy Schedule.

3.2 Repatriation of Mortal Remains

If, while on a Business Trip, an Insured Person suffers a Bodily Injury or Sickness that directly results in his/her death, the Company shall reimburse the actual reasonable and necessary expenses to repatriate the Insured Person's mortal remains and personal effects to his/her Home Country or Country of Residence, including but not limited to services and supplies provided by a mortician or undertaker, cost of a basic casket, embalmment and cremation if so elected up to the maximum Sum Insured as specified in the Policy Schedule.

Such expenses must be pre-approved by the Company and arranged by AIG Travel Protect.

3.3 Funeral & Associated Expenses

If, while on a Business Trip, an Insured Person sustains a Bodily Injury or Sickness that directly results in death the Company will pay the Sum Insured as specified in the Policy Schedule for:

i. all reasonable funeral, burial or cremation associated expenses; and/or

ii. the reasonable costs of travel (ie economy airfare, rail or sea transport fare) and accommodation incurred by the Insured Person's travelling companions to accompany the remains to the Insured Person's Country of Residence, if applicable.

Such expenses must be pre-approved by the Company and arranged by AIG Travel Protect.

3.4 Emergency Travel Expenses

If, while on a Business Trip, an Insured Person suffers a Bodily Injury or Sickness resulting in Hospitalisation as an Inpatient for more than five (5) consecutive days, the Company will reimburse the expenses below:

i. the additional reasonable and necessary travel (economy class where applicable) expenses; and

ii. the additional reasonable and necessary accommodation expenses (room charge only, including any mandatory taxes and charges); and

iii. telephone charges.

up to the maximum Sum Insured specified in the Policy Schedule and incurred by either:

a. the Insured Person's Partner and up to three (3) Dependant Children; or

b. two (2) other persons who are the Insured Person's Immediate Relatives;

who will attend to the Insured Person at the place the Insured Person is Hospitalised.

Such transportation and accommodation services must be pre-approved by the Company and arranged by AIG Travel Protect. This Benefit is only payable if the Company agrees that the Insured Person requires the travelling companion to assist with his/her nursing care or recovery, or to escort the Insured Person back to usual place of residence in Country of Residence.

In the event that only the Insured Person's Partner travels, the Company will pay for the necessary additional cost incurred to engage the services of a childcare provider for their Dependant Child(ren) during the period of visit.

Specific Conditions applicable to 'Emergency Medical Evacuation' Benefit, 'Repatriation of Mortal Remains' Benefit, 'Funeral & Associated Expenses' Benefit and 'Emergency Travel Expenses' Benefit - In addition to this Policy's General Policy Conditions

a. AIG Travel Protect must be immediately notified by calling the Emergency Hotline: +65 6419 3002 (24 hours).

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b. AIG Travel Protect will make the necessary arrangements for the Insured Person's emergency travel expenses where applicable, unless the Policyholder, the Insured Person and/or anyone undertaking arrangements on the Policyholder's or the Insured Person's behalf cannot for reasons beyond his/her control, notify AIG Travel Protect during an emergency situation. In such event, the Company reserves the right to reimburse the Insured Person only for those expenses incurred and services paid for which the Company would have approved AIG Travel Protect to provide under the same circumstances up to the maximum Sum Insured specified in the Policy Schedule.

c. In the event that an Insured Person is evacuated, or his/her mortal remains are repatriated to his/her Country of Residence, the Company will use the Insured Person's return air ticket to offset against the Company's costs.

3.5 Pet Care

If, while on a Business Trip, an Insured Person sustains Bodily Injury or suffers Sickness and is Hospitalised as an Inpatient and this results in his/her return trip being delayed for more than twenty-four (24) consecutive hours at the end of the original pre-booked Business Trip, the Company will reimburse up to the Sum Insured as specified in the Policy Schedule, the reasonable additional costs necessarily incurred for additional domestic cattery or kennel fees for pets owned by the Insured Person.

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4. Personal Liability

4.1 Personal Liability Benefit

If during the Business Trip, the Insured Person becomes legally liable to pay damages in respect of:

i. Bodily Injury caused to a third party; and/or

ii. Accidental Property Damage belonging to a third party;

the Company will reimburse the amount that the Insured Person is held legally liable for to the third party, up to the Sum Insured shown in the Policy Schedule.

In addition, and subject to the Sum Insured shown in the Policy Schedule, the Company will pay all costs and expenses incurred with its prior written consent in connection with the defence of claims against an Insured Person that are covered under this Benefit of the Policy.

4.2 Court Presence

If, the Insured Person is required to be present in court in connection with an event that resulted in a Valid Claim under 'Personal Liability Benefit' of the Policy, the Company will reimburse the Insured Person the additional travel and accommodation expenses reasonably and necessarily incurred up to the Sum Insured specified in the Policy Schedule.

Specific Condition applicable to 'Court Presence' Benefit In addition to this Policy's General Policy Conditions

Only one (1) claim is payable for the same event under:

i. this Benefit; or

ii. Court Attendance' Benefit under 'Legal Expenses' of Plus Module, if applicable.

Specific Definition applicable to Benefits under 'Personal Liability' of Core Module – In addition to this Policy's General Policy Definitions

Property Damage

Any physical damage to, destruction of, or loss of use of tangible property.

Specific Conditions applicable to Benefits under 'Personal Liability' of Core Module - In addition to this Policy's General Policy Conditions

1 No admission of liability, offer, promise or payment may be made without the Company's written consent.

2 The Company will, if the Company considers it necessary, take over and conduct the defence or settlement of any claim against the Insured Person and for that purpose may use the Insured Person's name. The Company may conduct the defence however it sees fit. In the course of conducting the defence, the Company may also pursue, at its own expense and for its own benefit, any claim against the other person(s).

3 The Policyholder and the Insured Person must give the Company full assistance in defending or prosecuting any claim and agree to provide the Company with any needed information and documents available.

4 The maximum Sum Insured the Company will reimburse is as shown on the Policy Schedule and is the highest limit of the Company's liability for an individual insurance event, even if it results in more than one (1) Bodily Injury loss or Accidental Property Damage to more than one (1) third party or if more than one (1) Insured Person could be held liable.

5 All costs and expenses must be incurred within twelve (12) months of date of event.

Specific Exclusions applicable to Benefits under 'Personal Liability' of Core Module - In addition to this Policy's General Policy Exclusions

The Company will not pay under these Benefits any claim arising from, resulting in or in connection with:

1 Bodily Injury or Accidental Property Damage claims arising out of or in the course of employment, contract of service or apprenticeship;

2 Bodily Injury or Accidental Property Damage claims of a co-worker or traveling companion of the Insured Person on the same

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trip;

3 liability arising directly or indirectly, by or through, or in connection with any mechanically or electrically propelled vehicle, aircraft, hovercraft or watercraft;

4 liability arising directly or indirectly, by or through, or in connection with any of the following:

i. the ownership or possession of land, buildings, immobile property or caravans of the Policyholder or an Insured Person;

ii. the Policyholder or Insured Persons' business or trade, or out of professional advice given by the Policyholder or Insured Person;

iii. the use of firearms (other than sporting guns being used for sport);

5 Accidental Property Damage to property belonging to, held in trust by, or in the custody or control of the Policyholder or an Insured Person or any of their Employees including domestic staff, or any member of the Insured Person's family or household;

6 liability attaching to the Policyholder or an Insured Person under an express term of any contract, unless liability would have been attached to the Policyholder or Insured Person irrespective of the express term;

7 liability for which payment should be more specifically claimed under any other insurance policy in the name of the Policyholder or the Insured Person;

8 any claim where the Insured Person is suffering from a psychological condition or which results from him/her being under the influence of or affected by alcohol, drugs or other Intoxicating Substance(s) unless the drug or Intoxicating Substance(s) was prescribed or administered by a Medical Practitioner and taken in accordance with the directions of a Medical Practitioner;

9 any claim resulting from or as a consequence of the Insured Person having transmitted a disease to another person via infection or otherwise;

10 Accidental Property Damage to property owned by or in control of the Insured Person or any member of his/her family ordinarily residing with him/her or loss or damage caused by the Insured Person's domestic animals;

11 Bodily Injury to Immediate Relatives ordinarily residing with the Insured Person;

12 any claim for exemplary, punitive or aggravated damages;

13 judgements which are not in the first instance either delivered by or obtained from a court of competent jurisdiction within the Insured Person's or Policyholder's country of residence or the country in which the event occurred giving rise to the Policyholder's or the Insured Person's Liability.

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5. Trip Cancellation

If an Insured Person has to cancel a Business Trip prior to his/her departure the Company will reimburse any non-recoverable, non-refundable deposits and advanced payments for the Travel Arrangements which have been paid, or are payable under contract, and cannot be recovered elsewhere, up to the maximum Sum Insured specified in the Policy Schedule provided such cancellation is necessitated by and is unavoidable due to any of the following events occurring within thirty (30) days before the commencement of the Business Trip, except as specifically stated below:

a. injury or Sickness of the Insured Person or Insured Person's Relative if a Medical Practitioner has recommended in writing that a Trip Cancellation is necessary due to the severity of the condition;

b. death of the Insured Person or Insured Person's Relative if the death has been certified by a Medical Practitioner or other person legally qualified to certify a person's death. Death of the Insured Person's Relative must occur within thirty (30) days prior to scheduled Departure of the Insured Person's Business Trip and where required by the Company, a death certificate is to be provided;

c. unexpected outbreak of Strike, riot or Civil Commotion, Terrorism or Natural Catastrophe arising out of circumstances beyond the control of the Policyholder or Insured Person at the planned destination; and provided there was no prior warning at the time the Business Trip was booked that such events were likely to occur;

d. serious damage to the Insured Person's usual place of residence in Country of Residence from fire, flood or Natural Catastrophe within seven (7) days before the Business Trip's Departure, which requires the Insured Person's presence on the premises on the Departure date; or

e. any other unforeseen circumstance occurring outside the control of the Policyholder or the Insured Person, other than those circumstances described in a, b, c or d above or specifically described elsewhere in this Policy.

Specific Conditions applicable to 'Trip Cancellation' Benefit - In addition to this Policy's General Policy Conditions

1 In the event of a claim, the Policyholder or Insured Person must surrender to the Company any unused tickets, vouchers, coupons, credit statements, refund statements or travel privileges upon the Company's request.

2 The Policyholder or Insured Person must provide evidence of receipts and confirmation of the cancellation and/or changes to the itinerary from the Public Conveyance operator(s) and /or Service Provider who made the Travel Arrangements, otherwise the claim may not be paid in part or in full.

