

E-TRAVEL GUARD INSURANCE POLICY

WHEREAS the Insured by a proposal, which shall be the basis of this contract and be deemed to be incorporated herein has applied to the Company for the Insurance hereinafter defined.

IN CONSIDERATION of the payment of the Premium, the Company agrees to insure the Insured Person(s) against loss covered by this Policy subject to and in accordance with the exclusions, limitations, provisions, terms and conditions hereinafter described or endorsed hereon.

DEFINITIONS

1. **Insurer, Company, Us, We** means RHB Insurance Berhad
2. **The Insured** means between the age of eighteen (18) and eighty (80), both ages inclusive, on the exact date of birth who is named under the policy schedule/certificate of insurance
3. **Insured's Spouse or Spouse** means the legally married spouse of the Insured, between the age of eighteen (18) and eighty (80) (both ages inclusive), on the exact date of birth. For the purpose of this policy, a Common Law of Marriage is not considered a legal marriage except as provided under the Law Reform (Marriage & Divorce) Act 1976
4. **Children** means the Insured's acknowledged natural children, step-children, legally adopted or foster children who are aged between 31 days and 19 years of age and up to 23 years of age, on the exact birth of age if still attending studies as a student in a tertiary educational institution, unmarried and not gainfully employed on the effective date of insurance
5. **Insured Person(s) or Family Cover** means the Insured, the Insured's legal spouse and all the Insured's Children who are named in the Policy Schedule/ Certificate of Insurance under the one and same Policy
6. **Policy Schedule/Certificate of Insurance** means the policy schedule/Certificate of Insurance, which is attaching to and forming part of the Policy
7. **Effective date of Insurance** means the date on which insurance under the policy commenced, as stated in the Policy Schedule/ Certificate of Insurance
8. **The Journey** means the journey commences when the Insured Person(s) leaves the place of residence in Malaysia or business (whichever is the later) in Malaysia directly to the destination either in Area 1 or Area 2 as specified on the Schedule of Benefits and ceases on the first to occur when:-
 - 8.1 Insured Person(s) returns to the place of residence or business (whichever is the earlier) in Malaysia
 - 8.2 The expiry of the Period of Insurance shown in the Certificate of Insurance/ Policy Schedule
9. **Common Carrier or Public Conveyance** means any mode of transportation (sea, air, railway and road) which is available to the general public and which is fully and lawfully licensed to carry fare-paying passengers.
10. **Hospital** means an establishment duly constituted and registered as a hospital for the care and treatment of sick and injured persons as paying bed-patients, and which:-
 - 10.1 has facilities for diagnosis and major surgery
 - 10.2 provides 24 hours a day nursing services by registered and graduate nurses
 - 10.3 is under the supervision of a Physician, and
 - 10.4 is not primarily a clinic; a place for alcoholics or drug addicts; a nursing, rest or convalescent home or a home for the aged or similar establishment
11. **Medically Necessary or Medical, Hospital and treatment expenses** necessarily incurred means a medical service which is :-
 - 11.1 consistent with the diagnosis and customary medical treatment for a covered Disability
 - 11.2 in accordance with standards of good medical practice
 - 11.3 not for convenience of the Insured Person(s) or the Physician

11.4 not of an experimental, investigational or research nature

11.5 and for which the charges are fair and reasonable for the Disability

12. **Medical Practitioner/Physician/Surgeon** means any person (other than the Insured Person or the member(s) of Insured's family) qualified by degree in Western Medicine or holds a certificate of specialist accreditation and legally licensed and authorised to practice his/her scope of medicine and/or surgery specialty in the geographical area/ territorial limit of practice.
13. **Accident** means any event of violent, accidental, external and visible nature which shall independently of any other cause be the sole cause of bodily injury.
14. **Bodily Injury** means bodily injury solely caused by an Accident.
15. **Sickness** means sickness or disease contracted and commencing during the period of insurance and such sickness means a physical condition marked by a pathological deviation from the normal healthy state.
16. **Disability** means a Sickness, Disease, Illness or the entire Bodily Injuries arising out of a single or continuous series of causes.
17. **Pre-existing Illnesses** means illness/disability that existed before the effective date of insurance of an Insured Person(s) and for which the Insured is receiving treatment or shown manifestations/symptoms irrespective of whether the Insured Person(s) was aware or should have reasonable been aware. Consultation with a medical doctor for any sign or pain or discomfort shall constitute a manifestation or symptom of a disability
18. **Congenital Conditions** means any medical or physical abnormalities existing at the time of birth, as well as neonatal physical abnormalities developing within six (6) months from the time of birth, whether known or unknown to the Insured Person(s)
19. **Permanent Disablement** means total and permanent disablement due to sickness or accident which results in a condition where there is not at any time or any work or occupation that the Insured Person(s) can ever sufficiently do or follow to earn or obtain wages, compensation or profit permanently.
20. **Loss of speech** means the disability in articulating any three of the four sounds which contribute to the speech such as Labial sounds, the Alveololabial sounds, the Palatal sounds and the Velar sounds or total loss of vocal cord or damage of speech center in the brain resulting in Aphasia.
21. **Loss of Hearing** means the complete and irrecoverable and irremediable loss of hearing.
22. **Any One Conveyance** means the number of Insured Person(s) under any one occurrence or whilst a number of Insured Person(s) are traveling in a same conveyance.
23. **Hijack** means unlawful seizure and control of a public conveyance from the regular crew by use or threatened use of violent means

GENERAL PROVISIONS

1. **Individual or Family cover**
Where an individual or family cover policy is issued, the total liability of the Company in aggregate shall not exceed the compensation shown in each section subject to the terms exclusions therein specified.
2. **Commencement of insurance**
Insurance shall commence on the effective date of insurance as stated in the policy schedule/certificate of insurance and ceases on expiry of the policy or return of the Insured Person(s) to Malaysia whichever comes first
3. **Limit of liability in respect of Death or Permanent Disablement for number of Insured Persons**
It is hereby declared and understood that otherwise subject to the terms, exclusions, provisions and conditions contained in the policy or endorsed thereon, the limit of liability of the Company in respect of Death or Permanent Disablement for a number of Insured Persons shall be limited to a MAXIMUM of RM5000,000.00 FOR ANY ONE CONVEYANCE. In the event the aggregate exceeds the

- said MAXIMUM limit, the Company shall settle the claims of respective Insured Person(s) on a proportionate basis
4. The maximum period of cover for any one journey travels by the Insured Person(s) during the period of insurance must not exceed 90 days.

