

ALLIANZ INSURANCE GUANGZHOU BRANCH
INTERNATONAL TRAVEL INSURANCE

CHAPTER 1 GENERAL PRINCIPLES

ARTICLE 1

This Insurance Contract (hereinafter referred to as “**this Contract**”) is composed of insurance clause, proposal form, insurance policy, insurance certificate and endorsement. Any agreement refers to this Contract should be in written form.

ARTICLE 2

The Insured who takes out the insurance in this Contract should be a natural person who works and lives normally, in healthy condition, with full capacity for civil acts and his/her legal or habitual domicile within the territory of the People’s Republic of China and who begins and ends his/her trip within the territory of the People’s Republic of China.

ARTICLE 3

A policyholder refers to a person who enters into an insurance contract with an insurer and undertakes the obligation to pay insurance premiums in accordance with this Contract. The policyholder should be a person with full capacity for civil acts as the Insured himself or any other person who has insurable interest in the body of the insured.

ARTICLE 4

The beneficiaries in this Contract include:

4.1 Beneficiary of Death Benefit

The Insured/Policyholder may designate one or more persons as the Insured’s beneficiary (beneficiaries) at the time the Contract if concluded. In case of many beneficiaries the Insured may determine benefit sequence and shares. In the event of no benefit share, each beneficiary in the event of the Insured’s death will receive an equal share. The designation of the beneficiary (beneficiaries) by the Policyholder should be authorized by the Insured.

Under any of the following situations, the insurance amount shall be deemed as the estate of the insured party upon the death of the insured party and the insurer shall perform the obligation of paying the insured amount in accordance with the Law of the PRC on Inheritance:

4.1.1 No beneficiary is designated, or the designation of beneficiary is unclear and incapable of being determined;

4.1.2 The beneficiary passed away before the insured party and there is no other beneficiary;

4.1.3 The beneficiary forfeits his beneficiary interest in accordance with laws and there is no other beneficiary.

If the beneficiary and the Insured have passed away in the same event and the sequence of death is incapable of being determined, it shall be deemed that the beneficiary passed away before the Insured.

The Insured or policyholder may change the beneficiary (beneficiaries) and notify the Insurer of any such changes in writing. The Insurer shall make the necessary endorsement on the insurance policy upon receipt of written notification in respect of change of beneficiary (beneficiaries). The Insurer will not be held liable for legal disputes arising from the designation of or modification to the beneficiary.

The Policyholder may designate and change the Beneficiary of the Death Benefit subject to the written consent of the Insured or his/her custodian. The guardian of the Insured may designate and change the Beneficiary when the Insured is without full capacity for civil acts or limited capacity for civil acts.

4.2 Beneficiary of the Disability Benefit

The beneficiary of the Disability Benefit should be the Insured, unless specified otherwise in the insurance contract.

4.3 Beneficiary of other Benefits

The beneficiary of other Benefit should be the Insured, unless specified otherwise in the insurance contract.

CHAPTER 2 POLICY BENEFITS

ARTICLE 5

This policy wording includes 14 benefits, whereas different policy plan may include different benefits levels. The benefits which the Insured are insured for are listed in the Insured's policy schedule. Please read the Insured's policy schedule carefully in conjunction with this policy wording.

5.1 Accidental Death, Permanent Disablement and Third Degree Burns

5.1.1 Accidental Death and Permanent Disablement

In the event of an accidental injury during the Insured's journey which causes death or permanent disablement, within 180 days of the accident occurring the Insurer will pay the death benefit or the percentage listed in the Schedule of Benefits for Disablement (abbr as Appendix 1) multiplied by the sum insured shown in policy schedule.

If the Insured disappears as a result of an accident and is pronounced dead by the People's Court, the Insurer will pay the death benefit to the beneficiary. If the Insured subsequently found to be

living then all benefits paid to the beneficiary must be refunded to the Insurer by the Insured or the beneficiary.

5.1.2 Third Degree Burns

In the event of an accidental injury during the Insured's journey which within 180 days of the accident occurring causes burns stated in the "Schedule of Benefits for Accidental Third Degree Burns"(short as Schedule 2), the Insurer will pay the percentage listed in the "schedule of benefits for accidental third degree burns" multiplied by the sum insured shown in the Insured's policy schedule.

5.2 Overseas Emergency Medical, Hospital or Dental Expenses

The Insurer will pay for reasonable emergency medical or hospital inpatient or outpatient expenses the Insured incur abroad directly as a result of the Insured suffering from an accidental injury or sickness during the Insured's journey.

The Insurer will also pay for reasonable emergency dental treatment or surgery expenses the Insured incur abroad directly as a result of the Insured suffering from an accidental injury during the Insured's journey.

The total emergency dental treatment or surgery expenses will not exceed the insurance proceeds of this benefit.

5.2.1 In case the Insured are hospitalized or receive outpatient treatment costing more than 10,000 RMB, the Insured must contact Insurer immediately to inform Insurer of the Insured's treatment. Wherever possible provided the expenses are covered, Mondial Assistance will guarantee the medical inpatient expenses on the Insured's behalf and the Insurer will settle directly with the hospital or other service provider. If this is not possible, Mondial Assistance will reimburse the Insured for costs insured and approved by Insurer, when the Insured returns to China.

5.2.2 The Insured must make every effort to keep the Insured's medical or hospital expenses to a minimum level. If the Insurer determines that the Insured should return home to China for treatment and the Insured does not agree to do so, then this Contract will terminate from the time of the refusal and the the insurer will only pay the medical expenses before the refusal.

5.2.3 The actual medical, hospital and dental expenses shall not exceed the usual level of charges as approved by the government of the locality where the expense is incurred.

5.2.4 Reasonable emergency medical or hospital inpatient or outpatient expenses insured are the normal costs of medical consultation, prescription, operation, ambulance service, room and board, medicine, x-ray examination, nursing and medical supplies incurred in the consultation and treatment provided by a qualified medical practitioner. The costs must not exceed the usual level or charges in the locality where the expenses are incurred and are not exceeding the amount that would have been incurred if no insurance existed.

5.2.5 Reasonable emergency dental treatment or surgery expenses for the relief of sudden and acute pain are insured provided the consultation and treatment is provided by a qualified medical practitioner.

5.2.6 The medical prescription provided by a qualified medical practitioner or a qualified dentist shall meet the requirements of the medical insurance system as stipulated by the government of the locality where the treatment is given.

5.2.7 If the Insured is entitled to receive compensation from other social welfare organizations or any other medical insurance plan, the Insurer will only pay the remaining part of the insurance amount.