Specific Exclusions applicable to 'Trip Cancellation' Benefit - In addition to this Policy's General Policy Exclusions

The Company will not pay under this Benefit any claim arising from, resulting in or in conjunction with:

1 retrenchment of an Insured Person or the termination of an Insured Person's contract of employment within thirty (30) days prior to scheduled Departure;

2 the Policyholder's or an Insured Person's business, contractual or financial circumstances;

3 the financial default of or inability to provide service by any provider of Conveyance or accommodation (or their agent) acting for the Policyholder or the Insured Person;

4 any loss that is covered by any other existing insurance scheme or government programme, or which will be paid or refunded by a hotel, airline, travel agent or any other provider of travel and/or accommodation;

5 a claim that is recoverable under any other Benefit in this Policy;

6 any disinclination of the Insured Person to travel on the Business Trip;

7 any trip cancellation due to the following:

i. epidemic or pandemic related travel advisories issued by governments, health authorities or the World Health Organisation, by or for the destination country or Country of Residence; or

ii. travel restrictions (including quarantine requirements) due to government orders, travel advisories by government against all but essential travel (or similar or higher-level advice) to a destination, regulations, directives, or border closures, where such advice or warning was issued by or for the destination country or Country of Residence, prior to the booking and payment for the Business Trip.

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6. Travel Curtailment, Rearrangement or Replacement

6.1 Travel Curtailment or Rearrangement

If, while on a Business Trip, an Insured Person has to curtail or re-arrange pre-booked Travel Arrangements, the Company will reimburse the unused, irrecoverable and non-refundable prepaid payments and/or additional costs of travel and accommodation that are reasonably and necessarily incurred up to the maximum Sum Insured shown in the Policy Schedule for the curtailment or rearrangement of the Business Trip to enable the Insured Person to return to his/her Country of Residence or continue on the Business Trip if the curtailment or rearrangement is due to any of the events mentioned below:

i. injury or Sickness of the Insured Person or Insured Person's Relative if a Medical Practitioner has recommended in writing that a Trip Cancellation is necessary due to the severity of the condition;

ii. death of the Insured Person or Insured Person's Relative if the death has been certified by a Medical Practitioner or other person legally qualified to certify a person's death. Death of the Insured Person's Relative must occur within thirty (30) days prior to scheduled Departure of the Insured Person's Business Trip and where required by the Company, a death certificate is to be provided;

iii. any Natural Catastrophe which prevents the Insured Person from continuing with his/her scheduled Business Trip;

iv. unexpected outbreak of Strike, riot or Civil Commotion and Terrorism arising out of circumstances beyond the control of the Policyholder or Insured Person; or

v. any other unforeseen circumstances occurring outside the control of the Policyholder or the Insured Person, other than those circumstances described in i., ii., iii. or iv. above or specifically described in this Policy.

6.2 Travel Replacement

If, while on a Business Trip, an Insured Person has to curtail/cut short his/her trip to return to his/her Country of Residence and the Policyholder has to send a replacement Employee on a Business Trip to assume the duties of that Insured Person, the Company will reimburse the Policyholder for any reasonable and necessary additional costs incurred to send the replacement Employee up to Sum Insured as shown in the Policy Schedule less any refunds or credits from previous paid amounts or amounts recoverable elsewhere.

Specific Conditions applicable to Benefits under 'Travel Curtailment, Rearrangement or Replacement' of Core Module - In addition to this Policy's General Policy Conditions

1 The Policyholder or Insured Person must notify the Company as soon as reasonably possible in the event of a claim. The Company will not be liable for any additional penalty charges incurred that would not have been imposed had notice been provided as soon as reasonably possible.

2 In the event of a claim, the Policyholder or Insured Person must surrender to the Company any unused tickets, vouchers, coupons, credit statements, refund statements or travel privileges upon the Company's request.

3 If Insured Person does not hold a return ticket, the Company will deduct from the reimbursement an amount equal to that paid for Insured Person's outward trip from his/her Country of Residence for his/her return trip back to Country of Residence based on the same class of travel as the outward trip. The cost of the return ticket is calculated at the time the Insured Person is required to return back to Country of Residence.

4 The Company will only pay once for the same period of time and reason. For example, if a Valid Claim includes reimbursement of both forfeited accommodation and additional accommodation charges for the same nights, the Company will deduct from the additional charges what is claimed for the forfeited nights. Likewise, in relation to additional covered transport charges, the Company will deduct claimed forfeited transportation costs for the return journey of the Business Trip.

5 The Policyholder or Insured Person must provide evidence of receipts and/or confirmation of the changes to Business Trip itinerary from the Conveyance operator(s) and/or the Service Provider who made the Travel Arrangements; otherwise, the claim may not be paid in part or in full.

Specific Exclusions applicable to Benefits under 'Travel Curtailment, Rearrangement or Replacement' of Core Module - In addition to this Policy's General Policy Exclusions

The Company will not pay under these Benefits any claim arising from, resulting in or in conjunction with:

1. the Policyholder's or an Insured Person's business, financial or contractual circumstances;
2. the financial default of or inability to provide service by any provider of Conveyance or accommodation (or their agent) acting

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for the Policyholder or an Insured Person;

3. curtailment, rearrangement or replacement due to the following:

   i. epidemic or pandemic related travel advisories issued by governments, health authorities or the World Health Organisation, by or for the destination country or Country of Residence;

   ii. travel restrictions (including quarantine requirements) due to government orders, advisories against all but essential travel (or similar or higher-level advice) to a destination, regulations, directives, or border closures, where such advice or warning was issued by or for the destination country or Country of Residence, prior to the booking and payment for the Business Trip;

4. a claim that is recoverable under any other Benefit in this Policy;

5. curtailment, rearrangement or replacement arising from the delayed Departure of a Conveyance due to Strike or industrial action which existed or for which warning was issued:

   a. prior to the booking or payment of the Business Trip; or

   b. after a Business Trip was booked and paid for and where alternative arrangements could have been reasonably made to avoid a claim;

6. disinclination of the Insured Person to continue travelling on a Business Trip;

7. curtailment, rearrangements necessary due to the missed departure of a connecting flight if the Insured Person's original ticketed connection time was either less than the official minimum connection time or at least three (3) consecutive hours, whichever is lesser;

8. the Insured Person declining an alternative service provided by the Conveyance provider;

9. any rearrangement due to actions within the control of the Policyholder or Insured Person that resulted in missing a Conveyance connection or Departure;

10. any error or omission in the Insured Person's booking arrangements made by the Policyholder, Insured Person, Insured Person's travel agent or any other person acting on their behalf;

11. use of air miles, membership card points and/or credit card redemption points to pay for the Business Trip whether in part or in full.

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Plus Module

This module of the Policy only applies if it has been selected by the Policyholder and the appropriate premium paid.

1. Legal Expenses

a. Legal Expenses Benefit

The Company will reimburse up to the Sum Insured as specified in the Policy Schedule the Legal Expenses incurred by or on behalf of an Insured Person in pursuit of a claim for damages or compensation against a third party who has caused Accidental death, Bodily Injury or Sickness to the Insured Person while he/she was on a Business Trip.

In the event that the legal opinion (which determines whether the Company gives its consent to the commencement of legal proceedings) is that there is a reasonable prospect of success but the cost of pursuing a claim is likely to be more than the amount of damages or compensation that the Insured Person is likely to receive, the Company will pay the lesser of the anticipated amount of damages or compensation or the Sum Insured stated on the Policy Schedule.

b. Bail Bond

In the event that an Insured Person is placed or is threatened to be placed in detention by a government or local civil authority while on a Business Trip, the Company will provide the required bail bond, up to the Sum Insured specified in the Policy Schedule, subject to the Policyholder giving the Company a satisfactory financial guarantee to repay it.

Specific Conditions applicable to 'Bail Bond' Benefit - In addition to this Policy's General Policy Conditions

a. The Policyholder must contact AIG Travel Protect to arrange the bail bond.

b. The Policyholder must repay the amount loaned by the Company within three (3) months of the date of payment, or immediately upon repayment by the local authorities or if the bail bond is forfeited by failure of the Insured Person to appear in court.

Specific Exclusion applicable to 'Bail Bond' Benefit – In addition to this Policy's General Policy Exclusions

The Company will not pay under this Benefit any claim arising from, resulting in or in connection with a bail bond obtainable under another insurance programme.

c. Court Attendance

If, the Insured Person is required to attend court in connection with an event that resulted in a Valid Claim under 'Legal Expenses Benefit' of the Policy, the Company will reimburse the Insured Person the additional travel and accommodation expenses reasonably and necessarily incurred up to the Sum Insured specified in the Policy Schedule.

Specific Condition applicable to Court Attendance' Benefit – In addition to this Policy's General Policy Conditions

Only one (1) claim is payable for the same event under:

i. this Benefit; or

ii. 'Court Presence' Benefit under 'Personal Liability' of Core Module.

d. Legal Detention

if, during the Business Trip, the Insured Person is placed or is threatened to be placed in detention by a government or local civil authority, the Company will, at the request of the Policyholder, pay the costs, up to the Sum Insured as specified in the Policy Schedule, for a local Legal Representative** to defend the Insured Person.

**AIG Travel Protect can help with obtaining local legal representation. Emergency Helpline: +65 6419 3002 (24 hours).

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Specific Definitions applicable to Benefits under 'Legal Expenses' of Plus Module – In addition to this Policy's General Policy Definitions

Legal Expenses
The costs, fees, expenses and other amounts reasonably incurred by the Policyholder and/or Insured Person in connection with any claim or legal proceedings.

Legal Representative
A lawyer or other qualified person who is designated and authorised to act on behalf of and for the account of the Insured Person in accordance with the conditions of this Policy.

Preferred Law Firm
A law firm chosen by the Company to provide legal services. These legal specialists are chosen as they have the proven expertise to deal with the claim and they should comply with the Company's agreed service standard levels.

Specific Conditions applicable to Benefits under 'Legal Expenses' of Plus Module – In addition to this Policy's General Policy Conditions

1 The decision to grant consent will take into account the opinion of the Policyholder's appointed Legal Representative as well as that of the Company's own advisers. The Company may request, at an Insured Person's expense, an opinion from the Company's Preferred Law Firm as to the merits of the claim or legal proceedings. If the claim is admitted, an Insured Person's costs in obtaining this opinion will be covered under this Benefit.

2 Consent will be given if:

i. In the opinion of the Policyholder's appointed Legal Representative as well as that of the Company's own advisers, the claim has a reasonable prospect of success; and

ii. the cost in pursuing a claim is likely to be less than the amount of damages or compensation that the Insured Person is likely to receive.

3 If the Company does not give its consent, then the Company will only pay for the reasonable costs in obtaining the initial opinion of the Company's Preferred Law Firm upon the merits of pursuing a claim for damages or compensation.

4 All claims including any appeal against a judgment resulting from the same original cause, event, or circumstances, will be regarded as one (1) claim.

5 If following any successful claim or legal proceedings an award of costs is made in favour of the Insured Person or those acting on behalf of the Insured Person, any Legal Expenses paid by the Company will be reimbursed by the Insured Person or those acting on behalf of the Insured Person to the Company from the full amount of such costs awarded.