DESCRIPTION OF BENEFITS

Section 1 – Death or Permanent Disablement

In the event during the journey, the Insured Person(s) sustains bodily injury resulting in death or permanent disablement within twelve (12) months from the date of accident, the Company will pay the limit as described hereunder:-

Coverage	% of Principal sum insured
Death	100%
Permanent disablement (total paralysis from neck down)	100%
Loss of two Limbs (from ankle or wrist down)	100%
Permanent loss of sight of both eyes	100%
Permanent loss of Hearing of both ears	100%
Loss of Sight of one eye/Hearing in one ear and one Limb	50%
Loss of Sight of one eye or Hearing in one ear	50%
Loss of one Limb (from ankle or wrist down)	50%
Loss of Speech	75%

In the event that a total 100% having been paid during the period of this policy, all insurance hereunder shall immediately cease to be in force. All other losses smaller than 100% if having been paid shall reduce the coverage by that amount from the policy.

Section 2 – Medical/ Hospital Expenses

Reimbursement of Medical, Hospital and Treatment expenses (including the cost of emergency dental but excluding replacement of dentures) necessarily incurred during the journey as a direct result of bodily injury sustained by or sickness of the Insured Person(s) occurring during the period of insurance.

Medical/Hospital Expenses shall include follow up treatment (including the cost of a private ambulance or professional home nursing fees) incurred by the Insured Person(s) within three (3) months after his/her return to Malaysia.

The amount payable under this Section must not exceed the maximum limit set forth in the Schedule of Benefits for any one disability and subject to an excess of RM50 on each and every claim occurring during the period of insurance.

Exclusion to Section 2

Surgery or medical treatment, which in the opinion of the registered medical practitioner treating the Insured Person(s) that can be reasonable delayed until his/her return to Malaysia

Section 3 - Daily Hospital Cash

The Company shall pay a daily hospital cash for the first twelve (12) hours and thereafter on each full day of twenty four (24) hours of Hospital Confinement of up to the maximum limit set forth in the Schedule of Benefits for Any One disability.

For avoidance of doubt, hospital confinement means the Insured Person(s) being duly registered and admitted as an inpatient in a hospital as a direct result of bodily injury sustained by or sickness occurring during the period of insurance.

Section 4 - Baggage and Personal effects

The Company will reimburse the Insured Person(s) for any loss or damage to baggage taken, or purchased on the journey (including clothing and personal effects worn or carried on the person, trunks, suitcases and the like receptacles), occurring during the journey at any one Period of Insurance and owned by the Insured Person(s).

If the Insured Person(s) purchases a comparable replacement for the lost article, we will pay the replacement cost provided that the lost article was not more than 2 years old at the date of loss. If the Insured Person(s) cannot prove the age of the lost article, or if the article is more than 2 years old, or if the article is not replaced, we will deal with the claim on the basis of original purchase value of the article less depreciation or cost of repair, whichever is the lesser. If the article is proven to be beyond economical repair, a claim will be dealt with under this policy as if the article had been lost.

In the event of loss or damage to any property insured forming part of a pair or set, the Company liability shall not exceed a proportionate part of the value on the pair or set. We shall not be liable for more than the amount set forth in the schedule of benefits in respect of Any One Article or Pair or Set of articles. The maximum payable for any one lost incurred by the Insured Person(s) must not exceed the maximum limit as set forth in the schedule of benefits and subject to an excess specified therein on each and every claims occurring during the period of insurance.

Jewellery, articles consisting in whole or in part of silver, gold or platinum, objects made with precious materials, precious stones, pearls, watches, articles trimmed with or made mostly of fur, hunting rifles, musical instruction, portable photographic, cinematographic, computer or telephone equipment: equipment for recording of sound or pictures and its accessories, are only covered against THEFT and/or ARMED ROBBERY and only if carried by the Insured Person(s) or while deposited in a hotel safe.

Exclusion to Section 4

- 4.1 This benefit does not cover any loss, theft or damage to:-
Animals, documents, identity papers, bonds, stamps, credit card and payment cards, transport tickets, bicycle, cash, stocks and securities, skis, sailboards, automobiles and automobile equipment, trailers and caravans and boats, equipment for professional use, sport equipment while in use, objects of art, antiques, collector's items furniture, eye glasses, contact lenses, hearing aids, artificial teeth or dental bridges, perishables and consumable goods and business goods or samples
- 4.2 Benefits will not be provided for any loss or damage resulting in whole or in part from:-
wear and tear or gradual deterioration, climatic conditions, insect or vermin, inherent vice or damage, confiscation or expropriation by order of any government or public authority, seizure or destruction under quarantine or custom regulation, transporting contraband or illegal trade, mysterious disappearance and property left unattended in a public place or as a result of the Insured Person(s)'s failure to take due care and precautions for the safeguard and security of such property.
- 4.3 We will not pay for claims in respect of
mechanical or electrical breakdown or derangement, or damage sustained due to any process initiated by an Insured Person to repair, clean or alter any property, cost of reproducing data whether recorded on tapes, cards and discs or otherwise, breakage of brittle or fragile articles, and loss or damage to property otherwise reimbursed by a common carrier or a hotel.

Section 5 - Baggage Delay

The Company will reimburse the Insured Person(s) up to the maximum limit set forth in the Schedule of Benefits for emergency purchases of essential items of clothing or requisites consequent upon temporary deprivation of baggage for at least 8 hours from time of arrival at destination abroad due to misdirection in delivery as confirmed by the airline or shipping line. Insured Person(s) cannot claim under both Section 4 and 5 for the same

Exclusions to Section 5

This benefit does not cover any :-

- 5.1 any delay due to claims not declared to a competent person of the Airline Company as soon as the Insured Person(s) is aware that the baggage is late or lost.

5.2 purchases made after delivery of the baggage to the Insured Person(s).

Section 6 - Personal Liability

The Company will indemnify the Insured Person(s) for legal liability to a third party arising during the Period of Insurance as a result of:-

Accidental bodily injury to third party;
Accidental loss or damage to property belonging to third party;
Third parties costs and expenses recoverable from the Insured Person(s); and
The Insured Person(s) costs and expenses incurred with our written prior consent.