If it's specified in the policy schedule, the Insurer will cover the expense of follow-up outpatient medical treatment in China. In order to be eligible for this cover, if any follow-up outpatient medical treatment in China is required, the Insured, or a member of Insured's traveling party, MUST contact our assistance team at Mondial Assistance as soon as possible to be in compliant with the claim procedure.

Follow-up outpatient medical expenses in China of the Insured remains valid for 30 consecutive days from the date of expiry date set out in the policy schedule or 30 consecutive days from the date Insured arrive back in China, whichever is earlier. The insurer will also cover reasonable follow-up outpatient medical expenses in China for Medical Treatment within 30 days of returning to China.

For follow-up outpatient medical expenses in China the maximum limit of coverage is 10% of the Sum Insured. This 10% is included within the sum insured for Benefit Two – Overseas Emergency Medical, Hospital or Dental Expenses.

Follow-up outpatient medical expenses in China will only be paid if:

5.2.7.1 The Insured Person has received consultation from a qualified medical practitioner Abroad due to an incident occurring Abroad, and

5.2.7.2 If the treatment being required in China is directly as a result of the incident occurring Abroad, which is covered under this policy, and

5.2.7.3 If outpatient treatment has been received within 30 days of returning to China or the expiry date of Insured's policy, whichever is earlier.

5.3 Overseas Emergency Medical Assistance, Medical Evacuation and Repatriation (or Funeral Expense)

The Insurer has appointed Mondial Assistance to help Insured with any overseas medical emergency. Insured may contact them at any time 7 days a week. Their contact details are shown on The Insured's policy schedule.

5.3.1 The Insurer will pay

The insurer will arrange and pay up to the limits shown in The Insured's policy schedule or agreed by the Insurer and the Insured when the insurance become effect for each of the following assistance services listed 1) to 4), if during The Insured's journey Insured sustain an accidental injury or become sick whilst abroad:

5.3.1.1 Medical Evacuation and Repatriation

Medical evacuation to a local hospital, which in the opinion of Mondial Assistance is best suited to The Insured's health condition and/or repatriation to a hospital in China best suited to The Insured's health condition or to The Insured's home in China, if in the opinion of Mondial Assistance, it is judged medically appropriate to repatriate Insured to China.

5.3.1.2 Repatriation of Mortal Remains or Funeral Expenses Abroad

Repatriation of The Insured's mortal remains to The Insured's home in China, if Insured die abroad due to an accidental injury or sickness, up to the limit shown in The Insured's policy schedule or actual reasonable funeral expenses to the beneficiary for The Insured's funeral or cremation abroad, up to the limit shown in the policy schedule.

5.3.1.3 Return of Dependant Children

If Insured are with dependant children and Insured are hospitalized or repatriated for medical or death reasons, Mondial Assistance will organize and the insurer will pay for one-way economy class air travel to allow for an immediate family member, friend or person travelling with Insured to accompany The Insured's dependant children back to the Insured's home in China or if in the opinion of Mondial Assistance no suitable person is available abroad, Mondial Assistance will organize and the insurer will pay for a return economy class air travel and travel Visa to allow an immediate family member to go to collect the Insured's dependant children and return immediately back to the Insured's home in China.

5.3.1.4 Return of Travelling Companion

If the Insured are undertaking the Insured's journey with an immediate family member and/or travelling companion and the Insured are hospitalized or repatriated for medical or death reasons, Mondial Assistance will organize and the insurer will pay for one-way economy class air travel for one immediate family member or travelling companion travelling with the Insured to be repatriated with the Insured to the Insured's home in China.

5.3.1.5 Additional Medical Assistance Services

The Insured can be provided with the following additional Medical Assistance Services whilst abroad:

- Access to a medical adviser for emergency medical treatment whilst overseas;
- Urgent messages which need to be passed on to the Insured's family or employer in the case of an emergency;
- Written guarantees for payment of reasonable expenses for emergency hospitalization whilst overseas, provided this is insured under the policy. If this is not insured under the policy the Insured must provide an alternative payment method before Mondial Assistance can provide a written guarantee.

5.3.1.6 Compassionate Visit

The insurer will arrange and pay up to the limits shown in the Insured's policy schedule, if during the Insured's journey, the Insured have to attend a funeral due to the sudden death of the Insured's immediate family member in China whilst the Insured are abroad, Mondial Assistance will organize and the insurer will pay for the reasonable travel cost of a one-way economy class air ticket to allow the Insured to return to the Insured's home in China.

5.3.2 Notes applying to benefits under this section

5.3.2.1 The Insured's right and the beneficiary's right under this section expire on the day the insurer consider the Insured can be repatriated to China or the Insured are actually repatriated to China, whichever date is earlier.

5.3.2.2 The insurer will not be liable for any in-patient hospitalization expense and/or any outpatient treatment expense over 10,000 RMB that has not been approved and arranged by Mondial Assistance.

5.3.2.3 The costs of providing the assistance benefits 5.3.1 .1 to .5 will be paid by Insurer and the amount shall not exceed the sum insured shown in the Insured's policy schedule for each type of assistance benefit payable. If the actual expenses exceed the sum insured shown in the Insured's policy schedule, the difference shall be paid by the Insured or the Insured's beneficiary.

5.3.2.4 Expenses of evacuation and repatriation are expenses for transportation, medical nursing during transportation, and medical equipment and supplies needed in the evacuation or repatriation arranged by Mondial Assistance.

5.3.2.5 The means of evacuation and repatriation assistance are based on Mondial Assistance's opinion of the Insured's medical condition and will include the arrangement of necessary transportation vehicles, necessary medical escorts and any other medically necessary items, at the discretion of Mondial Assistance. Necessary transportation vehicles can be air ambulance, road ambulance, general commercial airline, railway or any other appropriate means.

5.3.2.6 When Mondial Assistance organizes and pays for transport, transport is made by train 1st class, by plane economy class, or by taxi, at the discretion of Mondial Assistance.

5.3.2.7 Expenses incurred in the repatriation of mortal remains include service and material fees for embalming, preservation, cremation, delivery and cinerary casket.

5.3.3 Conditions of Providing Assistance

By using Mondial Assistance, the Insured accept that solely Mondial Assistance's assistance department makes decisions and organization of the appropriate and necessary assistance measures.

5.3.3.1 Mondial Assistance's decisions are taken solely in the Insured's medical interest

5.3.3.2 In no case can the insurer replace local first-aid organizations or pay for the expenses thus incurred.

5.3.3.3 Mondial Assistance doctors contact the local medical facilities and, if needed, the Insured's usual doctor to collect information allowing Mondial Assistance to take the decisions best suited to the Insured's health condition.

5.3.3.4 Any refusal on the Insured's part to comply in part or in full with the decisions taken by Mondial Assistance means the Insured exempt Insurer from any liability concerning the consequences of such an initiative and the Insured will then lose all rights under this policy from the point the Insured refused to comply with the decisions taken by Mondial Assistance.