6 The Policyholder must consent for an Insured Person to make a claim under this Benefit.

7 For Legal Expenses, the Company will not pay more under this Policy than that it would have paid to a Preferred Law Firm.

Specific Exclusions applicable to Benefits under 'Legal Expenses' of Plus Module - In addition to this Policy's General Policy Exclusions

The Company will not pay under these Benefits any claim arising from, resulting in or in connection with:

1 Legal Expenses incurred in the defending of any civil claim or legal proceedings made or brought against the Insured Person;

2 fines or other penalties imposed by a court of criminal jurisdiction;

3 Legal Expenses incurred in connection with any criminal act committed by the Insured Person;

4 Legal Expenses incurred in pursuing any claim against any travel agent, tour operator, insurer or their agents;

5 any claim or circumstance notified more than one (1) year after the incident from which the cause of action arose or where the Policyholder or Insured Person has failed to notify the Company of the incident giving rise to a claim within a reasonable time and the Company believes this failure has prejudiced its position;

6 Legal Expenses incurred by an Insured Person making a claim against the Policyholder, the Company or any organisation or person involved in arranging this Policy;

7 Legal Expenses incurred before the Company had given its prior written consent.

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2. Personal Property

a. Personal Property Benefit

If, during a Business Trip, the Personal Property taken along by the Insured Person on the Business Trip or acquired during the Business Trip is lost, stolen or Accidentally damaged, the Company will reimburse the Insured Person for his/her loss or damage of each item, pair or set, up to the maximum Sum Insured shown in the Policy Schedule.

b. Replacement of Keys/Locks

If, while on a Business Trip, the keys to the primary residence of an Insured Person are lost, or stolen, the Company will pay for the replacement keys or cost of replacing the locks up to the maximum Sum Insured as specified in the Policy Schedule.

c. Replacement of Travel Documents

If, while on a Business Trip, the Insured Person loses his/her Travel Documents due to robbery, burglary or theft or threat of violence, the Company will reimburse the non-recoverable, reasonable and necessary costs of obtaining replacement Travel Documents lost up to the maximum Sum Insured shown in the Policy Schedule.

d. Baggage Delay

If, during a Business Trip, an Insured Person's checked-in baggage has been delayed, misdirected or temporarily misplaced by any Conveyance for a minimum period of time as stated in the Policy Schedule, the Company will pay the Sum Insured for each time period of delay up to a maximum Sum Insured as shown in the Policy Schedule.

The period of delay shall be calculated from the arrival of the Conveyance at the scheduled destination until the receipt or delivery of baggage to the Insured Person or to the person authorised by the Insured Person to receive the baggage.

Specific Conditions applicable to 'Baggage Delay' Benefit - In addition to this Policy's General Policy Conditions

a. The Insured Person must provide to the Company:

   i. itinerary showing the scheduled time of arrival at the scheduled destination; and

   ii. a letter from the Conveyance operator confirming the number of hours of delay.

b. If the baggage which has been temporarily misplaced becomes permanently lost and this results in a Valid Claim under 'Personal Property Benefit', the Company will deduct the amount already paid for this Benefit from the payment to be made under 'Personal Property Benefit'.

Specific Exclusions applicable to 'Baggage Delay' Benefit - In addition to this Policy's General Policy Exclusions

The Company will not pay under this Benefit any claim arising from, resulting in or in connection with:

a. any delay caused by an illegal act by the Insured Person, confiscation, detention or destruction by customs, immigration and/or public authorities;

b. any baggage and/or personal effects sent under an airway bill or bill of lading;

c. any delays due to Strike or industrial action existing or announced before the commencement of the Business Trip;

d. any baggage delay upon arriving at Insured Person's Country of Residence;

e. any baggage delay which the Insured Person has not reported to the relevant Conveyance carrier within twenty-four (24) hours from the expected arrival time of the baggage at the destination.

e. Loss of Personal Property following Bodily Injury

If, while on a Business Trip, the Insured Person sustains Bodily Injury resulting from an unprovoked assault and this leads to:

i. loss or damage to his/her Personal Property: or

ii. the Insured Person being Hospitalised as an Inpatient and his/her Personal Property is lost by the Hospital or ambulance; the Company will reimburse the Policyholder the reasonable and necessary expenses incurred in the replacement or repair of the Personal Property up to the Sum Insured specified in the Policy Schedule.

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Specific Definitions applicable to Benefits under 'Personal Property' of Plus Module – In addition to this Policy's General Policy Definitions

Electronic Equipment
Any computers (including laptops, notebooks, tablets and palm pilots), digital cameras and cameras, binoculars, mobile phones, global positioning devices, personal music/recording/gaming devices and other items of a similar nature which are intended for either business or personal use.

Golfing Equipment
Golf clubs, golf bags, golf balls, and hand-drawn/pulled golf carriages (other than licensed electric or motor propelled caddie cars).

Personal Property
Personal goods belonging to the Insured Person or property of the Policyholder entrusted to the Insured Person in the course of the Insured Person's employment and for which the Insured Person is personally responsible, including Golfing Equipment and Electronic Equipment, which are taken by the Insured Person on the Business Trip or acquired by the Insured Person and carried on the Insured Person's person or hand-carried or checked in as accompanied baggage with the Public Conveyance during the Business Trip

Service Provider
Any registered commercial entity to which payment is made in respect of services provided.

Specific Conditions applicable to Benefits under 'Personal Property' of Plus Module - In addition to this Policy's General Policy Conditions

1 The maximum the Company will pay for any one (1) item, pair, set or collection is $1,000.

2 The Insured Person must take every possible step and reasonable precaution to ensure the Personal Property is kept safe and is properly carried and secured during the Business Trip.

3 The Insured Person must report the loss or damage to the police, hotel, carrier or any relevant authority having jurisdiction where the loss or damage occurred within forty-eight (48) hours of the discovery of such loss or damage and for which the Insured Person must get a written police report or a property irregularity report or a report issued by the relevant authority evidencing such loss or damage.

4 The basis of settlement will be the replacement value of item, pair or set: i) as per the value at the time it was stolen or accidentally damaged with a deduction determined at the Company's sole discretion, made for wear, tear and loss of value depending on the age of the property; and ii) equivalent to the value of an item, pair or set of like kind and quantity to that being replaced.

5 For loss or damage due to a Service Provider:

- a any claim for compensation must first be made against that Service Provider; and
- b any claim submitted to the Company shall contain proof of compensation received from the Service Provider and if such compensation is denied, any claim submitted to the Company shall contain written proof of such denial.

6 The Company may choose to replace, repair, or pay for the loss in cash at its sole discretion. At no time, will the Company reimburse the Insured Person for more than the Sum Insured specified in the Policy Schedule.

7 Deduction will be made for wear, tear and loss of value depending on the age of the item that the Company thinks is reasonable, however the Company may not apply such deduction to Electronic Equipment that are less than one (1) year old if Insured Person can produce supporting documents (i.e., original receipts or original warranty cards) for claims. The maximum amount the Company will pay will not be more than the value of the Personal Property at the time it was lost, stolen or accidentally damaged.

8 If any Personal Property of the Insured Person was damaged and is proven to be beyond economical repair, a claim will be dealt with under this Policy as if the item, pair or set had been lost.

9 If the Personal Property that was initially delayed, misdirected or temporarily misplaced becomes permanently lost and this results in a Valid Claim under this Benefit, the Company will deduct any amount already paid for the same Personal Property under any other Benefit of this Policy.

Specific Exclusions applicable to Benefits under 'Personal Property' of Plus Module – In addition to this Policy's General Policy Exclusions

The Company will not pay under these Benefits any claim arising from, resulting in or in connection with:

a. Loss or damage to any Personal Property which was:

- i. sent in advance separately via courier, cargo or postal services or with someone else;

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ii. left unattended in any place of which the general public have free access to;

iii. given to someone else to look after and who is not an accompanying Insured Person or a person who is normally authorised to handle baggage, such as a hotel or transport representative;

iv. directly or indirectly seized or destroyed under quarantine or customs regulations, confiscated by order of any government or public authority or is a risk of contraband or illegal transportation or trade;

v. caused by wear and tear or damage due to any process of repair, gradual deterioration, moths, vermin, atmospheric or weather condition or damage sustained due to any process or while actually being worked upon or resulting there from;

vi. due to scratching or denting or damage that is limited to impacting the aesthetic appeal of the item or which does not affect the fitness for use or purpose or functionality of such property unless the damage has rendered the item no longer fit for the original purpose for which it was designed;

vii. due to any mechanical or electrical failure or breakdown;

viii. due to theft of Personal Property left in:

1. an unattended vehicle; or

2. an unoccupied vehicle;

unless all windows, doors, luggage compartment, roof and windscreen are completely closed and securely locked. This does not apply to touring or convertible cars;

ix. due to theft of Personal Property left in an unoccupied touring or convertible car unless the stolen Personal Property was stored in a completely closed and securely locked luggage compartment;

x. due to lack of reasonable care by the Insured Person;

xi. not reported to either the police or carrier or any relevant authority having jurisdiction where the loss or damage occurred within twenty-four (24) hours of the discovery of such loss or damage and for which the Insured Person did not get a written police report or a property irregularity report or a report issued by the relevant authority evidencing such loss or damage;

xii. in respect of shortage due to error, omission, exchange transactions or depreciation in value;

xiii. in respect of Electronic Equipment such as a mobile phone or a tablet, the Company will only pay the cost of replacement phone (less than one (1) year old) and not any contractual obligations that may exist. This Benefit can only be utilised once during any one (1) Business Trip; or

xiv. Money, Travel Documents, credit cards, crypto-currency, negotiable instruments, financial securities and instruments of any kind, payment cards (including credit value loaded), title deeds, driving license and identity cards.

b. Any Loss or damage to:

i. data recorded on tapes, cards, discs and otherwise;

ii. glass (in pictures or otherwise), china, marble, earthenware, or other brittle substances;

iii. animals, motor vehicles (including accessories), motorcycles, boats, motors, any other conveyances, snow skis, perishables or consumable items, household effects, antiques, artifacts, paintings, objects of art, manuscript, gemstones, jewellery, watches, securities or souvenirs;

iv. contact or corneal lenses, hearing aids or bridges for a tooth or teeth;

v. hired or leased equipment;

vi. business goods or samples/prototypes or equipment of any kind or any products/components meant for trade; or

vii. Golfing Equipment whilst in the course of play or practice.