Except with the written consent of the insurer, no Insured Person(s) is entitled to admit liability on their behalf or to give any representation or other undertaking binding upon them. The Insurer shall be entitled to conduct all proceedings arising out of or in connection with claims in the name of the Insured Person(s) and to instruct his/her own choice for this purpose.

Specific Exclusions to Section 6

This benefit shall not be payable due to:-

- 6.1 any deliberate and wrongful damage or harm caused by the Insured Person(s).
- 6.2 any non-pecuniary loss;
- 6.3 liability arising directly or indirectly by or in connection with any mechanically propelled vehicle, aircraft or watercraft where the Insured Person(s) is the owner, driver or pilot thereof or if the person having custody or control of such pilot or person is a servant, agent or person for whom the Insured Person(s) is legally responsible.
- 6.4 any damage caused by animals owned or kept by the Insured Person(s) or by persons for whom he/she is legally responsible;
- 6.5 accidental loss or damage to property belongings to or held in trust by or in custody or control of the Insured Person(s) or any of his/her employees or any member of his/her family or household;
- 6.6 any liability resulting from the Insured Person(s) practice of his/her profession or trade or liability attaching to the Insured Person(s) by reason of an express term of any contract.
- 6.7 bodily injury or sickness of any person who is under a contract of employment, service or apprenticeship with the Insured Person(s) by reason of an express term of any contract.
- 6.8 damage caused by or to buildings or parts of building owned, rented or occupied by the Insured Person(s);
- 6.9 liability for which indemnity is provided under any other contact of insurance in the name of the Insured Person(s).
- 6.10 Judgements that are not in the first instance delivered by or obtained from a Court of competent jurisdiction within Malaysia

Section 7 - Repatriation (mortal remains)

Following the accidental death of the Insured Person(s), the Company will pay the Insured Person(s) legal representative the lump sum payment as shown on the Schedule of Benefits for the cost of returning the body or ashes of the Insured Person(s) to his/her place of residence.

Exclusions to Section 7

This benefit does not cover death directly or indirectly caused by or arising from or traceable to death due to natural causes or sickness.

Section 8 - Travel Delay

If the departure of the scheduled public conveyance in which the Insured Person(s) has arranged to travel is delayed in excess of eight (8) hours from the time specified in the itinerary due to adverse weather or mechanical breakdown of the aircraft/sea vessel which is beyond the knowledge and control of the Insured Person(s), the Company will pay the Insured Person(s) up to the maximum limit set forth in the Schedule of Benefits.

In addition, if any of the planned journey is cancelled due to the delay, but the Insured Person(s) still continue with the rest of

the journey, we will reimburse the Insured Person(s) for irrecoverable deposits or charges paid in advance or contracted to be paid for the benefit of those parts that are cancelled, up to the maximum benefit set forth in the Schedule of Benefits. The delay must be verified in writing by the operator(s) of the conveyance or their handling agent(s) on the number of hours delayed and the reason for the delay. If the Insured Person(s) is entitled to a refund of all or part of such expenses from another source, we will only be liable for the excess of the amount recoverable from such other source

Exclusion to Section 8

This insurance does not cover a claim:-

- 8.1 due to strike or industrial action existing at the date the Insured Person(s) purchases this insurance
- 8.2 due to the Insured Person(s) late arrival at the airport or port after check-in or booking-in time (except for the late arrival due to strike or industrial action)
- 8.3 if the scheduled common carrier provides alternative means of transportation at no additional cost to the Insured Person(s) which will influence and assist continuing the scheduled journey. The alternative schedule must be accepted and any consequent costs do not constitute a claim.
- 8.4 Failure of the Insured Person(s) to check in according to the itinerary supplied to the Insured Person(s) to obtain a written confirmation from the carriers or their handling agents of the number of hours of delay and the reason for such delay

Section 9 - Missed Travel Connection

The Company will reimburse the Insured Person(s) up to the maximum amount set forth in the Schedule of Benefits by evidence of receipts/bills in respect of hotel accommodation and meals or refreshments if not provided or compensated by the carrier or any third party in the event the confirmed onward connecting scheduled flight is missed at the transfer point due to the late arrival of the Insured Person(s) incoming confirmed connecting scheduled flight and no alternative onward transportation is made available to such Insured Person(s) within six (6) hours of the actual arrival time of the Insured Person(s) incoming flight. It is precedent condition to the liability that the flight misconnection details that to be obtained by the Insured Person(s) must be verified in writing by the operator(s) of the airline or their handling agent(s).

Section 10 - Hijacking

We shall pay the Insured Person(s) for the first eight (8) hours and thereafter on each twelve (12) hours, the amount according to the limit set forth in the schedule of benefits and up to its maximum limit if the scheduled public conveyance that the Insured Person(s) is traveling in during the journey is hijacked.

Exclusion to Section 10

This benefit will not apply in the event the Insured Person(s) is directly or indirectly participating in the hijack.

Section 11 – Loss or Theft of Travel Documents/ Personal Money

The Company will reimburse the Insured Person(s) for the loss or theft of his/her travel documents (passport, travel tickets and other relevant travel documents) or/and personal money (cash, bank or currency notes, postal or money) arising out of theft or loss occurring during the journey at any one period of insurance. Personal money must be kept with the Insured Person(s) at all times except when in a hotel safe. Loss or theft of Travel Documents / Personal Money shall subject to an excess specified in the schedule of benefits on each and every claims occurring during the period of insurance.