5.3.3.5

Mondial Assistance is entitled to the right to decide the means of evacuation and repatriation and the final destination according to the Insured's health condition and the treatment needed by the Insured.

5.3.3.6 Mondial Assurances interventions are carried out under the national and international laws and regulations. Mondial Assistance services are subject to the required authorizations by the relevant authorities.

5.3.3.7 Mondial Assistance and the Insurer can not be held liable for delays in, or prevention of the agreed services resulting from a case of force majeure or from events such as strikes, riots, civil commotion, restrictions to free circulation, sabotage, terrorist attacks, civil or foreign war, and any consequences of a source of radioactivity or of any other Act of God.

5.3.3.8 Insured must transfer ownership of any transport tickets to Mondial Assistance and Insured must undertake to send the unused transport tickets back to Mondial Assistance or reimburse Mondial Assistance with the amount recovered from the organization having issued the transport tickets. Mondial Assistance reserves the right to amend or upgrade the transport tickets in order to deliver the assistance detailed under this section. Any benefits will be transferred to Insurer.

5.4 Baggage Delay and Lost, Damaged and Stolen Baggage

5.4.1 The Insurer will pay

The Insurer will pay for the cost of buying reasonable and essential replacement personal baggage if the Insured's checked in baggage with an airline, train or cruise company is lost, misplaced or stolen on the Insured's outbound trip during the Insured's journey and is not recovered within 12 hours from when the Insured arrived at the initial destination abroad.

Claims for baggage delay compensation will be calculated on the basis of the difference between the Insured's actual time of arrival and the actual time of arrival of the Insured's personal baggage.

The insurer will pay the repair cost or value of any personal baggage or valuables which are stolen or accidentally damaged or are permanently lost abroad during the Insured's journey.

5.4.2 Notes applying to benefits under this section

5.4.2.1 If the Insured can make a claim against the common carrier in relation to a loss and the Insured do not get paid the full amount of the Insured's claim, the insurer will make up the difference. The Insured must claim from them first.

5.4.2.2 When calculating the amount payable the insurer will apply depreciation due to age, wear and tear. The amount of such depreciation is determined by us and is shown in the Depreciation Table listed at the end of this section. The depreciation calculation will be applied on a basis of the number of full years of ownership.

5.4.2.3 The insurer will decide whether to pay for the repair or replacement (less depreciation due to age, wear and tear) of the personal baggage and valuables. The insurer also has the option to repair or to replace the personal baggage and valuables instead of paying the Insured.

5.4.2.4 The insurer will not pay more than the original purchase price or the single article limit for any item, pair or set shown in the Insured's policy schedule.

5.4.2.5 The insurer will not pay more than the valuables limit shown in the Insured's policy schedule for the combined value of all the Insured's valuables which are lost, stolen or damaged during any one journey.

5.4.2.6 If the Insured's personal baggage and valuables are found the Insured must inform Insurer by registered letter as soon as the Insured are informed that the personal baggage and/or valuables have been found. If the insurer has not paid the Insured yet the Insured must recover the items and if cover applies our sole obligation is to pay or repair the damage items and to replace or pay for the items missing. A deduction for depreciation will be applied as described in Note 2. If the insurer have already paid the Insured or replaced the items, the Insured must reimburse Insurer the amount the insurer have paid less the amount the insurer have calculated for the damage or missing items. However, if the Insured do not recover the items within a 15 day period from the date on which the Insured were informed that they were found, the insurer shall consider that the Insured have chosen abandonment and the insurer will be entitled to recover the items and ownership will automatically be transferred to Insurer.

5.4.2.7 Where the Insured are able to be compensated by the common carrier or any other third party for baggage delay or for lost, stolen or damaged personal baggage or valuables, the insurer will only be held liable to make compensation for the remaining loss thereof, up to the maximum sum insured shown in the Insured's schedule.

5.4.2.8 If the Insured's personal baggage and valuables proves to be permanently lost, the insurer will deduct any amount the insurer pay under baggage delay from the final settlement under this section.

Depreciation Calculation Table

<u>Item</u>	<u>Deduction %</u>
Clothing	20% per year
Footwear	30% per year
Cosmetics	50% per year
Sports equipment	30% per year
Luggage, Backpack & Travel Bags	10% per year
Audio, Video, Computers, laptops, other electronic items and accessories	30% per year or current actual price of similar model (whichever amount is less)

5.5 Travel Delay

5.5.1 The Insurer will pay

The insurer will pay the benefit shown in the insured's policy schedule if the insured's international flight, international train journey, or international sailing which the insured are

booked on during the insured's journey is delayed for at least 6 consecutive hours as a result of:-

5.5.1.1 A serious fire, storm or flood at the departure point;

5.5.1.2 Mechanical breakdown or structural defect mechanical breakdown of the aircraft, train or ship the insured were scheduled to travel in;

5.5.1.3 Hijacks, strikes or natural disasters;

5.5.1.4 Industrial actions by the employees of the air, train or cruise carrier company.

The insurer will pay to the insured the amount shown in the insured's policy schedule for each complete 6 hour consecutive delay up to the maximum benefit shown in the insured's policy schedule.

Claims for delay compensation will be calculated on the basis of the difference between the insured's scheduled time of arrival and actual time of arrival at the insured's final destination.

5.6 Missed Connection

5.6.1 The Insurer will pay

The insurer will pay the benefit shown in the insured's policy schedule if the insured have missed the insured's onward connecting flight, international train journey, or international sailing which the insured are booked on abroad during the insured's journey due to the late arrival of the insured's initial international flight, international train journey or international sailing because of:-

5.6.1.1 A serious fire, storm or flood at the departure point;

5.6.1.2 Mechanical breakdown or structural defect of the aircraft, train or ship the insured were scheduled to travel in;

5.6.1.3 Hijacks, strikes or natural disasters;

5.6.1.4 Industrial actions by the employees of the air, train or cruise carrier company.

The insurer will pay the benefit, provided the insured have no alternative onward transportation being made available to the insured within 12 consecutive hours after the actual arrival time of the insured's initial flight, train or sailing journey, the insurer will pay to the insured the amount shown in the insured's policy schedule for each complete 12 hours delay, up to the maximum benefit shown in the insured's policy schedule.

Mondial Assistance will organize and the insurer will pay up to the amount shown in the insured's policy schedule for the cost reasonable overnight hotel accommodation and transport costs if the insured are eligible for the above benefit and it this is shown as insured in the insured's schedule.

Claims for delay compensation will be calculated from actual time of arrival until the departure of alternative onward transportation.