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3. Personal Monetary Loss

a. Personal Monetary Loss Benefit

If, during a Business Trip, the Insured Person suffers the following, the Company will reimburse such loss up to the Sum Insured under this Benefit as specified in the Policy Schedule:

a. Loss of Money which is in his/her possession at the time of loss or secured in a hotel safety deposit or locked safe, due to robbery, burglary, theft or threat of violence: or

b. Financial loss resulting from fraudulent use of the Policyholder or Insured Person's credit, debit or charge cards; or

c. Financial loss resulting from fraudulent use of Mobile Payment Technology on a mobile phone belonging to the Policyholder or the Insured Person; or

d. Financial loss resulting from fraudulent use of a mobile phone belonging to the Policyholder or Insured Person that incurs voice and/or data charges.

b. Theft of Foreign Currency

If the Insured Person loses foreign currency he/she had purchased for a Business Trip due to theft, the Company will reimburse such loss up to the Sum Insured for this Benefit as specified in the Policy Schedule provided the loss occurs:

i. from the time of collection of the foreign currency or one hundred and twenty (120) hours prior to Departure for the Business Trip, whichever occurs last; and

ii. up to one hundred and twenty (120) hours upon arrival back at Country of Residence after a Business Trip. The theft must be reported to the police or relevant authority having jurisdiction where the theft occurred, within twenty-four (24) hours from the incident. Any claims under this Benefit must be accompanied by a copy of a police report or a report issued by the relevant authority evidencing such loss.

Specific Definition applicable to Benefits under 'Personal Monetary Loss' of Plus Module – In addition to this Policy's General Policy Definitions

Mobile Payment Technology
Mobile payment platform and/or technology made available via an App, browser or through a contactless terminal (e.g. Apple or Android Pay).

Specific Conditions applicable to Benefits under 'Personal Monetary Loss' of Plus Module - In addition to this Policy's General Policy Conditions

1 Any loss attributable to fraudulent use of a credit, debit or charge card must also be reported to the issuing company within twenty-four (24) hours of loss and appropriate cancellation measures taken.

2 Any loss attributable to fraudulent mobile phone use must also be reported to the mobile phone provider and/or Mobile Payment Technology provider within twenty-four (24) hours of loss and appropriate cancellation measures taken.

3 The Policyholder or Insured Person must provide, at its/his/her own expense, supporting documents from its/his/her bank, credit card issuer, mobile phone provider or Mobile Payment Technology provider as evidence of any loss being claimed under this policy.

Specific Exclusions applicable to Benefits under Personal Monetary Loss' of Plus Module - In addition to this Policy's General Policy Exclusions

The Company will not pay under these Benefits any claim arising from, resulting in or in connection with:

1 shortage of currency due to error, omission, exchange transaction or depreciation in value;

2 detention or confiscation by any lawfully constituted authorities;

3 any fraudulent use for which charges are removed from the Insured Person's or Policyholder's account;

4 Money left unattended in any place of which the general public has free access to;

5 any loss which could have been avoided by the exercise of reasonable care by the Insured Person;

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6 fraudulent use of a credit, debit or charge card where the Insured Person had not complied with all the terms and conditions for use under which the card was issued; and/or

7 fraudulent use of a mobile phone where the Insured Person had not complied with all the terms and conditions for use under which the functionality was issued.

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4. Travel Inconvenience Benefits

a. Travel Delay

If, while on a Business Trip, the pre-booked Conveyance on which an Insured Person is scheduled to travel is delayed for a minimum period of time as stated in the Policy Schedule from the scheduled arrival time at destination as specified in the itinerary due to:

1. mechanical breakdown or delay caused by a Conveyance or transportation provider;
2. strike or industrial action;
3. adverse weather conditions;
4. Natural Catastrophes that cause a complete cessation of travel services at the point of Departure or destination;
5. the Insured Person being delayed due to a traffic accident while en route to a Departure as substantiated by a police report;
6. breakdown of an owned or rented vehicle in which the Insured Person is travelling in while en route to the Insured Person's Departure;
7. flight delays resulting from the temporary closures of airports from which flights were scheduled to depart due to documented security breaches or threats;
8. civil disorder within eighty (80) kilometres of the Departure point;
9. grounding of an aircraft due to mechanical or structural defect;
10. bomb threat to the Conveyance;
11. drunken passenger, Bodily Injury or Sickness of any passenger on the Conveyance;
12. the discovery of a suspicious object in the Conveyance as declared by the relevant authorities; or
13. Terrorism;

the Company will pay the Sum Insured for each block of continuous time period of delay, up to the maximum Sum Insured per delay in the Policy Schedule. The period of delay shall be calculated from the original scheduled arrival time at destination as stated in the Insured Person's itinerary to the actual arrived time at destination by such Conveyance or any alternative means of transportation, whichever is earlier.

Specific Conditions applicable to 'Travel Delay' Benefit - In addition to this Policy's General Policy Conditions

1. The Insured Person is required to provide the Company with a letter from the Conveyance operator confirming the number of consecutive hours of travel delay and the cause for the stated travel delay in the same letter.
2. Only one (1) claim is payable for the same event under:
   - i. this Benefit;
   - ii. 'Travel Curtailment or Rearrangement' Benefit under 'Travel Curtailment, Rearrangement or Replacement' Benefits of Core Module;
   - iii. 'Travel Misconnection' Benefit of 'Travel Inconvenience Benefits' of Plus Module, if applicable; or
   - iv. 'Overbooked Flight' Benefit of 'Travel Inconvenience Benefits' of Plus Module, if applicable.

Specific Exclusions applicable to 'Travel Delay' Benefit - In addition to this Policy's General Policy Exclusions

The Company will not pay under this Benefit any claim arising from, resulting in or in connection with:

1. the Policyholder's or an Insured Person's business, contractual or financial circumstances;
2. the default of any provider of transport or accommodation (or their agent) acting for the Policyholder or an Insured Person;
3. regulations made by any public authority or government or persons with the authority under legislation or licence to make regulations;
4. the delayed departure of the Conveyance due to Strike or industrial action which existed or for which advance warning had been given before the booking and payment of the Business Trip;

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5. disinclination of the Insured Person or any other person to travel or continuing to travel;
6. the Insured Person failing to check in according to the itinerary unless failure to check in was due to any covered event listed above under this Benefit;
7. the temporary or permanent withdrawal from service of any Conveyance on the orders of any port authority, rail authority or the Civil Aviation Authority or any similar body in any country;
8. actions within the control of the Insured Person that resulted in missing a Conveyance or Conveyance connection.

b. Travel Misconnection

If, whilst on a Business Trip, the Insured Person's confirmed onward scheduled connecting Conveyance is missed at the transfer point due to the late arrival of the Insured Person's incoming confirmed scheduled Conveyance and no onward Conveyance is available to the Insured Person after its late arrival, the Company will pay the Sum Insured for each time period of delay up to the maximum Sum Insured as specified in the Policy Schedule.

Specific Conditions applicable to 'Travel Misconnection' Benefit - In addition to this Policy's General Policy Conditions

a. The Insured Person is required to provide the Company with a letter from the Conveyance operator confirming the number of hours of delay and the cause for the stated travel delay in the same letter.

b. Only one (1) claim is payable for the same event under:

   i. this Benefit;

   ii. 'Travel Curtailment or Rearrangement' Benefit under 'Travel Curtailment, Rearrangements or Replacement' Benefits of Core Module;

   iii. 'Travel Delay' Benefit of 'Travel Inconvenience Benefits' of Plus Module, if applicable;

   iv. 'Overbooked Flight' Benefit of 'Travel Inconvenience Benefits' of Plus Module, if applicable; or

   v. 'Flight Diversion' Benefit of Enhanced Module, if applicable.

c. Overbooked Flight

The Company will reimburse up to the Sum Insured shown in the Policy Schedule for travel, accommodation and meal expenses reasonably and necessarily incurred (less any compensation provided by the airline) as a result of an Insured Person being involuntarily denied boarding on a scheduled flight due to overbooking while on a Business Trip and no alternative transport is made available by the airline within eight (8) hours of the scheduled departure time.

Specific Conditions applicable to 'Overbooked Flight' Benefit – In addition to this Policy's General Policy Conditions

a. The Insured Person must hold a confirmed seat on the original scheduled flight.

b. The Insured Person must provide a letter to the Company from the airline confirming denial of boarding due to overbooking.

c. Only one (1) claim is payable for the same event under:

   i. this Benefit; or

   ii. 'Travel Curtailment or Rearrangement' Benefit of 'Travel Curtailment, Rearrangements or Replacement' of Core Module; or

   iii. 'Flight Diversion' Benefit of Enhanced Module, if applicable.

Specific Exclusions applicable to 'Overbooked Flight' Benefit– In addition to this Policy's General Policy Exclusions

The Company will not pay under this Benefit any claim arising from, resulting in or in connection with:

a. any claim under this Benefit where the Insured Person has declined an alternative transportation provided by the airline;

b. any denial to board the scheduled flight due to the Insured Person's failure to check-in within the official stipulated time for the scheduled flight.

d. Termination of Employment

If, C-Level Management or Employee of the Policyholder, confirmed to go on a Business Trip, resigns within thirty (30) days prior to the commencement of the pre-booked Business Trip, the Company will reimburse the Policyholder all deposits and advance payments for transport and accommodation costs incurred due to the cancellation of the Business Trip, less any expenses recoverable elsewhere, up to the Sum Insured specified in the Policy Schedule.

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5. Rental Vehicle Expenses

a. Rental Vehicle Deductible Expenses

If, while on a Business Trip, the Policyholder or Insured Person becomes legally liable to pay under a valid and current Rental Vehicle hire agreement in respect of loss or damage to a Rental Vehicle caused by an Accident during the rental period, where the Insured Person is a named driver or co-driver of the said Rental Vehicle, the Company will reimburse any motor vehicle insurance policy excess or deductible up to the Sum Insured as specified in the Policy Schedule.

Specific Condition applicable to 'Rental Vehicle Deductible Expenses' Benefit – In addition to this Policy's General Policy Conditions

As part of the Rental Vehicle hiring agreement, the Insured Person must take up all comprehensive motor insurance provided by the rental company against loss or damage to the Rental Vehicle during the rental period.

Specific Exclusions applicable to 'Rental Vehicle Deductible Expenses' Benefit - In addition to this Policy's General Policy Exclusions

The Company will not pay under this Benefit any claim arising from, resulting in or in connection with:

a. any accident that occurs outside the Period of Insurance;

b. any loss or damage arising from operation of the Rental Vehicle in violation of the terms of the hiring agreement or loss or damage which occurs beyond the limits of any public roads or in the violation of relevant laws, rules and regulations;

c. any loss or damage arising from wear and tear, gradual deterioration, damage from insects or vermin, inherent vice, latent defect or damage;

d. any loss or damage caused or contributed to by the operation of the Rental Vehicle in breach of the provisions of the comprehensive motor vehicle insurance;

e. any loss or damage arising from the use of the Rental Vehicle by an Insured Person not holding a valid driver's license for the vehicle in the country the motor vehicle is being operated in.

b. Return of Rental Vehicle

The Company will reimburse the Insured Person the reasonable and necessary expenses up to the Sum Insured as specified in the Policy Schedule to return a Rental Vehicle to the rental company's nearest depot if an Insured Person is certified by a Medical Practitioner as being unfit to drive as a result of Bodily Injury or Sickness and is unable to fulfil his/her contractual obligations in returning the Rental Vehicle.