The Company will also reimburse any additional travel and accommodation expenses incurred for the purpose of obtaining replacement passports, travel tickets and other relevant travel documents

Exclusion to Section 11

- 11.1 This benefit shall not be payable due to any deliberate and wrongful damage caused by the Insured Person(s).
- 11.2 Loss or damage arising from delay or confiscation or detention by customs or other officials

- 11.3 Loss or damage whilst in the custody of an airline or other common carrier, unless reported immediately on discovery and in the case of airline a property irregularity report is obtained, a claim must be made against the carriers and other authorities
- 11.4 Losses not reported to the police at the place of loss within 24 hours for the purpose of obtaining a written statement to substantiate the claim
- 11.5 Loss or theft of property left unattended in a public place or as a result of the Insured Person(s) failing to take due care and precautions for the safeguard and security of such property

Section 12 - Loss of deposit due to cancellation or curtailment

Loss of deposit due to Cancellation

The Company will reimburse the actual, necessary expenses incurred by the Insured Person(s) due to loss of travel or accommodation expenses paid in advance by the Insured Person(s) which is irrecoverable from any other source consequent upon the cancellation of the journey occurring between the date of issue of the policy and date of commencement of the journey caused by :-

- 12.1 Death, serious bodily injury or sickness or compulsory quarantine of the Insured, spouse, parent, parent-in-law, child, brother or sister in a hospital
- 12.2 unexpected, outbreak of strike, riot or civil commotion or any natural disaster including but not limiting to flood arising out of the circumstances beyond the control and knowledge of the Insured Person(s)

Curtailment

This coverage will refund the unused and non-refundable part of the Insured Person's journey in proportion to the non-used days consequent upon the Insured Person(s) having return to Malaysia following the unexpected event as specified in item 12.1 or 12.2 or the scheduled public conveyance that the Insured Person(s) is traveling in during the journey is hijacked.

Curtailments means abandonment by return to place of residence in Malaysia of a planned journey after the arrival at the booking destination as shown on the booking invoice.

Exclusion to Section 12

We will not pay for claims arising directly or indirectly from, in respect of, or due to:-

- 12.1 Government regulation or Act, delay or amendment of the booked journey (including error, omission or default) by the provider of any service through whom the journey was booked
- 12.2 The Insured Person(s) business, financial or contractual obligation or those of the Insured Person(s) traveling companion.
- 12.3 Insured Person(s) disinclination to travel or financial circumstances
- 12.4 A result of unlawful act, or criminal proceedings of any person on whom the booked trip depends, other than attendance, under the subpoena as a witness at a Court of Law
- 12.5 The Insured Person(s) failure to notify travel agent/tour operator or provider of transport or accommodation immediately it is found necessary to cancel or curtail the travel arrangement

GENERAL EXCLUSIONS

This policy does not cover:-

- 1. Death or Disablement or any other loss caused directly or indirectly by:-
 - 1.1 War, invasion, act of foreign enemy, hostilities or warlike (whether war be declared or not), civil war.
 - 1.2 Mutiny, riot, strike, civil commotion, military or popular rising insurrection, rebellion, revolution, military or usurped power.
 - 1.3 Martial law or state of siege or any of the events or causes which determine the proclamation or maintenance of martial law or state of siege

- 1.4 Any act of terrorism.
For this purpose of this exclusion an act of terrorism means an act, including but not limited to the use of force or violence and or the threat thereof, of any person or group(s) of persons, whether acting alone or on behalf of or in connection with any organisation (s) or government (s), committed for political, religious, ideological or similar purposes including the intention to influence any government and or to put the public, or any section of the public in fear.
- 1.5 Any loss, damage, cost or expense of whatsoever nature directly or indirectly caused by, resulting from or in connection with any action taken in controlling, preventing, suppressing or in any way relating to 1. 1 to 1.5 above.
- 1.6 Insanity, suicide (whether sane or insane), intentional self-inflicted injuries or any attempt thereat, willful exposure to danger (other than in an attempt to save human life), and/or any physical defect or deformity/impairment
- 1.7 Intoxication by alcohol or drugs (other than those prescribed by a qualified registered medical practitioner).
- 1.8 Childbirth, miscarriage, caesarean operation, abortion, pregnancy or any complications arising thereof, venereal disease or infection.
- 1.9 Provoked murder or assault.
- 2.0 Traveling on, or against medical advice, or where the journey is made solely for the purpose of obtaining medical treatment
- 2. Death or Disablement or any other loss sustained by the Insured Person(s):-
 - 2.1 While traveling in the aircraft and other common carrier as a member of the crew, except as a fare-paying passenger in the common carrier licensed for passenger service. For the purpose of this exclusion the Insured Person(s) would not be covered if he/she is involved in any technical operation or navigation whilst in the aircraft or other common carrier;
 - 2.2 While committing or attempting to commit any criminal act
 - 2.3 While engaging in sport or games in a professional capacity or where the Insured Person(s) would or could earn income or remuneration from engaging in such sports or games, martial arts, a participant in riot or/and strike activities
- 3. Death or Disablement or any other loss consequent upon the Insured Person(s) engaging in racing (other than on foot), motor rallies and competitions, mountaineering (reasonably requiring the use of ropes and guides), rock climbing, hiking/trekking in remote area unless with licensed guides, pot-holing, ice-hockey, polo-playing, steeple-chasing, winter skiing, yachting, water-skiing, under-water activities involving the use of breathing apparatus or using wood-working machinery driven by mechanical power, pace-making or participating in any speed-test, reliability or other speed trials and any activity involving the Insured Person(s) being airborne (whether suspended or not) not limiting to parachuting, hand gliding, bungee jumping, sky diving and high diving
- 4. Death or Disablement directly or indirectly caused by or contributed to or by or arising from:
 - 4.1 Ionising radiation or contamination by radioactivity from any nuclear waste from the combustion of nuclear fuel. For the purpose of this exception combustion shall include any self-sustaining process of nuclear fission;
 - 4.2 Nuclear weapons material.
 - 4.3 Any illegal activities, loss resulting directly or indirectly from action taken by Government Authorities including confiscation, seizure, destruction and restriction
 - 4.4 Loss of or damage to hired or leased equipment; testing of any kind of conveyance
 - 4.5 Employment on merchant vessels, naval, military or airforce service or operations, regular or temporary, military or police duties, overseas secondment as part of the Insured Person(s) occupation manual

work in connection with any trade, employment or profession.

- 4.6 Offshore activities like diving, oil-rigging, mining, aerial photography or handling of explosives
 - 4.7 Survey of offshore installations or facilities under construction including survey from aerial conveyance
 - 4.8 Air travel other than as a fare paying passenger on a regular scheduled airline or licensed chartered aircraft.
5. All pre-existing Illnesses and Congenital Conditions clauses shown in the Definition Section thereof.
 6. The insurance shall immediately cease to be in force in the event of the Insured Person(s) traveling more than 90 days for Any One Journey, occurring during the period of insurance.
 7. Death or Disablement directly or indirectly caused by or arising out of or consequent upon or contributed to by Acquired Immune Deficiency Syndrome (AIDS) or AIDS Related Complex (ARC) howsoever this syndrome has been acquired or may be named.