5.7 Stolen Personal Money

5.7.1 The insurer will pay

The insurer will reimburse the value of personal money belonging to the Insured, which is stolen

during the insured's journey from:

5.7.1.1 The locked safety deposit box provided by the hotel where the Insured is staying;

5.7.1.2 The Insured brings by himself/herself.

5.8 Loss of Travel Documents

5.8.1 The Insurer will pay

The Insurer will reimburse the insured for the cost of obtaining a replacement passport, personal documents and traveler checks including the reasonable and necessary additional travel and accommodation expenses incurred in replacing the insured's passport, personal document and traveler checks which are lost or stolen abroad.

5.9 Trip Curtailment

5.9.1 The Insurer will pay

The Insurer will reimburse the insured's unused and non-refundable accommodation and travel expenses paid in advance or forfeited by the insured after the commencement of the insured's journey due to the occurrence of any of the following events occurring abroad which result in the insured being unable to continue the insured's scheduled journey and having to return directly to China from abroad:

5.9.1.1 Being hijacked;

5.9.1.2 The insured's hospital confinement, evacuation and repatriation due to medical reasons

5.9.1.3 Death, serious injury or serious sickness of the insured's Immediate Family Members;

5.9.1.4 Sudden occurrence of strikes by employees of a common carrier;

5.9.1.5 Sudden occurrence of outbreak of riots, or natural disasters at the planned destination

5.10 Travel Cancellation

5.10.1 The Insurer will pay

Within 30 days prior to the date the Insured's journey is scheduled to commence, the Insured who has purchased the insurance encounters with unexpected or uncontrollable circumstance without any intention due to one of the following accidents. The Insurer will be liable to pay, within the limit of relevant insured amount under the Clauses, for the cancellation fine and lost deposits for travel and accommodation arrangements which the Insured has paid in advance but not yet used and which is not refundable: Anyhow the Insured should purchase the insurance 7 days prior to the date the Insured's journey is scheduled to commence

5.10.1.1 Death or severe injury or sickness of the Insured and those persons listed as covered on the Insured's Insurance schedule including members of the Insured's immediate family and/or the Insured's dependent children.

5.10.1.2 Unexpected outbreak of strike, riot or civil commotion arising out of circumstances beyond the Insured's control at the Insured's planned destination.

5.11 Personal Liability

5.11.1 The Insurer will pay

The Insurer will cover the Insured's legal liability for payment of compensation to a third party in respect of:

5.11.1.1 Death or accidental Injury to a third party, and/or

5.11.1.2 Accidental loss or damage to property of a third party, occurring during the Insured's journey, which is caused by an accident, or a series of accidents attributable to one source or originating cause.

The Insurer will also reimburse the Insured's reasonable legal costs and legal expenses for settling or defending the claim made against the Insured. The Insurer decides whether the costs were reasonable. The Insurer reserve the right to defend or pay the indemnity on its own or on behalf of the Insured.

The Insurer reserve the right to claim benefits from any other related parties at our expense

The Insured are obliged to provide assistance to the Company for any investigation or implementation of any claim procedures.

5.12 Travel Assistance Services

5.12.1 24 Hour Hotline Travel Advice Services

If the Insured require any travel advices before the Insured begin the Insured's journey or during the Insured's journey, Mondial Assistance will assist the Insured by providing:

5.12.1.1 Basic Travel Advice concerning the Insured's planned trip and information about the Insured's intended destination;

5.12.1.2 Information regarding visa requirements for foreign countries;

5.12.1.3 Notification and advice support on travel insurance claims;

5.12.1.4 Location of the nearest Embassy of the People's Republic of China to the Insured.

5.12.2 24 Hour Hotline Concierge Services

If the Insured require concierge services abroad, Mondial Assistance will assist the Insured by providing:

5.12.2.1 An Urgent Message Relay service in the event of a medical or travel related emergency, to inform family and/or friends of the circumstances;

5.12.2.2 Medical information to the Insured over the telephone - the name, address, telephone number, office hours of medical practitioners, hospitals, clinics, dentists, dental clinics;

5.12.2.3 The name, address, telephone number and if available and if requested, opening hours of the nearest lawyers and legal practitioners;

5.12.2.4 Information to the Insured's family members in the event of an emergency of a hospital

confinement; and assistance to arrange or replace tickets during an emergency while the Insured are abroad;

5.12.2.5 Simple translation services over the telephone and the name address and telephone number of a Chinese/local language translator;

5.12.2.6 Location of the nearest Embassy of The People's Republic of China to the Insured and how to obtain an emergency passport overseas;

5.12.2.7 Advise on how to retrieve the Insured's lost Baggage;

5.12.2.8 Help in making car rental and hotel reservations as a result of a medical emergency.

Any costs incurred for the use of services referred to the Insured by the Insurer will need to be paid by the Insured.

5.13 Domestic Travel Extension

5.13.1 The Insurer will pay

If the Insured's policy schedule indicates the Domestic Travel policy extension is included, the Insurer will automatically extend the following sections to include journeys within China:-

Benefit One – Accidental Death, Permanent Disablement and Third Degree Burns

Benefit Three – Overseas Emergency Medical Assistance, Medical Evacuation and repatriation (or Funeral Expenses)

Benefit Nine – Trip Curtailment

Benefit Eleven – Travel Assistance Services

The sum insured shown in the Insured's policy schedule under the above sections will also apply to include journeys within China.

For the purposes of providing cover under Benefit Twelve, "Journey" will mean a trip within

China during the period of insurance, which begins on the day of the Insured's domestic departure from the time when the Insured leave the Insured's daily residential or work address or the place the Insured are staying in China in order to go directly to the Insured's domestic departure terminal and ends on

- The date when the Insured arrive at the Insured's daily residential or work place; or
- The expiry date of the Insured's policy shown in the Insured's policy schedule; or
- The date the Insurer determines that the Insured should return home for treatment, whichever date is sooner;

Provided the Insured can prove that the intention of the trip was to travel at least 250 kilometers away from the Insured's daily residential address or work place.