Specific Condition applicable to Benefits under 'Rental Vehicle Expenses' of Plus Module - In addition to this Policy's General Policy Conditions

For 'Rental Vehicle Expenses' to be payable, a copy of the signed Rental Vehicle hiring agreement clearly showing the Rental Vehicle excess or deductible amount must be supplied to the Company.

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Assured Module

This module of the Policy only applies if it has been selected by the Policyholder, and the appropriate premium paid.

The Company has a dedicated a twenty-four (24)-hour crisis response contact telephone number which the Insured Person or Insured Person's family and friends may contact should an incident, situation or occurrence result in an event under the Assured Module. Detail of the crisis hotline is as follows:

Emergency Helpline: + 1 817 826 7000

This number is a dedicated crisis response contact hotline and should only be used for notification of an incident, situation or occurrence which may give rise to an event under the Assured Module. Please provide the Insured Person's name, the Policyholder's name, this Policy number, the telephone number at which the Insured Person can be reached at, and the nature of the assistance required upon contacting the crisis response team.

1. Hijack

If, while on a Business Trip, an Insured Person is forcibly or illegally detained as the result of a Hijack. the Company will pay the Sum Insured for each time period specified that the Insured Person is detained up to the maximum Sum Insured shown on the Policy Schedule. The Company will also pay for reasonable expenses of the Insured Person's Partner for return travel to and accommodation in the area where the Insured Person is released, up to maximum Sum Insured shown on the Policy Schedule in total.

Specific Condition applicable to'Hijack' Benefit – In addition to this Policy's General Policy Definitions

Hijack
The unlawful seizure of, or wrongful taking control of the Conveyance in which the Insured Person is travelling.

Specific Conditions applicable to 'Hijack' Benefit - In addition to this Policy's General Policy Conditions

a. The Policyholder must notify the appropriate law enforcement agency having jurisdiction over the matter of the Hijack.

b. The Policyholder must advise the Company immediately.

c. There must be sufficient proof that the event has actually occurred.

Specific Exclusions applicable to 'Hijack' Benefit - In addition to this Policy's General Policy Exclusions

The Company will not pay under this Benefit any claim arising from, resulting in or in connection with:

a. fraudulent, dishonest, or criminal acts of the Policyholder or Insured Person; or

b. any claim where an Insured Person is a victim of Hijack within his/her Country of Residence.

2. Kidnap & Hostage

If, while on a Business Trip, an Insured Person is kidnapped or taken hostage, the Company will pay the Sum Insured for each time period specified the Insured Person is Kidnapped or taken hostage up to the maximum Sum Insured shown on the Policy Schedule.

Specific Definition applicable to 'Kidnap & Hostage' Benefit - In addition to this Policy's General Policy Definitions

Kidnap/Kidnapped/Kidnapping
The seizing, detaining or carrying away by force, or fraud of one (1) or more Insured Persons (except a child by its parent or guardian), by a third party without the consent of the Insured Person and without lawful excuse.

Specific Conditions applicable to 'Kidnap & Hostage' Benefit - In addition to this Policy's General Policy Conditions

a. The Policyholder must notify the appropriate law enforcement agency having jurisdiction over the matter of the Kidnapping.

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b. The Policyholder must advise the Company immediately.

c. There must be sufficient proof that the event has actually occurred.

Specific Exclusions applicable to 'Kidnap & Hostage' Benefit - In addition to this Policy's General Exclusions

The Company will not pay under this Benefit any claim arising from, resulting in, or in connection with:

a. fraudulent, dishonest, or criminal acts of the Policyholder or Insured Person;

b. any claim where an Insured Person is Kidnapped or taken hostage within his/her Country of Residence; or

c. any Kidnap which occurs in Colombia, Iraq, Mexico, Nigeria, Philippines, Venezuela or Yemen.

3. Crisis Containment Management

a. Crisis Containment Management

The Company will reimburse the Policyholder for Crisis Consultant fees and costs incurred up to the amount specified in the Policy Schedule as a direct result of a Crisis which starts during the Period of Insurance and is reported to the Company in accordance with this Policy.

Any fees and costs must be approved by the Company and paid by the Policyholder before the claim is submitted to the Company for reimbursement under this policy. Crisis Consultant Costs are limited to fees or costs which are incurred within the Crisis Coverage Period. The maximum Sum Insured payable under this Benefit is the amount specified on the Policy Schedule for any one (1) event and in all (aggregate limit) during any one (1) Period of Insurance for all crises which start during the Period of Insurance.

b. Claims Notification and Consultancy Support

In the event of an incident, situation or occurrence which may give rise to an Insured Occurrence, then as part of the Policy coverage, the Company will:

i. make available on a priority basis, specialist consultants nominated by the Company. In the event the Policyholder chooses to engage a consultant of its choice, the Company must provide prior written consent to the engagement of such consultant; and

ii. pay the reasonable and necessary fees and expenses of the said consultant(s).

Specific Definitions applicable to Benefits under 'Crisis Containment Management' - In addition to this Policy's General Policy Definitions

Adverse Publicity
Any negative reporting of an Insured Occurrence in local, regional or national media (including but not limited to radio, television, newspaper or magazines) which has potential to cause a Material Interruption.

Crisis
Any decisive, unstable or crucial time in the Policyholder's affairs or business resulting from an Insured Occurrence that:

i. has directly caused a Material Interruption; or

ii. has the potential to cause:

   a. imminent Financial Loss; or
   b. Adverse Publicity for the Insured Person if left unmanaged.

Crisis Consultant
The independent crisis consultant previously approved by the Company for use by the Policyholder in connection with a Crisis.

Crisis Coverage Period
The period of time commencing when the Crisis is first reported to the Company and ending not later than thirty (30) days thereafter.

Financial Loss

a. Within a forty-eight (48) hour period, the price per share of the Policyholder's common stock decreases by 10% net of the change in the Standard & Poor's Composite Index or any other comparable index used to measure the stock exchange in which the Policyholder lists its common stock; or

b. a decrease greater than 20% in the Policyholder's consolidated revenues.

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Insured Occurrence
An occurrence that may give rise or gives rise to a notification of a potential claim under 'Hijack' Benefit or 'Kidnap & Hostage' Benefit

Material Interruption

A disruption or break in the continuity of the Policyholder's normal business operations, which:

i. requires the direct involvement of all the Policyholder's board of directors or senior executives and diverts their concentration from their normal operating duties; and

ii. is likely to have a significant negative impact on the Policyholder's revenues, earnings or net worth.

Specific Conditions applicable to 'Claims Notification and Consultancy Support' Benefit - In addition to this Policy's General Policy Conditions

1 The Policyholder will bear 20% of the cost of each Crisis which will remain uninsured. The Company will reimburse the Policyholder subject to the aggregate limit of liability after deducting 20% from the amount of the incurred Crisis Consultant costs.

2 Any Crisis arising out of, based upon or attributable to related, continuous or repeated notifications under 'Hijack' Benefit and 'Kidnap and Hostage' Benefit of the Policy will be considered a single Crisis.

3 The Policyholder must give immediate notice to the Company of any Crisis.

4 Any event that meets the following conditions must be reported to the Company in the time period indicated:

a. any event that results in regional or national media coverage (print, radio or television) and relates to an Insured Occurrence, must be reported to the Company within twenty-four (24) hours of the media coverage, if not previously notified by the Policyholder;

b. any event that results in the filing of a claim or litigation against the Policyholder and relates to an Insured Occurrence, must be reported to the Company within forty-eight (48) hours of the claim/litigation filing, if the Company had not previously been notified of the Insured Occurrence by the Policyholder.

No claim will be paid if the Company is not notified as described above.

Specific Exclusions applicable to 'Claims Notification and Consultancy Support' Benefit - In addition to this Policy's General Exclusions

The Company will not pay under this Benefit any claim arising from, resulting in or in connection with:

a. circumstances that affect the industry in which the Policyholder conducts its business activities;

b. governmental regulations which affect another country or the industry in which the Policyholder conducts its business activities;

c. changes in population, customer tastes, economic conditions, seasonal sales variations, or competitive environment;

d. any fraudulent act committed by any of the Policyholder's senior executives;

e. a Crisis occurring in Afghanistan, Colombia, Iraq, Mexico, Nigeria, Pakistan, Philippines, Somalia, Venezuela, Yemen or any other region or country to which the Insured Person has travelled where the government of Country of Residence has advised against "all travel" (or other similar advice) for Insured Persons prior to the commencement of the Business Trip.

4. Search and Rescue

The Company will reimburse the necessary and reasonable search and rescue costs incurred up to the Sum Insured as shown on the Policy Schedule if an Insured Person is reported as missing whilst on a Business Trip outside his/her Country of Residence and it becomes necessary for police authorities, a recognised rescue provider or an official search organisation to launch a search and rescue operation where:

1 it is known or there is reason to believe that the Insured Person may have sustained Bodily Injury or Sickness; or

2 weather or safety conditions make it necessary to do so in order to prevent the Insured Person from sustaining Bodily Injury or Sickness.

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Specific Conditions applicable to 'Search and Rescue' Benefit - In addition to this Policy's General Policy Conditions

1 The Policyholder or an Insured Person must inform the Company immediately or as soon as is practicable, of any emergency that may potentially give rise to a claim. The Company will only assess and monitor the Insured Person's situation. The Company cannot take over the running of the search and rescue operation.

2 A written statement from the applicable rescue authorities involved in the search and rescue must be obtained and provided to the Company in the event of a claim.

Specific Exclusions applicable to 'Search and Rescue' Benefit– In addition to this Policy's General Policy Exclusions

The Company will not pay under this Benefit any claim arising from, resulting in or in connection with:

1 the Policyholder or an Insured Person failing to comply with local safety advice and/or adhering to any recommendations that are in force during an Insured Person's travel;

2 an Insured Person knowingly endangering his/her own life or the life of any other Insured Person;

3 an Insured Person engaging in activities where his/her experience or skill level falls below those reasonably required to participate in such activities;

4 any person not insured under this policy;

5 an additional cost incurred on or after the Insured Person is recovered by a search and rescue operation or incurred after the time where the recognised rescue provider or police authorities advise that continuing the search is no longer viable.