GENERAL CONDITIONS

1. Termination

1.1 Termination by either the Company or the Insured

(Only applicable to annual policy).

The Company or the Insured Person may cancel the policy at any time by giving 14 days written notice to either parties hereto and provided that no claims has been made by the Insured Person during the current policy year, the Insured Person shall be entitled to a prorated refund of premium paid.

1.2 Automatic Termination

(Only applicable to annual policy)

This Policy shall terminate immediately on the earlier of the following events:

- 1.2.1 Immediate upon attainment of the Insured aged 80, on the exact date of birth
- 1.2.2 On the death or permanent disablement on which 100% of principal sum insured has been paid in respect of that Insured Person(s)

2. Premium

2.1 Payment

Premiums payable shall be either annually or per journey due and is payable by the Insured either by charging to her/his RHB Bank account or credit card or by payment of cash or cheque. .

2.2 Renewal Payment

(Only applicable to annual policy)

The policy renewal shall be one year after the effective date and annually thereafter. On each such anniversary, this policy is renewable at the rates in effect at that time when the policy was first incepted and shall not increase under normal circumstances.

2.3 Reinstatement

(Only applicable to annual policy)

Policy maybe reinstated at the Company's discretion subject to:-

- 2.3.1 written application by the Insured, and
- 2.3.2 evidence of insurability satisfactory to the Company, and
- 2.3.3 payment of total premiums due if any.

3. Payment of premium

3.1 Single Trip Policy

Coverage and claims are valid only subject to premium warranty clause and the Insured Person compliance of terms and conditions contained herein. We reserve the right to refuse any coverage and or reject any claims resulting from non payment of premium

3.2 Annual Trip Policy - Premium warranty

It is a fundamental and absolute special condition of this contract if insurance that the premium due must

be paid and received by the insurer within sixty (60) days from the inception date of this Policy/ Endorsement/ Renewal Certificate.

If this condition is not complied with then this contract is automatically cancelled and the insurer shall entitled to the pro-rata premium for the period that have been on risk.

Where the premium payable pursuant to this Warranty is received by an authorised agent of the insurer, the payment shall deemed to be received by the insurer for the purposes of this Warranty and the onus of proving that the premium payable was received by a person, including an insurance agent, who was not authorised to receive such premium shall lie on the insurer.

Subject otherwise to the terms and conditions of this Policy.

4. Renewal (only applicable to annual policy)

It shall not be incumbent on the Company to give notice that any premium for renewal is due and such premium shall be deemed to be due on the date on which the policy expires and must be paid within 14 days thereafter. The Company shall remain liable for thereunder if by the last of such days the premium is actually paid unless the Company or the Insured shall have given notice that the Insurance would not be renewed

5. Claim Procedures

5.1 On the happening of any occurrence likely to give rise to a claim under this Policy, written notice shall be given to the Company within 30 days after the date of occurrence.

5.2 The Insured Person(s) must :-

5.2.1 Send to us immediately any writ, summons, letters or other document at his/her expenses, or at the expenses of any person representing the Insured Person(s), provide us with certificates, information and other documents (including where necessary translation) as we may reasonably require

5.2.2 The Insured Person(s) must not :-
admit or deny any claim made by someone else against the him/her or make any agreement with him/her

5.2.3 We shall be entitled to:-
request an examination by a medical referee appointed by us for a non-fatal injury;
the right to negotiate, settle or defend any such claim in his/her name and on the behalf;
use any legal right of recovery you have an autopsy and/or post mortem examination in the event of death;
at our option choose to make payment, reinstate or repair the lost or damaged property.

The Company liability is limited solely to the payment of the benefits the Insured Person(s) is entitled to under this policy. No liability is assumed by the Company, for the availability, quality or results of any medical treatment or other service, or the Insured Person(s) failure to obtain any treatment or service covered by the terms of this policy.

6. Proof of loss

The Insured Person(s), his beneficiary or his/her legal representative must furnish the Company with proof of loss within 30 days after a loss occurs or earlier if reasonably possible. Failure to comply with these conditions can invalidate any claims under this policy

7. Interpretation

This Policy, including the proposal form, Policy Schedule/Certificate, endorsements, and amendments if any, shall be read together as one contract and any word or expression to which a specific meaning has been attached shall, unless the context otherwise requires, bear that specific meaning wherever it may appear.

8. Legal Proceeding

No action at law or in equity, shall be brought to recover on the Policy prior to the expiration or Ninety (90) days after proof of claim has been filed in accordance with the requirements of this Policy.

9. Policy Shall Be Void

9.1 if the Proposals/Enrolment and Declarations made by the Insured or any written statement given by Insured is untrue in any respect or if any material

fact affecting the risk is incorrectly stated or represented in or is omitted from these documents stated herein above and/or;

- 9.2 if the Insured makes any claim, which is fraudulent or exaggerated or if the Insured makes any false declaration or statements in support of any claim.
10. **Benefits**
In the event that the Insured owns more than one (1) **E-Travel Guard Insurance** Policy at the time of loss, the Insured is only entitled to claim from one (1) policy and the Company limit of liability shall not exceed the maximum limit as set forth and provided therein.
11. **Payment of benefits**
All benefits payable under this policy shall be paid to the Insured Person and in the case of death, to the Insured's beneficiary if stated otherwise to the estate. Such payments shall be a full and final discharge to the Company. Benefits payable under this policy are in Ringgit Malaysia
12. **Duty of care**
The Insured Person(s) shall act in a prudent manner and exercise reasonable care for the safety and supervision of his/her property as if uninsured and to prevent loss, damage, accident, injury or illness.
13. **Observance**
Our liability shall be conditional on the Insured Person's observance on the terms of the policy
14. **Valuation**
The Company will not pay more than the actual cash value of the property or article at the time of loss. Damage will be estimated according to actual cash value with proper deduction for depreciation. At no time will payment exceed what it would cost to repair or replace the property or article with material of like kind and quality.
15. **Other Insurance**
If at time of any bodily injury or liability hereby insured there be any other subsisting insurance whether effected by the Insured Person or by other person or persons covering such bodily injury or liability the Company shall not be liable to pay or contribute more than its retable proportion of such liability
16. **Premium Refund**
No refund is allowed once the policy or certificate of insurance is issued.
17. **Interest**
No amount payable under this Policy shall carry interest

HOW TO LODGE A COMPLAINT

If you are unhappy with any aspect of our service, we would like to hear from you.