5.14 Household Objects Guard

5.14.1 The Insurer will pay

During the trip of the Insured, the loss or damage of the household objects in the domicile caused by the following risks:

5.14.1.1 Fire;

5.14.1.2 Lightning, typhoon, tornado, hurricane and flood;

5.14.1.3 Burst of Indoor water mains, sewer pipelines and cali duct (include radiator) at the habitual residence of the Insured;

5.14.1.4 Stealing or robbery

The Insurer will pay for the fee of repairing or the price of reinstatement after deducting the deductible (if applicable). The payment will not exceed the lesser of the following:

5.14.1.4.1 All the repairing fee upon the occurrence of the loss;

5.14.1.4.2 The reinstatement fee upon the occurrence of the loss;

5.14.1.4.3 The insurance amount of the corresponding benefit of the Insured on the policy.

If the household object of the Insured is damaged and can not be repaired economically and reasonably by the reasons above, the object is considered to be lost. The calculation of the compensation shall be the price of the reinstatement and shall not exceed the maximum of the insurance amount of the corresponding benefit of the Insured on the policy

When calculating the amount payable the Insurer will apply depreciation due to age, wear and tear. The amount of such depreciation should be determined by the Insurer or mutually agreed between the Insurer and the Insured and is shown in the Depreciation Table listed at the end of this section. The depreciation calculation will be applied on a basis of the number of full years of ownership.

If the loss of the Insured can be paid by the third party, the Insurer will only pay for the rest of it.

Depreciation Calculation Table

<u>Item</u>	<u>Deduction %</u>
Clothing	20% per year
Footwear	30% per year
Cosmetics	50% per year
Sports equipment	30% per year
Luggage, Backpack & Travel Bags	10% per year
Audio, Video, Computers, laptops, other electronic items and accessories	30% per year or current actual price of similar model (whichever amount is less)

CHAPTER 3 EXCLUSIONS

ARTICLE 6

The exclusions are composed of universal exclusions and specific exclusions. The universal

exclusions (3.6.1 – 3.6.5) apply to all the 14 benefits in article 5 chapter 2. The specific exclusions (3.6.6 – 3.6.18) apply to the 14 benefits specifically in article 5 chapter 2.

Universal Exclusion

The Insurer will not pay under any of the circumstances if:

3.6.1 General Exclusion

3.6.1.1 The Insured's claim arises from any war, military action, riot, strike, insurrection, or civil commotion;

3.6.1.2 The Insured's claim arises from any explosion, burning or radiation caused by biological, chemical, atomic energy weapons, atomic or nuclear equipment;

3.6.1.3 The Insured's claim arises from any terror in any form or terrorist acts, or any attempted terrorist acts;

3.6.1.4 The Insured's claim arises from any intentional action by the Insured or the beneficiary;

3.6.1.5 The Insured's claim arises from self-inflicted injuries, suicide, attempted suicide, or self-destruction by the Insured while sane or insane; The Insured's claim arises from fighting, being attacked or being murdered resulted from the provocative by the Insured's intentional actions;

3.6.1.6 The Insured deliberately put the Insured himself at risk (unless the Insured were trying to save another person);

3.6.1.7 The Insured's claim arises from the Insured's violations or attempted violations of the law or resistance to arrest or whilst the Insured are in detention or imprisonment;

3.6.1.8 The Insured's claim arises whilst the Insured are driving under the consumption of alcohol or without a driving license or a valid vehicle license;

3.6.1.9 The financial collapse of any travel agent, travel company, transport, tour or accommodation provider;

3.6.1.10 The Insured's claim arises from circumstances which could lead to the cancellation or disruption of the Insured's journey which the Insured were aware before the Insured purchased this policy.

3.6.2 Medical Exclusion

3.6.2.1 The Insured's claim arises from any pre-existing medical condition;

3.6.2.2 The Insured's claim arises from any chronic illness, including but not limited to lithiasis in any part of the body, cancer (includes leucocythemia), epilepsia, diabetes, hypertension, cervical and lumbar vertebral disease (not caused by accident), tonsillectomy, ulcer of stomach and duodenum, cataract, hyperthyreosis, surgery of ovarian cyst and uterine myoma, connective tissue disease, cirrhosis, tuberculosis;

3.6.2.3 The Insured's claim arises from cosmetic or plastic surgery or any elective surgery;

- 3.6.2.4 The Insured's claim arises from lumbosacral disc disease or disorder;
- 3.6.2.5 The Insured's claim arises from congenital anomalies or congenital disease;
- 3.6.2.6 The Insured's claim arises from the Insured's mental or nervous disease or disorder, including but not limited to insanity;
- 3.6.2.7 The Insured's claim arises from venereal disease;
- 3.6.2.8 The Insured's claim arises from a general health check-up, convalescence, custodial, rest care, rehabilitation, physiotherapy or psychological treatment;
- 3.6.2.9 The Insured's claim arises from infertility, pregnancy, miscarriage, abortion or childbirth;
- 3.6.2.10 The Insured's claim arises from contraception or operations related to sterilisation;
- 3.6.2.11 The Insured's claim arises from a drug allergy;
- 3.6.2.12 The Insured's claim arises due to treatment or surgery for tonsils, adenoids, hernia or a disease peculiar to the female reproductive organs;
- 3.6.2.13 The Insured receive any medical treatment or service which has been provided by a third party free of charge;
- 3.6.2.14 The Insured's claim arises whilst the Insured are under the influence of alcohol, or the abuse or misuse of illegal or controlled drugs;
- 3.6.2.15 The Insured's claim arises directly or indirectly or is caused by or contributed to by sexually transmitted diseases, Acquired Immune Deficiency Syndrome (AIDS) or with infection of the Human Immune Deficiency Virus (HIV) or any form or variation of HIV or AIDS, however caused;
- 3.6.2.16 The Insured's claim arises from ingestion, application from or injection of medicine not prescribed by a Qualified Medical Practitioner or not in complete compliance with the Qualified Medical Practitioner's instructions;
- 3.6.2.17 The Insured's claim arises because the Insured traveled against the advice of a qualified medical practitioner;
- 3.6.2.18 The Insured's claim arises because the Insured traveled for the purpose of obtaining treatment abroad;
- 3.6.2.19 The Insured's claim arises because the Insured traveled after a qualified medical practitioner has given a terminal diagnosis;
- 3.6.2.20 The Insured's claim arises because of an epidemic or pandemic;
- 3.6.2.21 The Insured's loss is recoverable under a Reciprocal National health scheme agreement;
- 3.6.2.22 the expense is for a local first aid organization before the Insured arrive to a hospital;

3.6.2.23 the Insured incurs any vaccination expenses;

3.6.2.24 if the Insured's legal representative fails to provide us with the Insured's death certificate issued by the appropriate local government authority to support the Insured's claim;

3.6.2.25 if the Insured or the Insured's legal representative fails to provide sufficient medical reports to support the Insured's claim.