5. Political Risk and Natural Disaster Evacuation

The Company will pay the reasonable and necessary costs of

a. an economy class fare to return the Insured Person to his/her Country of Residence by Conveyance, where available; or

b. an economy class fare to transport the Insured Person to a safe location and return him/her back to his/her country from which he/she was evacuated or to his/her Country of Residence using Conveyance where the Insured Person is unable to return to his/her Country of Residence. In addition, the Company will pay reasonable and necessary costs of accommodation actually incurred at the safe location, up to the Sum Insured as shown on the Policy Schedule, up to a maximum period of fourteen (14) days, when the Insured Person is on Business Trip outside his/her Country of Residence due to one (1) of the following reasons:

   1 Appropriate Authorities recommend that certain categories of persons, which include the Insured Person, should leave that country;

   2 the Insured Person is expelled from or declared persona non grata in the country where he/she is located; or

   3 there is total seizure, confiscation or expropriation of property, plant or equipment belonging to the Policyholder or the Insured Person; or

   4 a major Natural Disaster has occurred in the country the Insured Person is in necessitating his/her immediate evacuation in order to avoid risk of personal injury or sickness to himself/herself.

Specific Definitions applicable to 'Political Risk and Natural Disaster Evacuation' Benefit – In addition to this Policy's General Policy Definitions

Appropriate Authorities
Any legally empowered regulatory, governmental or local authority of the Home Country or Country of Residence, whichever is applicable.

Natural Disaster
A volcanic eruption, flood, tsunami, earthquake, landslide, hurricane, tornado and wildfire in the Geographical Area in which the Insured Person is travelling.

Specific Condition applicable to 'Political Risk and Natural Disaster Evacuation' Benefit - In addition to this Policy's General Policy Conditions

In the event the Insured Person cannot be returned to his/her Country of Residence immediately, the Company will, at the Company's sole discretion, decide where to send the Insured Person before returning the Insured Person to his/her Country of Residence.

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Specific Exclusions applicable to 'Political Risk and Natural Disaster Evacuation' Benefit - In addition to this Policy's General Policy Exclusions

The Company will not pay under this Benefit any claim arising from, resulting in, or in connection with:

1 the Insured Person violating the laws or regulations of the country from which he/she is to be evacuated;

2 the Policyholder or the Insured Person failing to produce or maintain immigration, work, residence or similar visas, permits or other similar documentation;

3 the Policyholder or the Insured Person failing to honour any contractual obligations or bond, or to obey any conditions in a license;

4 debt, insolvency, commercial failure, the repossession of any property by a titleholder or any other financial cause;

5 political unrest or Natural Disaster that was in existence prior to the Insured Person entering the country, or where its occurrence was foreseeable to a reasonable person prior to the Insured Person entering the country;

6 accommodation for a period in excess of fourteen (14) days for each Insured Person for any one (1) event;

7 expenses that would have been incurred as part of the original travel budget or costs, such as the cost of meals;

8 the Company having repatriated an Insured Person under any other Benefit of this policy.

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Enhanced Module

This module of the Policy only applies if it has been selected by the Policyholder and the appropriate premium paid.

1. Alternative Treatments and Medicines

If, while on a Business Trip, an Insured Person sustains Bodily Injury or suffers Sickness, the Company will reimburse an Insured Person up to the Sum Insured shown on the Policy Schedule the expenses incurred for Chinese Physician or chiropractor treatment whilst on the Business Trip.

The Company will also reimburse expenses incurred within forty-five (45) days from the date of return from the Business Trip for Chinese Physician or chiropractor treatment or follow-up treatments in Country of Residence for Bodily Injury or Sickness suffered while on the Business Trip, up to the Sum Insured shown on the Policy Schedue provided that:

a. prior treatment had been sought during the Business Trip;

b. if prior treatment had not been sought during the Business Trip, first treatment is sought within seven (7) days immediately following the date of return from the Business Trip.

Specific definitions, conditions and exclusions that are listed under 'Medical Expenses' of Core Module shall also apply to this Benefit.

Specific Definition applicable to 'Alternative Treatments and Medicines' Benefit – In addition to this Policy's General Policy Definitions

Chinese Physician

A traditional Chinese medicine practitioner (including an acupuncturist or bonesetter) licensed under any applicable laws and acting within the scope of his/her license and training.

Specific Conditions applicable to 'Alternative Treatments and Medicines' Benefit - In addition to this Policy's General Policy Conditions

1 If the Insured Person is entitled to a refund of all or part of the expenses incurred for the Chinese Physician or chiropractor treatment or from any person or any other source, the Company will only pay the amount of expenses incurred over and above the refunded amount up to the Sum Insured shown on the Policy Schedule.

2 The attending Chinese Physician or chiropractor shall not be:

a. the Policyholder or an Insured Person;

b. a Business Partner, C-Level Management or agent with any relation to the Policyholder or Insured Person; or

c. a Relative of the Policyholder or Insured Person.

2. Double Hospitalisation Benefit in Intensive Care Unit (ICU)

If, while on a Business Trip, an Insured Person sustains a Bodily Injury or suffers a Sickness resulting in Hospitalisation in an Intensive Care Unit (ICU), the Company will double the Valid Claim for 'Hospitalisation Benefit' under 'Medical Expenses' of Core Module.

Specific definitions, conditions and exclusions that are listed under 'Medical Expenses' of Core Module shall also apply to this Benefit.

Specific Definition applicable to 'Double Hospitalisation Benefit in Intensive Care Unit (ICU)' – In addition to this Policy's General Policy Definitions

Intensive Care Unit (ICU)

A section within a Hospital that is designated as an intensive care unit. It is solely dedicated for the treatment of patients who are in a critical medical condition who require constant and close monitoring of the vital body functions in a Hospital, which provides a high ratio of nursing staff to patients, which has full facilities for the resuscitation of patients and provides special nursing and medical services not available elsewhere in the Hospital.

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Specific Condition applicable to 'Double Hospitalisation Benefit in Intensive Care Unit (ICU)' - In addition to this Policy's General Policy Conditions

Only one (1) claim is payable for the same event under:

a. this Benefit; or

b. 'Hospitalisation Benefit' under 'Medical Expenses' of Core Module.

3. Compassionate Visit

If, while on a Business Trip, an Insured Person sustains Bodily Injury or suffers a Sickness resulting in death and there is no adult family member with the Insured Person, the Company will reimburse the reasonable travel (ie. economy class where applicable) and accommodation expenses (room charge only including mandatory taxes and charges) necessarily incurred by two (2) Relatives or friends of the Insured Person to assist in the final funeral arrangements at the city located nearest to the place of death of the Insured Person up to the Sum Insured as specified on the Policy Schedule.

Specific Condition applicable to 'Compassionate Visit' Benefit - In addition to this Policy's General Policy Conditions

Only one (1) claim is payable for the same event under:

a. this Benefit; or

b. 'Funeral & Associated Expenses' Benefit under 'Emergency Medical Evacuation, Repatriation of Mortal Remains, Funeral & Associated Expenses and other Emergency Travel Expenses' of Core Module.

4. Additional Accidental Death Benefit whilst travelling in Public Conveyance

If, while on a Business Trip, the Insured Person sustains a Bodily Injury when boarding, travelling in or exiting a Public Conveyance as a fare paying passenger that directly results in a Valid Claim for Event 1 of the Schedule of Events under 'Accidental Death and Permanent Disabilities Benefit', the Company will pay the Sum Insured as specified in the Policy Schedule. For the purpose of this Benefit, motorcycles and motor-scooters are excluded.

5. Flight Diversion

In the event that during a Business Trip, a scheduled flight the Insured Person is traveling on is diverted to land at an airport due to a bomb threat, adverse weather conditions, drunk passenger, injury or sickness which delays the Insured Person's arrival at the planned destination as specified in his/her itinerary, the Company will pay a Sum Insured for each time period of delay up to the maximum Sum Insured as specified on the Policy Schedule.

Specific Condition applicable to 'Flight Diversion' Benefit - In addition to this Policy's General Policy Conditions

Only one (1) claim is payable for the same event under:

a. this Benefit; or

b. 'Travel Delay' Benefit under 'Travel Inconvenience Benefits' of Plus Module, if applicable.

Specific Exclusion applicable to 'Flight Diversion' Benefit - In addition to this Policy's General Policy Exclusions

The Company will not pay under this Benefit any claim arising from, resulting in or in connection with any diversion due to smog or conditions arising from pollution.

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6. Credit Card Indemnity

If, while on a Business Trip, the Insured Person sustains a Bodily Injury and a Valid Claim is payable for Event 1 or 2 of the Schedule of Events under 'Accidental Death and Permanent Disabilities Benefit', the Company will reimburse the outstanding credit card expenses (less any arrears payments from prior months) as on the date of Accident incurred by the Insured Person during the Business Trip up to the Sum Insured as shown on the Policy Schedule.

Specific Conditions applicable to 'Credit Card Indemnity' Benefit - In addition to this Policy's General Policy Conditions

a. This Benefit is only paid once per Insured Person under the Period of Insurance.

b. Any claim for reimbursement under this Benefit must be accompanied by the original copy of the bank credit card monthly statement(s).

Specific Exclusion applicable to 'Credit Card Indemnity' Benefit – In addition to this Policy's General Policy Exclusions

The Company will not pay under this Benefit any claim arising from, resulting in or in connection with any administration fees or costs or credit card repayments that are overdue and unpaid by the Insured Person prior to the occurrence of the Accident. This includes any interest or penalties applicable on such overdue and unpaid credit card repayments.

7. Overseas Quarantine Allowance

If, while on a Business Trip, the Insured Person is placed under an unexpected Quarantine outside of the Insured Person's Country of Residence, the Company will pay the Insured Person the Sum Insured as specified in the Policy Schedule for each day of quarantine up to a maximum of fourteen (14) consecutive days.

Specific Condition applicable to 'Overseas Quarantine Allowance' Benefit - In addition to this Policy's General Policy Conditions

In the event the Quarantine takes place in a Hospital only one (1) claim is payable for the same event under:

a. this Benefit;

b. 'Hospitalisation Benefit' under 'Medical Expenses' of Core Module; or

c. 'Double Hospitalisation Benefit in Intensive Care Unit (ICU)'of Enhanced Module.

Specific Exclusions applicable to 'Overseas Quarantine Allowance' Benefit - In addition to this Policy's General Policy Exclusions

The Company will not pay under this Benefit any claim arising from, resulting in or in connection with:

1. the government of the Insured Person's Country of Residence having issued a warning or advisory against all but essential business travel (or similar or higher-level advice) to a destination and such advice or warning was issued prior to the booking and payment for the Business Trip;
2. the Insured Person being required to be in quarantine upon return to Country of Residence;
3. any period of quarantine that is imposed at the Policyholder's or Insured Person's own discretion; or
4. the Quarantine being triggered and imposed on all arriving travellers or for all arriving travellers from a particular region/country of origin at least twenty-four (24) hours prior to the time of departure to that country by Insured Person as part of his/her Business Trip.

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General Policy Extensions

This Policy shall extend to cover the following, subject to:

1. any restrictions mentioned below; and
2. all other terms and conditions of the Policy remaining unchanged.