You can make your complaint in whatever form is most convenient to you either via a phone call to our receptionist or alternatively, by writing, faxing or e-mailing your complaint to :

Complaints Handling Unit
RHB Insurance Berhad
Level 8 Tower 1
RHB Centre
Jalan Tun Razak
50400 Kuala Lumpur
Fax : 03-92812729
E-mail : complaints_unit@rhbinsurance.com.my

We will seek to respond to your complaint within [14] days. If we cannot resolve the matter within the aforesaid time frame when a matter is complex, you will be informed of the progress made with your complaint.

It will help us to respond promptly if you give the following details :

1. Your name, address and contact no.
2. Covernote no./ Policy no./ Claim no.

If after taking these steps, you are still dissatisfied, you may write to :

Financial Mediation Bureau (FMB)
25th Floor, Dataran Kewangan Darul Takaful
4, Jalan Sultan Sulaiman
50000 Kuala Lumpur
Tel : 03-2272 2811
website : www.fmb.org.my

If the Mediator makes an award against the Company, you are required to inform the Mediator of your decision to accept or deny the award within 14 (fourteen) days.

If you do not accept the award, you may reject the decision of the Mediator. You are free to institute a court proceedings against the Company or refer it to Arbitration.

Alternatively you may put forward your dissatisfaction over the conduct of the Company by writing to CSB giving details of your complaint and particulars of your policy to :

Customer Service Bureau (CSB)
Jabatan Pengawalan Insurans
Bank Negara Malaysia
Peti Surat 10922
Jalan Dato Onn
50480 Kuala Lumpur

RHB Insurance Berhad has appointed International SOS (M) Sdn Bhd (hereinafter referred to as "SOS") to provide the following International & Domestic Medical Assistance Services described below as an additional benefit to you/The Insured Person.

This service is outside the scope of our obligations under this policy and we will not be liable in any way whatsoever in the event of any failure by SOS to render services or any negligence (willful or otherwise) on the part of SOS in rendering the services.

INTERNATIONAL MEDICAL ASSISTANCE SERVICES

SOS services will be provided to the Insured Person who is traveling outside Malaysia for a period not exceeding ninety (90) consecutive days on any one trip.

Travel Information Services

1. **Inoculation & Visa Information**
SOS will assist you/ the Insured Person by providing information concerning visa and inoculation requirements for foreign countries worldwide.
2. **Interpreter Referral**
SOS will provide the names, telephone numbers and, if possible and requested, hours of opening of interpreters' office in foreign countries.
3. **Lost Luggage Assistance**
SOS will assist you if you have lost your luggage while traveling outside Malaysia by providing directions for recovery.
4. **Legal Referral**
SOS will provide you/The Insured Person with name, address, telephone numbers and if available the office hours of lawyers and legal practitioners.
5. **Arrangement of Bail Bond**
SOS will arrange the bail bond for your conditional release for non-criminal offence when travelling overseas. The provision of financial guarantee is subject to SOS first securing payment from your/the Insured Person credit card or from funds obtained from you/ the Insured Person family.
6. **Emergency Message Transmission**
In the event of an emergency or a hospital confinement, SOS will undertake to keep your/the Insured Person immediate family informed.

The above Services are purely on referral or arrangement basis. SOS and RHB Insurance Berhad shall not be responsible for any third party expenses.

Medical Assistance

1. **Telephone Medical Advice**
SOS will arrange for the provision of medical advice to you/the Insured Person over the telephone.
2. **Medical Service Provider Referral**
SOS will provide you/the Insured Person, upon request, the name, address, telephone number and, if available, office hours of physicians, hospitals, clinics, dentists and dental clinics (collectively "Medical Service Providers"). SOS will not be responsible for providing medical diagnosis or treatment. Although SOS will make such referrals, it cannot guarantee the quality of the Medical Service Providers and the final selection of a Medical Service Provider will be your/the Insured Person's own decision. SOS, however, will exercise care and diligence in selecting the Medical Service Providers.
3. **Delivery of Essential Medicine**
SOS will arrange to deliver to you/the Insured Person the essential medicine, drugs and medical supplies that are necessary for your /the Insured Person care and/or treatment but which are not available at your/the Insured

Person location. The delivery of such medicine, drugs and medical supplies will be subject to the laws and regulations applicable locally. SOS will not pay for the costs of such medicine, drugs or medical supplies and any delivery costs thereof.

4. **Guarantee of Medical Expenses Incurred For Hospitalisation**
SOS will assist you/the Insured Person by guaranteeing on your behalf, the medical expenses incurred during your/the Insured Person hospitalization. The provision of financial guarantee is subject to SOS first securing payment from your/the Insured Person credit card or from funds obtained from your/the Insured Person's family.
5. **Emergency Medical Evacuation**
SOS will arrange for the provision of air and/or surface transportation, medical care during transportation, communications and all usual ancillary services required to move you/the Insured Person to the nearest hospital where appropriate medical care is available. SOS will arrange for the provision of appropriate communication and linguistic capabilities, mobile medical equipment and medical escort crew.
6. **Emergency Medical Repatriation**
SOS will arrange for your return to the Home Country or Usual Country of Residence following the Emergency Medical Evacuation and subsequent hospitalisation outside Malaysia. SOS will arrange for the provision of appropriate communication and linguistic capabilities, mobile medical equipment and medical escort crew.
7. **Repatriation of Mortal Remains**
SOS will arrange for the transportation of the Insured's /The Insured Person's mortal remains to the Home Country or Usual Country of Residence or arrange, if requested by the Insured's family, arrange for local burial at the place of death, subject to any governmental regulations.
8. **Arrangement of Compassionate Visit**
SOS will arrange for one return airfare for a relative or a friend of the Insured/the Insured Person wishing to join the Insured/the Insured Person who, when travelling alone, is hospitalised outside the Home Country or Usual Country of Residence.
9. **Arrangement of Return of Minor Children**
SOS will arrange for one-way airfares for the return of minor children to the Home Country or Usual Country of Residence if they are left unattended as a result of the accompanying the Insured's/the Insured Person's illness, accident or Emergency Medical Evacuation. Escort will be provided, when requested.