3.6.2.26 if the Insured receive any follow-up medical treatment in China without the prior approval of us;

3.6.2.27 claims where the expense is incurred in China, except any benefit due under the follow-up outpatient medical expense in China benefit;

3.6.2.28 claims for follow-up outpatient medical treatment in China if the Insured did not receive consultation from a qualified medical practitioner abroad;

3.6.2.29 claims for follow-up outpatient medical treatment in China if the outpatient treatment being required in China is not directly related to a covered accident/illness abroad;

3.6.2.30 claims for follow-up outpatient treatment in China if there is no incident occurring abroad which is covered under the policy;

3.6.2.31 claims for follow-up outpatient treatment which is received after 30 days since returning to China or from the date the policy expired, whichever is earlier;

3.6.2.32 claims for follow-up outpatient treatment in China if the Insured are insured under a more specific, comprehensive, or appropriate domestic medical or health insurance policy;

3.6.2.33 claims that arise whilst the Insured are in China or that arise as a result of any incident that occurred in China in the period between two covered journeys, except any benefit due under the follow-up outpatient medical expense in China benefit.

3.6.3 Sports and Leisure Exclusion

3.6.3.1 The Insured's claim arises from whilst boarding, travelling in or alighting from any airplane or air supported device (except as a passenger in any licensed private or commercial aircraft);

3.6.3.2 The Insured's claim arises from the Insured participating in racing (other than on foot), motorcycling, any vehicle performance testing, or go-karting, polo, rock climbing or mountaineering with or without using ropes or climbing equipment, diving with or without breathing apparatus, parachuting, parasailing, hang-gliding, or similar flying sports, open water sailing, or winter sports.

3.6.4 Occupational Exclusion

3.6.4.1 The Insured is engaging in or undertaking military, naval or air-force service;

3.6.4.2 The Insured's claim arises whilst the Insured are employed on merchant vessels, or

during testing of any kind of conveyance; or whilst the Insured are travelling to, employed on and travelling from offshore activities like oil rigging, mining, aerial photography or whilst the Insured are employed and engaged in handling explosives;

3.6.4.3 The Insured's claim arises from the Insured participating in any professional or semi-professional sport activities;

3.6.4.4 The Insured's claim arises whilst the Insured are engaging in occupational activities like mining, forest harvesting, construction engineering, transportation and working in the water or operating at height.

3.6.5 Geographical Exclusion

There are some countries and regions where our company shall not offer any cover under any policy. These countries and regions are as follows:

Afghanistan, Burundi, Central African Republic, Chad Republic, Congo (Democratic Republic), East Timor (Democratic Republic of), Eritrea, Guinea, Haiti, Iraq, Ivory Coast, Liberia, Solomon Islands, Somalia, Sudan

Specific Exclusions

3.6.6 Exclusions apply to 5.1 Accidental Death, Permanent Disablement and Third Degree Burns

For death, permanent disability or third degree burns for any other reason other than caused by accidental Injury;

3.6.7 Exclusions apply to 5.2 Overseas Emergency Medical, Hospital or Dental Expenses

3.6.7.1 The Insured incurs any in-patient expenses and/or outpatient expenses more than 10,000 RMB, without the prior approval of the Insurer;

3.6.7.2 The Insured refuse to follow the recommendation of Mondial Assistance;

3.6.7.3 The Insured's claim is for corrective aids and treatment of refractive errors unless necessitated and caused by an accidental injury;

3.6.7.4 In the opinion of Mondial Assistance the Insured's treatment or surgery can be reasonably delayed until the Insured return to China;

3.6.7.5 The Insured refuses to follow the recommendation of Mondial Assistance to return to China for the continuation of medical attention where in the opinion of Mondial Assistance at the time of the recommendation the Insured are fit to travel to China;

3.6.7.6 The Insured fails to obtain a written report and medical bill from the hospital and qualified medical practitioner;

3.6.7.7 The Insured fails to obtain a written report from the qualified medical practitioner confirming that dental treatment undertaken is for relieve of sudden and acute pain;

3.6.7.8 The Insured's claim arises from any general dental treatment or dental surgery unless necessitated by an accident;

- 3.6.7.9 The Insured's claim arises from routine treatment or care;**
- 3.6.7.10 The expense is incurred in China;**
- 3.6.7.11 The expense was incurred after 90 days from the initial date treatment was received during the Insured's journey for the accidental injury or sickness being claimed**
- 3.6.8 Exclusions apply to 5.3 Overseas Emergency Medical Assistance, Medical Evacuation and Repatriation (or Funeral Expense)**
- 3.6.8.1 The Insured incurs any in-patient hospitalization expense and/or any outpatient treatment expense over 10,000 RMB that has not been approved and arranged by Mondial Assistance;**
- 3.6.8.2 The Insured refuses to follow the recommendation of Mondial Assistance;**
- 3.6.8.3 Any costs which were already included in the cost of the scheduled trip;**
- 3.6.8.4 The funeral expenses have not been approved by us;**
- 3.6.8.5 The expense incurred in China;**
- 3.6.8.6 The expense was incurred after 90 days from the initial date treatment was received during the Insured's journey for the accidental injury or sickness being claimed.**
- 3.6.9 Exclusions apply to 5.4 Baggage Delay and Lost, Damaged and Stolen Baggage**
- 3.6.9.1 The Insured failing to make a report to the police within 24 hours;**
- 3.6.9.2 The Insured failing to obtain a report from the responsible carrier or authority within 24 hours;**
- 3.6.9.3 The Insured failing to obtain written confirmation from the carrier on the number of hours and the reason for such delay;**
- 3.6.9.4 The Insured failing to investigate or search for missing or lost items;**
- 3.6.9.5 The Insured failing to undertake all reasonable precautions to safeguard the Insured's personal baggage and valuables;**
- 3.6.9.6 Loss, theft or damage of silver, gold, jeweler or accessories;**
- 3.6.9.7 Loss, theft or damage of mobile phones, SIM cards or accessories;**
- 3.6.9.8 Loss, theft or damage of pre-paid telephone cards;**
- 3.6.9.9 Loss, theft or damage of personal data assistants (PDA);**
- 3.6.9.10 Loss or damages of portable computers or computers arising from breakdown of software or virus or improper operation (including but not limited to the download of software);**
- 3.6.9.11 Loss or damage as a consequence of delay, confiscation or detention caused by the Customs and Excise or other administrative authorities;**