Leisure Travel Extension for C-Level Management and their accompanying Partners and Dependant Child(ren)

a. Cover for C-Level Management's Leisure Travel

Cover under this Policy will be extended to include Leisure Travel undertaken during the Period of Insurance by C-Level Management, up to the Sum Insured as specified in the Policy Schedule, provided the Leisure Travel is within the maximum duration of sixty (60) consecutive days.

b. Cover for C-Level Management's accompanying Partner and Dependant Child(ren)'s Leisure Travel

Cover under this Policy will be extended to include Leisure Travel undertaken during the Period of Insurance by C-Level Management's accompanying Partner or Dependant Child(ren) up to the following:

i. Each accompanying Partner and/or Dependant Child is covered up to lesser of 10% of the Insured Person's Sum Insured or $50,000 for the following Benefits:

   a. 'Accidental Death and Permanent Disabilities Benefit';

   b. 'Medical Expenses' Benefit.

ii. Each accompanying Partner and/or Dependant Child is covered up to 100% of the Insured Person's Sum Insured for Emergency Medical Evacuation expenses.

No cover for accompanying Partner and Dependant Child(ren) for all other Benefits under this Policy.

For the purpose of this Extension, the term Business Trip wherever used in this Policy shall be replaced by Leisure Travel.

Disappearance

This Policy is extended to cover the Insured Person after an Accident if the Insured Person's body has not been found within twelve (12) months after the date of disappearance provided that such disappearance was reported to the relevant authorities, the Company will presume that the Insured Person died from this Accident. This is subject to a signed undertaking by the Insured Person's legal representative that if this presumption is subsequently found to be wrong, any payment made under this Policy will be refunded to the Company upon demand.

Exposure

This Policy is extended to cover the Insured Person for Accidental Death or Permanent Disabilities resulting from a Bodily Injury that Directly resulted from unexpected exposure to natural elements following an Accident.

Overseas Secondment

This Policy is extended to cover Employees/Insured Persons who are seconded/assigned to work overseas on the condition that the number of such overseas-based Employees/Insured Persons does not exceed 20% of the total number of Employees/Insured Persons in Singapore covered under the Policy at any one (1) time.

Automatic Extension of Cover

The Company will automatically extend the Insured Person's cover under this Policy for a further ninety (90) days if his/her Business Trip exceeds the duration of one hundred and eighty-three (183) consecutive days from the date of the Insured Person's Departure from his/her Country of Residence, if;

a. his/her return travel is delayed due to any change in Conveyance arrangements which is out of the control of the Policyholder or Insured Person; or

b. Insured Person is unable to travel back to Country of Residence as a Medical Practitioner has certified the Insured Person of being unfit to travel due to a Bodily Injury or Sickness.

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General Policy Exclusions

The Company will not pay under this Policy any claim arising from, resulting in or in connection with:

1. any War, civil War, invasion, acts of foreign enemies, hostilities (whether war be declared or not), insurrection, rebellion or revolution.
2. any aerial activity, except as a fare paying passenger in a commercial aircraft licensed to carry passengers.
3. an Insured Person's suicide or attempted suicide, intentional self-inflicted injury whether sane or insane, deliberate or reckless exposure to danger (except in an attempt to save human life) or attempt to commit or if committed any criminal or illegal act or whilst in violation or attempted violation of the law or resistance to arrest.
4. any Sickness, disease or bacterial infection or injury arising out of or consequent upon or contributed to by Acquired Immunodeficiency Syndrome (AIDS) or AID-Related Complex (ARC), howsoever this syndrome has been acquired or may be named.
5. an Insured Person engaging in a sport in a professional capacity or where such person would or could earn income or remuneration from engaging in such sport, which in totality could account for more than 15% of his/her annual income from all sources.
6. an Insured Person:
   a. being under the influence of alcohol, drugs, or Intoxicating Substance(s) unless the drug or Intoxicating Substance(s) was prescribed or administered by a Medical Practitioner and taken in accordance with the directions of a Medical Practitioner;
   b. using non-prescribed drug or drugs which cannot be legally obtained from a pharmacy or pharmacy dispensed drugs taken against the instruction from the Medical Practitioner or manufacturer.
7. the Insured Person employed by the armed or air forces, navy, police, fire service, civil defence forces or engaging in peace time reservist duty (under Section 14 of the Enlistment Act 1970 of the Republic of Singapore); or whilst driving or riding in any kind of motorised sea, land or air race.
8. an Insured Person travelling against the advice of a Medical Practitioner or travelling for the purpose of receiving medical treatment or advice even if it was not the sole reason for the travel.
9. any Bodily injury which arises in the course of the activities / occupations listed below unless agreed by the Company in writin :
   - Air crew / Ship crew
   - High risk occupations like stuntmen, firefighting
   - Forestry
   - Heavy construction, machinery operators
   - Humanitarian, missionary and emergency response groups
   - Delivery including couriers, taxi drivers
   - Media companies that have international correspondents
   - Military, armed forces, police, security worker, bodyguards, peacekeeping forces and similar groups or exposures.
   - Motorcycling for professional use (excluding business use for document delivery)
   - Occupations involved in underwater activities like diving
   - Offshore rig, onboard vessel risk (stationery or offshore) and similar
   - Professional entertainers, defined as anyone who makes more than 50% of their income from the entertainment activities
   - Professional sports people
   - Stevedores
   - Underground mining, tunnelling or open cast mining
   - Window cleaners above two (2) floors or working at heights above thirty (30) feet
   - Working with chemicals, biological, explosive, nuclear materials.
10. any mental, psychiatric and/or nervous disorders including anxiety or depression, sleep disorders, convalescence of rest care, alcoholism, Intoxicating Substance and drug related treatment.

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General Policy Conditions

These General Policy Conditions are applicable to this Policy as a whole. Please read each section/Benefit to see further additional conditions and provisions relating to that section/Benefit.

1. Assignment

The Policyholder must not assign this Policy or any rights described within this Policy unless agreed by the Company in writing.

2. Alteration of Cover/Risk

a. The Company may change the terms and conditions, including the premium, of the Policy by giving the Policyholder thirty (30) days' notice in writing to the Policyholder's last known address. The Company will only make a change during the Period of Insurance to reflect a change in the Policyholder's circumstances or for an event outside its control that the Company expects to have an impact on future claims which it could not reasonably have foreseen when it last reviewed the Policy terms and the premium or in the event of any change in the law affecting this policy. If the Policyholder does not cancel this Policy within the thirty (30) days' notice period before the change becomes effective, it will be deemed to have agreed to the change in the terms and conditions of this Policy.

b. The Policyholder must inform the Company within thirty (30) days if circumstances occur to result in a material change in risk which may include, but not be limited to, any change in the nature of business of the Policyholder and/or in the nature of the employment or occupation of the Insured Person(s).

3. Maintenance of Records

The Policyholder shall maintain records of material information of each Insured Person. These records may include, but not be limited to, substantiation and corroboration of the Insured Person's earnings, receipts, statements or medical certificates relating to a claim, injury reports, claim forms and any other relevant documentation. The Company has the right to examine these records at any time during the Period of Insurance and within three (3) years after the expiration of the Period of Insurance or until the adjustment and settlement of all claims, whichever is later.

4. Clerical Errors

Clerical errors made by the Company shall not invalidate insurance otherwise validly in force, nor continue insurance otherwise not validly in force.

5. Automatic Addition and Deletion of Insured Persons and Premium Adjustment

This Policy is administered on an "unnamed basis" as specified in the Policy Schedule, and as such the Company will only pay claims for a number of Insured Persons that is no greater than the number of travellers identified in the Policy Schedule, unless a claim was paid for a traveller who is no longer employed by the Policyholder and a claim is subsequently made by a new traveller during the Period of Insurance. Should at any time the total number of travellers be greater than the number shown in the Policy Schedule, any new Insured Person the Policyholder may engage during the Period of Insurance has to be declared to the Company prior to the commencement of coverage and additional premium will be charged to the Policyholder.

If this Policy is administered on a flat annual premium basis as shown in the Policy Schedule, the premium payable shall be based on the declaration of the Policyholder, prior to the commencement of each Period of Insurance, in respect of the expected travelling pattern of the Insured Persons during the Period of Insurance. In the event the number of trips undertaken during the Period of Insurance increases by more than fifteen percent (15%) on the trips declared prior to the commencement of each Period of Insurance, the Policyholder must disclose such variation to the Company. The Company reserves the right to charge additional premium to account for such variation.

Any additional premium due should be paid to the Company within thirty (30) days of the Company's notification to the Policyholder of such amount payable.

6. Cancellation of cover

The Company can cancel this Policy by giving thirty (30) days' written notice to the Policyholder at the Policyholder's last known address or to the insurance intermediary specified on the Policy Schedule. The Company will refund to the Policyholder the premium for any Period of Insurance remaining.

The Policyholder can cancel this Policy by giving thirty (30) days' written notice to the Company at the address shown in this policy. On cancellation the Company will refund to the Policyholder the premium for any Period of Insurance remaining provided no claims or incidents have been reported to the Company. If a claim has been paid or is payable, no return premium will be paid if the claim amount exceeds the premium paid. If an incident has occurred that could give rise to a claim under this policy, then no return premium will be paid until the Company and the Policyholder agree on the amount payable in respect of such claim and no refund of premium will be made if the amount exceeds the premium paid.

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An Insured Person has no right to cancel this Policy.

The Company can cancel any cover provided by this Policy for War by sending seven (7) days' notice (from the date of sending) to the Policyholder at the Policyholder's last known address.

7. Duplication of Cover

If an Insured Person makes a Valid Claim under this Policy, the Company will consider the Insured Person to be covered under the Policy, Policy category or Benefit which provides the highest benefit payable if:

a. The Insured Person has more than one (1) Policy with the Company which is the same product and provides the same cover; and/or

b. The Insured Person is covered under more than one (1) Policy category of Insured Persons; and/or more than one (1) Benefit item as shown on the Policy Schedule or any attached memoranda in relation to a single event.

8. Termination and Renewal

This Policy will continue to be in force until the end of the Period of Insurance. The Company reserves the right to decline the renewal, or amend premium rates, Benefits, terms and conditions of this Policy at the end of any Period of Insurance.

This Policy may be renewed for consecutive periods by the payment of the premium prior to the expiry of the Period of Insurance or as provided under 'Premium Payment Warranty' condition of the General Policy Conditions.

9. Currency

Premiums and Benefits payable under this Policy shall be in Singapore Dollars unless otherwise stated in the Policy Schedule or any subsequent Endorsements.

a. Premium: All premiums must be paid in Singapore dollars and to be administered through the Singapore registered Policyholder and/or entities registered in Singapore only.

b. Claims: All payments will be made in Singapore dollars. Settlement in foreign currencies will only be made if the Policyholder or Insured Person is not in Singapore at the time of payment. The rate of exchange will be based on the prevailing exchange rate published on: www.oanda.com/currency/converter on the date of claims settlement. The Policyholder or Insured Person will bear all the administration and costs of conversion. All claims are to be administered through the Singapore registered Policyholder and/or entities registered in Singapore only.