The above services are purely rendered on referral and arrangement basis. SOS & RHB Insurance Berhad will not be responsible for any third party expenses, which will be solely the Insured's/the Insured Person's responsibility.

For interventions handled by SOS where the Insured/the Insured Person is responsible for the payment of all third party expenses incurred, SOS will provide the financial guarantees subject to SOS first securing payment from the Insured/the Insured Person through his/her credit card or from funds from the Insured's/the Insured Person's family.

DOMESTIC MEDICAL ASSISTANCE SERVICES

The following services will be provided to Insured/the Insured Person when traveling more than 150 km from place of residence in Malaysia for period not exceeding 90 days per trip.

1. **Medical Service Provider Referral**
SOS will provide you/the Insured Person, upon request, the name, address, telephone number and, if available, office hours of physicians, hospitals, clinics, dentists and dental clinics (collectively, "Medical Service Providers"). SOS will not be responsible for providing medical diagnosis or treatment. Although SOS will make such

referrals, it cannot guarantee the quality of the Medical Service Providers and the final selection of a Medical Service Provider will all be your own decision. SOS, however, will exercise care and diligence in selecting the Medical Service Providers.

2. Guarantee of Medical Expenses Incurred During Hospitalisation

SOS will guarantee on your/the Insured Person behalf the medical expenses incurred during your/the Insured Person hospitalisation in Malaysia. The provision of financial guarantee is subject to SOS first securing payment from your /the Insured Person credit card or from funds obtained from your/the Insured Person family.

3. Arrangement of Emergency Medical Evacuation

SOS will arrange for the provision of air and/or surface transportation, medical care during transportation, communications and all usual ancillary services required to move you/the Insured Person to the nearest hospital in Malaysia where appropriate medical care is available. SOS will arrange for the provision of appropriate communication and linguistic capabilities, mobile medical equipment and medical escort crew.

4. Arrangement of Emergency Medical Repatriation

SOS will arrange for your/the Insured Person's return to the Place of Residence following the Emergency Medical Evacuation for subsequent hospitalisation within Malaysia.

SOS will arrange for the provision of appropriate communication and linguistic capabilities, mobile medical equipment and medical escort crew.

5. Legal Referral

SOS will provide the name, address, telephone number and office hours for lawyers and legal practitioners. SOS will not give any legal advice. Although SOS shall make such referrals, it cannot guarantee the quality of the service provider and the final selection of a service provider will be your/the Insured Person's own decision. SOS, however, will exercise care and diligence in selecting the service providers.

6. Emergency Message Transmission

In the event of an emergency or a hospital confinement, SOS will undertake to keep your/the Insured Person's immediate family informed.

The above services are purely rendered on referral and arrangement basis. SOS and RHB Insurance Berhad will not be responsible for any third party expenses, which will be solely the Insured's/the Insured Person's responsibility.

For interventions handled by SOS where the Insured is responsible for the payment of all third party expenses incurred, SOS will provide the financial guarantees subject to SOS first securing payment from the Insured through his/her credit card or from funds from the Insured's family.

Schedule of Benefits for “Individual Adult” or “Family Cover”