- 3.6.9.12 Loss, theft or damage of seals, documents, personal documents;**
- 3.6.9.13 Damage to fragile items or glasses;**
- 3.6.9.14 Loss, theft or damage of business or trade samples;**
- 3.6.9.15 Damage caused by normal wear and tear, depreciation, vermin, fungi, rot, corrosion, gradual deterioration, sunlight or due to the processes of heat, dryness, clean, dying, replacement or maintenance or by the reasons of scratching, dent, mechanical or electrical breakdowns, improper use, faults in technique or design or use of defective materials;**
- 3.6.9.16 Loss, theft or damage of personal money, travelers' cheques bonds, instruments, stamps, coupons, title deeds, securities, credit or charge cards;**
- 3.6.9.17 Loss of data recorded on tapes, cards, diskettes, CDs, DVDs, software, memory sticks or other similar equipment;**
- 3.6.9.18 Loss, theft or damage of personal baggage consigned in advance or mailed or shipped separately;**
- 3.6.9.19 Loss of personal baggage by any mysterious disappearance;**
- 3.6.9.20 Loss, theft or damage of any animal, plant or food;**
- 3.6.9.21 Loss, theft or damage of any bicycle, motor vehicle (including accessories), watercraft of any type, motorcycles, motor propelled vehicle or any other conveyance;**
- 3.6.9.22 Loss or damage arising from thefts due to the fact that personal baggage and/or valuables which were left unsupervised in a public place or in a vehicle unsupervised and left unattended;**
- 3.6.9.23 Theft, loss or damage to valuables, which are not kept on the Insured's person, unless they are locked in the Insured's accommodation or placed in a safe or safety deposit box and there is evidence of forcible, violent entry;**
- 3.6.9.24 Loss, theft or damage to personal baggage or valuables left behind by the Insured in any hotel or motel room after the Insured has checked out or items left behind in any aircraft, ship, train, taxi or bus;**
- 3.6.9.25 Thefts by the Insured's staff members;**
- 3.6.9.26 Thefts in accommodation without breaking and entering;**
- 3.6.9.27 Loss, theft or damages of household furniture and antiques;**
- 3.6.9.28 Loss, theft or damage of hired or leased equipment;**
- 3.6.9.29 Smuggling or illegal transportation or trading;**
- 3.6.9.30 An article which operates normally or recovers normal functions after it has been repaired by a carrier, hotel or any other party liable for the loss;**
- 3.6.9.31 Loss or damage resulting from scratches, tear, or stains;**

3.6.9.32 Being lost, stolen or damaged in China.

3.6.9.33 The Insured's baggage is delayed during the Insured's return trip to China.

3.6.10 Exclusions apply to 5.5 Travel Delay

3.6.10.1 The Insured fail to check-in according to the itinerary supplied to the Insured;

3.6.10.2 The Insured fail to obtain written confirmation from the carrier on the number of hours and the reason for such delay;

3.6.10.3 Strikes or industrial action began or were announced before the Insured's policy was issued or on the date the Insured's travel tickets or confirmation of booking were issued, whichever date is earlier;

3.6.10.4 Failure of public transport is caused by a strike or industrial action which began or was announced before the Insured commenced the Insured's journey and where the Insured could have reasonably made other travel arrangements;

3.6.10.5 The Insured fail to board after completing the check-in procedures;

3.6.10.6 The Insured fail to board the first available alternative transportation provided by the carrier's management.

3.6.11 Exclusions apply to 5.6 Missed Connection

3.6.11.1 The Insured fail to check-in according to the itinerary supplied to the Insured;

3.6.11.2 The Insured fail to obtain written confirmation from the carrier showing the scheduled arrival and actual arrival times at the Insured's final destination, the number of hours and the reason for such delay;

3.6.11.3 Strikes or industrial action began or was announced on or before the Insured's policy was issued or on the date the Insured's travel tickets or confirmation of booking were issued, whichever date is earlier;

3.6.11.4 Failure of public transport caused by a strike or industrial action began or was announced before the Insured commenced the Insured's journey and where the Insured could have reasonably made other travel arrangements;

3.6.11.5 The Insured fail to board the first available alternative transportation provided by the carrier's management;

3.6.11.6 Any expense has not been approved and arranged by Mondial Assistance.

3.6.12 Exclusions apply to 5.7 Stolen Personal Money

3.6.12.1 Any shortages due to omissions, errors, exchanges, or depreciations in value;

3.6.12.2 Any loss to credit cards, charge cards or traveler cheques;

3.6.12.3 Loss where the personal money was not on the Insured's person or locked in a safety deposit box at the time of the loss;

3.6.12.4 The Insured's failure to report the loss to the police and obtain a police report within 24 hours of the incident;

3.6.12.5 The Insured's failure to report the loss to the common carrier authority the Insured were travelling in when the incident occurred;

3.6.12.6 The Insured's failure to immediately report the loss to the management department of the hotel, if the incident occurred in the hotel;

3.6.12.7 The Insured's failure to investigate or search for the stolen personal money;

3.6.12.8 Any loss occurring in China;

3.6.12.9 Coins, banknotes, currency and travelers checks which were not on the Insured's person or locked in a safety deposit box at the time they were lost;

3.6.12.10 Loss by any mysterious disappearance;

3.6.12.11 Smuggling, illegal trading or transportation.

3.6.13 Exclusions apply to 5.8 Loss of Travel Documents

3.6.13.1 The Insured's failure to report the loss to the police and obtain a police report within 24 hours of the incident;

3.6.13.2 The Insured's failure to report the lost immediately to the local branch or agent of the travelers checks issuing authority;

3.6.13.3 Any financial loss resulting from the use of travelers checks;

3.6.13.4 The Insured's travelers checks issuing authority refusing to replace the Insured's travelers checks;

3.6.13.5 The Insured's failure to report the loss to the common carrier authority the Insured were travelling in when the incident occurred;

3.6.13.6 The Insured's failure to immediately report the loss to the management department of the hotel if the incident occurred in the hotel;

3.6.13.7 The Insured's failure to provide original receipts for the replacement costs and travel and accommodation expenses;

3.6.13.8 The Insured's failure to investigate or search for the missing or lost items;

3.6.13.9 Any loss occurring in China;

3.6.13.10 Loss by any mysterious disappearance;

3.6.13.11 Smuggling, illegal trading or transportation;

3.6.13.12 Any personal document or visa which is not necessary for the Insured to complete the Insured's journey.

3.6.14 Exclusions apply to 5.9 Trip Curtailment

3.6.14.1 Losses which will be refunded or paid by a hotel, common carrier, travel agent or any other travel company;

3.6.14.2 Loss caused by government regulations;

3.6.14.3 Loss caused by default or liquidation of travel agencies, common carriers or other Travel Companies;

3.6.14.4 Losses caused by the Insured, a member of the Insured's immediate family, or travelling companion not willing to start or continue the Insured's journey;

3.6.14.5 Losses caused due to being unable to start the Insured's journey due to financial reasons;

3.6.14.6 Any illegal criminal acts undertaken by the Insured, the Insured's immediate family or travelling companion;

3.6.14.7 The Insured's failure to notify the travel agent, tour guide, provider of transport or accommodation immediately if it is necessary to cancel or curtail any part of the Insured's journey;

3.6.14.8 The Insured's or the Insured's immediate family member's pre-existing medical condition or chronic illness;

3.6.14.9 The Insured being aware of any circumstances which may lead to the cancellation or curtailment of the Insured's journey before the Insured purchase this insurance;

3.6.14.10 Returning to China for Medical treatment that in our opinion can be reasonably delayed until the Insured complete the Insured's scheduled Journey and return to China;

3.6.14.11 The Insured or the Insured's travelling companion changing the journey plans

3.6.15 Exclusions apply to 5.10 Travel Cancellation

The Insurer will not pay if the Insured were aware of any reason, before the Insured's period of cover commenced that may cause The Insured's Journey to be cancelled, or abandoned. We also will not pay if the Insured's cancellation fees or loss of deposits arise because of:

3.6.15.1 The death or sickness of the Insured's travelling companion or relative, if the death or sickness is as a result of a pre-existing medical condition.