10. Governing Law

This Policy will be governed and interpreted in accordance with Singapore laws.

11. Misrepresentation or Fraud

Any fraud, deliberate dishonesty, or deliberate hiding of any information connected with the application, proposal and declaration (if provided) for this Policy, for ongoing/subsequent disclosures or in connection with a claim made, will make this Policy invalid.

In this event, the Company will not refund any premiums paid and the Company will not consider making payments for any claims submitted to the Company. The Company will report the matter to the Police if deemed necessary. The Company also reserves the right to recover any amount paid to the Policyholder/Insured Person in respect to any fraudulent claims submitted.

12. Interest on Amounts Payable

The Company will not pay interest on any amount paid under this policy.

13. To Whom Indemnity is Payable

All indemnities of this Policy are payable to the Policyholder or at Policyholder's written request to the Insured Person. The process of claim including settlement will be handled directly between the Company and the Policyholder whose sole discharge will constitute full and final discharge of the claim lodged.

14. Rights of Third Parties

A person who is not party to this Policy including specifically any Insured Person has no right whether under the Contracts (Rights of Third Parties) Act 2001 or otherwise to enforce any term of this Policy.

15. Settlement of Disputes

a. Any dispute, difference or question which may arise at any time hereafter in relation to the true construction of the Policy or the parties' rights or liabilities will be referred to and finally resolved by arbitration in Singapore within twelve (12) months from the date any claim is rejected under this policy.

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b. The arbitration shall be referred to and finally resolved by arbitration administered by the Singapore International Arbitration Centre ("SIAC") in accordance with the Arbitration Rules of the Singapore International Arbitration Centre ("SIAC Rules") for the time being in force, which rules are deemed to be incorporated by reference in this clause. The seat of the arbitration shall be Singapore. The Tribunal shall consist of one (1) arbitrator. The language of the arbitration shall be English.

16. Reasonable Care

The Policyholder and Insured Persons must take all reasonable steps to prevent and mitigate any accident or loss including complying with any law, by-law, ordinance or regulation that concerns the safety of persons or property.

17. Offset Clause

If Insured Person is entitled to receive a reimbursement of all or part of claimed expenses from any other source for any of the Benefits in this Policy, the Company will only be liable for the excess of the amount recoverable from such other source or insurance, up to the maximum Sum Insured specified in the Policy Schedule. This condition is only applicable to Benefits whereby payment is on a reimbursement basis.

18. Sanctions

The Company will not be deemed to provide cover and the Company shall not be liable to pay any claim or provide any Benefit hereunder to the extent that the provision of cover, payment of claim or provision of such Benefit would expose the Company, the Company's parent company or the Company's parent company's ultimate controlling entity to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, United Kingdom or United States of America.

19. Conditions Precedent to Liability

The due observance and fulfillment of the terms and conditions of this Policy so far as they relate to anything to be done or complied with and the truth to the best of the Policyholder or Insured Person's knowledge and belief of the information furnished to the Company in connection with this insurance shall be conditions precedent to the Company's liability. Failure to comply with any of the provisions contained in this Policy will invalidate all claims made under this Policy.

20. Premium Payment Warranty

a. Notwithstanding anything herein contained but subject to subclause b. below, if the Period of Insurance is sixty (60) days or more, any premium due must be paid and actually received in full by the Company (or the intermediary through whom this Policy was effected) within sixty (60) days of the inception date of the coverage under the Policy or, renewal thereof.

b. In the event that any premium due is not paid and actually received in full by the Company (or the intermediary through whom this Policy was effected) within the sixty (60) day period referred to above, then:-

   i. the cover under the Policy or renewal is automatically terminated immediately after the expiry of the said sixty (60) day period;

   ii. the automatic termination of the cover shall be without prejudice to any liability incurred within the said sixty (60) day period; and

   iii. the Company will be entitled to a pro-rata time on risk premium subject to a minimum of $25.00.

c. If the Period of Insurance is less than sixty (60) days, any premium due must be paid and actually received in full by the Company (or the intermediary through whom this Policy was effected) within the Period of Insurance.

21. Data Privacy

The Insured Person and/or Policyholder has agreed and consented that the Company may collect, use and process the Insured Person's and/or Policyholder's personal information (whether obtained in the application form or otherwise obtained) and disclose such information to the following, whether in or outside of Singapore: (i) its group companies; (ii) its (or its group companies') service providers, reinsurers, agents, distributors, business partners; (iii) brokers, the Insured Person and/or Policyholder's authorised agents or representatives, legal process participants and their advisors, other financial institutions; (iv) governmental / regulatory authorities, industry associations, courts, other alternative dispute resolution forums, for the purposes stated in the Company's Data Privacy Policy which include:

a. Processing, underwriting, administering and managing the Insured Person and/or Policyholder's relationship with the Company;

b. Audit, compliance, investigation and inspection purposes and handling regulatory / governmental enquiries;

c. Compliance with legal or regulatory obligations, risk management procedures and the Company's internal policies;

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d. Managing the Company's infrastructure and business operations; and

e. Carrying out market research and analysis and satisfaction surveys.

If the Policyholder submits information to the Company relating to an Insured Person, the Policyholder represents and warrants that the Policyholder:

a. has the authority to provide the Insured Person's information to the Company;

b. has informed the Insured Person about how and why the Company processes his/her personal information as well to whom (including the Policyholder) the Company may disclose his/her personal information and the Insured Person agrees and consents.

Note: Please refer to the full version of the Company's Data Privacy Policy found at https://www.aig.sg/privacy.

If you have any questions about the Company's collection, use and disclosure of personal information you may contact the Company's Data Protection Officer at singaporedataprotectionofficer@aig.com.

22. Feedback

Every effort is made by the Company to ensure that the Policyholder and Insured Person receive a high standard of service. For any feedback, the Policyholder or an Insured Person can send to: AIG Contact Us – https://www.aig.sg/contact-online.

The Policyholder should quote its name, the Insured Person's name and Policy number as shown in the Policy Schedule.

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Claims Procedure

Steps To Make A Claim

The Policyholder must submit the claim online via: https://www.aig.sg/home/claims/business-claims within ninety (90) days after the event which could give rise to a claim.

Compliance

The Company shall not be liable for any consequences arising by reason of the Insured Person's failure to obtain or follow a Medical Practitioner's advice and use such appliances or remedies as may be prescribed.

Claim Notification

a. The Company must be notified as soon as it is reasonably practical and in any event within thirty (30) days after the date of Accident or Sickness which leads to a claim.

b. Failure to comply with a. above may result in the Company's rejection of all or part of the claim. Reasons include, but are not limited to, if it is made so long after the event that the Company is unable to investigate it fully. Failure to comply with a. above may also result in the Insured Person not receiving the full amount claimed if the amount payable changes as a result of the delay.

Burden of Proof

If the Company alleges that by reason of any of the exclusions listed, an event is not covered by this Policy, the burden of proving the contrary shall be on the Claimant.

Claims Evidence/Information

a. The Company must be provided with all reasonable and necessary evidence required by the Company to support a claim within ninety (90) days after the date of Accident or Sickness which leads to a claim. Information provided to the Company to support a claim includes but is not limited to original reports, invoices and receipts, medical certificates and other documents (such as translation of a foreign-language document into the English language), confirmed by oath if necessary. The Company may request for additional information and/or documents depending on nature and circumstances of the claim in which case the Company will contact the Claimant.

b. If the Company does not receive the information it requires within the time period advised, the Company may reject the claim or withhold payment in the likelihood of a Valid Claim until the information it requires has been received.

c. Where medical certificates or reports are required, the Company will only accept original medical certificates or reports issued by the attending Medical Practitioner. For avoidance of doubt, medical certificates or reports issued by other practitioners, including Chinese Physician or chiropractors will not be accepted except as provided under 'Alternative Treatments and Medicines' Benefit (if applicable).

d. The Company may refuse to refund any expense for which the Claimant cannot provide original receipts and invoices.

e. The Company may require the Insured Person undergo a medical examination by Medical Practitioners nominated and selected by the Company, before the initial or additional Sum Insured can be paid, at the Claimant's own expense.

f. The Company may at its expense arrange an autopsy unless this is illegal in the country in which the autopsy is to be performed.

Settlement of Claim

a. A claim will be paid in accordance with the Policy terms and conditions. It can only be made once the Company has received the information it requires to investigate and verify the claim (including information supplied) and it is satisfied that the claim falls within the Policy. A claim will generally be paid immediately unless the claim is for events like Permanent Disabilities or for any periodic payment which will be paid according to the terms set out in the Policy.

b. The Sum Insured for each Benefit is payable as specified on the Schedule of Benefits. Any claim payment that the Company makes under this Policy will not exceed the limit shown in the Schedule of Benefits for the claim event. The Sum Insured under each Benefit is included only for the events specified in the Policy Schedule.

c. Unless otherwise specified in this Policy, all payments or reimbursements are payable to the Policyholder or at Policyholder's written request to the Insured Person.

d. In the course of the Company's claims process, the Claimant is to render full cooperation to the Company and to its appointed service providers, vendors and experts, including providing face to face interviews, if and when required.

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e. The Company shall not be committed by any notice or any trust charge, a lien, assignment or other dealing with the Policy and the receipt of the Policyholder or Insured Person for any Sum Insured payable herein shall in all cases be effectual discharge of liability of the Company.

Subrogation

In the event that a third party is held liable for all or part of any claim paid under this Policy, the Company may exercise its legal right to pursue the third party to recover its outlay. The Claimant, upon the Company's request, will agree to and permit the Company to do such acts and things as may be necessary or reasonably required for the purpose of exercising this right. The Company will pay the costs and expenses involved in exercising its right against the third party.

Rights to recovery

If the Company makes a payment and subsequently is made aware that the claim is not payable, the Company has the right to recover the amount paid from the Policyholder and/or Insured Person

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AIG Travel Protect Assistance Services

AIG Travel Protect assistance is available for medical emergencies or requests including 24/7 access to appropriate medical facilities and emergency transportation services as well as travel advice before, during and after Business Trips.

Important contact information

AIG Travel Protect: + 65 6419 3002

When AIG Travel Protect is contacted for assistance, the following information should be provided:

1. The Insured Person's name, Policyholder name and Policy number;
2. The telephone number at which the Insured Person can be reached; and
3. The nature of the assistance.

Important Notes

If an Insured Person requires Hospitalisation as an In-patient, emergency transportation or to return to Country of Residence for any reason covered by this Policy, AIG Travel Protect must be contacted and its advice or instructions followed. Failure to do so may prejudice a claim under this Policy.

aig.sg

Contact:

AIG Asia Pacific Insurance Pte Ltd.

AIG Building
78 Shenton Way, #09-16
Singapore 079120

Tel: 6419 3033

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