Benefits	Plan 1	Plan 2	Plan 3	Plan 4	Plan 5
Excluding Israel and war declared area/countries	Area 1: Thailand, Indonesia, Philippines, Myanmar, Cambodia, China, India, Japan, Korea, Pakistan, Singapore, Brunei, Sri Lanka, Taiwan, Vietnam, Hong Kong, Macau, including Malaysia (excluding war declared area). Area 2: Worldwide (excluding war declared area)	Area 1: Thailand, Indonesia, Philippines, Myanmar, Cambodia, China, India, Japan, Korea, Pakistan, Singapore, Brunei, Sri Lanka, Taiwan, Vietnam, Hong Kong, Macau, including Malaysia (excluding war declared area). Area 2: Worldwide (excluding war declared area)	Area 1: Thailand, Indonesia, Philippines, Myanmar, Cambodia, China, India, Japan, Korea, Pakistan, Singapore, Brunei, Sri Lanka, Taiwan, Vietnam, Hong Kong, Macau, including Malaysia (excluding war declared area). Area 2: Worldwide (excluding war declared area)	Area 1: Thailand, Indonesia, Philippines, Myanmar, Cambodia, China, India, Japan, Korea, Pakistan, Singapore, Brunei, Sri Lanka, Taiwan, Vietnam, Hong Kong, Macau, including Malaysia (excluding war declared area). Area 2: Worldwide (excluding war declared area)	Area 1: Thailand, Indonesia, Philippines, Myanmar, Cambodia, China, India, Japan, Korea, Pakistan, Singapore, Brunei, Sri Lanka, Taiwan, Vietnam, Hong Kong, Macau, including Malaysia (excluding war declared area). Area 2: Worldwide (excluding war declared area)
Death or Permanent Disablement (Sec. 1)	Individual Adult : RM100,000 Child : RM 25,000 Per Family Cover : RM250,000	Individual Adult : RM200,000 Child : RM 50,000 Per Family Cover : RM500,000	Individual Adult : RM300,000 Child : RM 75,000 Per Family Cover : RM750,000	Individual Adult : RM 400,000 Child : RM 100,000 Per Family Cover : RM1,000,000	Individual Adult : RM 500,000 Child : RM 125,000 Per Family Cover : RM1,250,000
Medical / Hospital Expenses up to (excess of RM50 on each and every claims) (Sec. 2)	Individual Adult : RM 30,000 Child : RM 7,500 Per Family Cover : RM 75,000	Individual Adult : RM 60,000 Child : RM 15,000 Per Family Cover : RM150,000	Individual Adult : RM 90,000 Child : RM 22,500 Per Family Cover : RM225,000	Individual Adult : RM 120,000 Child : RM 30,000 Per Family Cover : RM 300,000	Individual Adult : RM 150,000 Child : RM 37,500 Per Family Cover : RM 375,000
Daily Hospital Cash Per day up to (Max. 20 days) (Sec. 3)	Individual Adult : RM 100 Child : RM 25	Individual Adult : RM 200 Child : RM 50	Individual Adult : RM 300 Child : RM 75	Individual Adult : RM 400 Child : RM 100	Individual Adult : RM 500 Child : RM 125
Baggage & Personal Effects up to (excess of RM50 on each and every claims) (Sec. 4)	RM600 per item or pair or set items Max.: RM5,000	RM600 per item or pair or set items Max.: RM5,000	RM600 per item or pair or set items Max.: RM5,000	RM600 per item or pair or set items Max.: RM5,000	RM600 per item or pair or set items Max.: RM5,000
Baggage Delay up to (exceeding 8 hours) (Sec. 5)	Individual Adult : RM 600 Child : RM 150 Per Family Cover : RM 1,500	Individual Adult : RM 600 Child : RM 150 Per Family Cover : RM 1,500	Individual Adult : RM 600 Child : RM 150 Per Family Cover : RM 1,500	Individual Adult : RM 600 Child : RM 150 Per Family Cover : RM 1,500	Individual Adult : RM 600 Child : RM 150 Per Family Cover : RM 1,500
Personal Liability Up to (Sec. 6)	Individual Adult : RM100,000 Child : RM 25,000 Per Family Cover : RM250,000	Individual Adult : RM200,000 Child : RM 50,000 Per Family Cover : RM500,000	Individual Adult : RM300,000 Child : RM 75,000 Per Family Cover : RM750,000	Individual Adult : RM 400,000 Child : RM 100,000 Per Family Cover : RM1,000,000	Individual Adult : RM 500,000 Child : RM 125,000 Per Family Cover : RM1,250,000
Repatriation (mortal remains) (Sec. 7)	Individual Adult : RM 20,000 Child : RM 5,000 Per Family Cover : RM 50,000	Individual Adult : RM 20,000 Child : RM 5,000 Per Family Cover : RM 50,000	Individual Adult : RM 20,000 Child : RM 5,000 Per Family Cover : RM 50,000	Individual Adult : RM 20,000 Child : RM 5,000 Per Family Cover : RM 50,000	Individual Adult : RM 20,000 Child : RM 5,000 Per Family Cover : RM 50,000
Travel Delay (exceeding 8 hours) (Sec. 8)	Individual Adult and Child, each entitles to RM200 for the first 8 hours and thereafter RM50 on each full hour (up to max. RM500) Per Family Cover: RM1,250				
Missed Travel Connection up to (Sec. 9)	Individual Adult: RM1,000 Child: RM500 Per Family Cover: RM2,500				
Hijacking (exceeding 8 hours) (Sec. 10)	Individual Adult and child, each entitles to RM100 for the first 8 hours and thereafter on each 12 hours (up to max. RM300) Per Family Cover : RM800	Individual Adult and child, each entitles to RM200 for the first 8 hours and thereafter on each 12 hours (up to max. RM600) Per Family Cover : RM1,500	Individual Adult and child, each entitles to RM300 for the first 8 hours and thereafter on each 12 hours (up to max. RM900) Per Family Cover : RM2,300	Individual Adult and child, each entitles to RM400 for the first 8 hours and thereafter on each 12 hours (up to max. RM1,200) Per Family Cover : RM3,000	Individual Adult and child, each entitles to RM500 for the first 8 hours and thereafter on each 12 hours (up to max. RM1,500) Per Family Cover : RM3,800
Loss / Theft of Travel Documents up to (excess of RM50 on each and every claims) (Sec. 11)	Individual Adult : RM 3,000 Child : RM 1,500 Per Family Cover : RM 7,500	Individual Adult : RM 3,500 Child : RM 1,750 Per Family Cover : RM 8,750	Individual Adult : RM 4,000 Child : RM 2,000 Per Family Cover : RM 10,000	Individual Adult : RM 4,500 Child : RM 2,250 Per Family Cover : RM 11,250	Individual Adult : RM 5,000 Child : RM 2,500 Per Family Cover : RM 12,500
Personal Money up to (excess of RM50 on each and every claims) (Sec. 11)	Individual Adult : RM 500 Child : RM 250 Per Family Cover : RM 1,250	Individual Adult : RM 600 Child : RM 300 Per Family Cover : RM 1,500	Individual Adult : RM 700 Child : RM 350 Per Family Cover : RM 1,750	Individual Adult : RM 800 Child : RM 400 Per Family Cover : RM 2,000	Individual Adult : RM 900 Child : RM 450 Per Family Cover : RM 2,250
Loss of Deposit due to Cancellation/ Curtailment up to (Sec. 12)	Individual Adult : RM 12,000 Child : RM 6,000 Per Family Cover : RM 30,000	Individual Adult : RM 12,000 Child : RM 6,000 Per Family Cover : RM 30,000	Individual Adult : RM 12,000 Child : RM 6,000 Per Family Cover : RM 30,000	Individual Adult : RM 12,000 Child : RM 6,000 Per Family Cover : RM 30,000	Individual Adult : RM 12,000 Child : RM 6,000 Per Family Cover : RM 30,000
International SOS	24 hours International & Domestic Medical assistance Services – on referral and arrangement bases only				
Age Eligibility	31 days to 80 years				

Ringgit Malaysia (RM)	Plan 1				Plan 2				Plan 3				Plan 4				Plan 5			
	Individual		Family		Individual		Family		Individual		Family		Individual		Family		Individual		Family	
	Area 1	Area 2	Area 1	Area 2	Area 1	Area 2	Area 1	Area 2	Area 1	Area 2	Area 1	Area 2	Area 1	Area 2	Area 1	Area 2	Area 1	Area 2	Area 1	Area 2
1-7	36	56	65	105	42	65	74	122	47	74	83	138	52	84	93	155	57	92	102	171
8-14	54	88	101	169	60	97	110	186	65	106	119	202	70	116	129	227	75	125	138	235
15-21	72	119	137	233	78	129	146	250	83	138	155	266	88	148	165	283	93	157	174	299
22-31	90	151	173	297	96	161	182	314	101	170	191	330	106	180	201	347	111	189	210	363
each add	28	42	46	74	32	49	54	88	35	55	61	101	39	62	68	114	43	68	76	126
week																				
Annual	156	276	264	463	184	330	308	545	214	383	355	626	247	441	404	713	266	475	434	764

Premium above is inclusive of RM10 stamp duty