3.6.15.2 Any injury or sickness that is not certified in writing by a medical doctor.

3.6.15.3 The Insured or the Insured's travelling companion changing plans.

3.6.15.4 Prohibition or regulation by any Government.

3.6.15.5 Directly or indirectly from epidemics.

3.6.15.6 Directly or indirectly due to the Insured, the Insured's travelling companion, or relative being quarantined.

3.6.15.7 The Insured can reimburse the Insured's cancellation fees or lost deposits from somewhere else.

3.6.15.8 A tour operator or wholesaler being unable to complete arrangements for any tour because there were not enough people to go on the tour.

3.6.15.9 The financial collapse of any transport, tour or accommodation provider associated with the Insured's journey.

3.6.15.10 If the Insured's claim arises directly or indirectly from an act or threat of terrorism.

3.6.15.11 The death, injury or sickness of any person who resides outside of Mainland China.

3.6.15.12 The Insured can not provide the Insurer with the original copy of the notice on cancellation fees or lost deposits from travel agency, transportation carrier, or hotel.

3.6.15.13 The Insured can not provide the Insurer with the original FaPiao (invoice) of the cancellation fee or lost deposits.

3.6.16 Exclusions apply to 5.11 Personal Liability

3.6.16.1 Any loss where the Insured have failed to provide the Insurer immediate notification of a legal liability claim being made against the Insured;

3.6.16.2 Damages relating to any liabilities assumed under contract;

3.6.16.3 Damages to animals or properties which belong to the Insured or are under the Insured's care of custody or control;

3.6.16.4 Damages or Injuries relating to the Insured's intentional, malice, illegal, criminal or improper acts;

3.6.16.5 Damages arising from the undertaking of any trade, businesses or professions;

3.6.16.6 Damages arising from the possession or use (except the temporary residence the Insured are using on the Insured's journey) of a real estate or property;

3.6.16.7 Damages arising from the Insured's or the Insured's Immediate Family Members ownership, possession or use of animals, vehicles, aircraft, aerial devices, watercraft or any other mechanically propelled vehicle (no matter whether with or without operation licenses);

3.6.16.8 Damages arising from the Insured's participation in horse racing, vehicle racing, use of pistol or any other weapon or any other dangerous activity;

3.6.16.9 Injury to or damages to property of any person who is the Insured's immediate family member, employer or employee;

3.6.16.10 Any loss, damage or expenses which are covered or should have been covered under a statutory or compulsory insurance policy, statutory or compulsory insurance or compensation scheme or fund, or under workers' compensation legislation, an industrial award or agreement, or accident compensation legislation;

3.6.16.11 Any fine, penalty or aggravated, punitive or exemplary or liquidated damages;

3.6.16.12 Disease that is transmitted by the Insured;

- 3.6.16.13 Any relief or recovery other than monetary amounts;**
- 3.6.16.14 Anything that is covered under any other policy. We will be liable only for the amount the Insured's liability exceeds the limits of cover under any other policy;**
- 3.6.16.15 Assault and/or battery committed by the Insured or at the Insured's direction; or**
- 3.6.16.16 Conduct intended to cause personal injury, property damage or liability with reckless disregard for the consequences of the Insured or any person acting with the Insured's knowledge, consent or connivance.**
- 3.6.17 Exclusions apply to 5.13 Domestic Travel Extension**
- 3.6.17.1 Any exclusion under Benefit One, Three, Nine or Eleven applies;**
- 3.6.17.2 Funeral expenses as a result of death during a journey within China;**
- 3.6.17.3 Obtaining Medical treatment that in our opinion can be reasonably delayed until the Insured complete the Insured's scheduled Journey and return to the Insured's home.**
- 3.6.18 Exclusions apply to 5.14 Household Objects**
- The Insure will not pay loss of the Insured's household objects list in, during the time of or caused directly or indirectly by the following section:**
- 3.6.18.1 Loss arises directly or indirectly from Millennium Bug;**
- 3.6.18.2 Damage arising from overuse of motor, electrical equipment, Electric Appliances, supervoltage, short circuit, open circuit, electric arc, electric leakage, radiation, roasting.**
- 3.6.18.3 Damages relating to the Insured's intentional, malice acts;**
- 3.6.18.4 Damages or losses relating to the forfeiture, requisition, seizure, occupy (permanent and temporary) part of or all of insured property legally or illegally;**
- 3.6.18.5 Gold, silver, jewelry and other property whose value can't be appraised;**
- 3.6.18.6 Antique or decoration, camera, cell phone, laptop or personal digital assistant (PDA);**
- 3.6.18.7 All damages raised directly or indirectly'**
- 3.6.18.8 Damages or losses of seal, documents, ledger, technical documents and diagram;**
- 3.6.18.9 Loss of data recorded in tape, memory card, RAM Disk or other similar devices;**
- 3.6.18.10 Samples or materials for business or professional activities;**
- 3.6.18.11 Damages arise from deficiency of the property itself or not appropriate storage; Wear and tear, depreciation, moulding, vermin, decomposition, corrosion, gradual deterioration, sunlight, heating, drying, dyeing and replacement of the baggage and items of the Insured or any damage in the process of repairing, washing or renovating intended by the Insured or due to atmospheric change or any loss and damage due to scratching, denting, mechanical or electric damage, improper use, technical or design defect and use;**

3.6.18.12 Lost of cash, securities, stamps, receipt, print, coupon, title deed, stocks, travel documents and token cards (include credit card);

3.6.18.13 Animals, plants and food;

3.6.18.14 All kinds of automotives (and accessories), motor bikes, boat, engines or other transportation means;

3.6.18.15 Loss arising from explosion of pipeline (include radiator) due to execution of works;

3.6.18.16 Loss arising from explosion and surplus water of pipeline (include r radiator) due to water leak detection and pressure test;

3.6.18.17 Loss arising from stealing or robbery by the Insured's relatives, service man, tenant or anybody else who legally lives or stays in the regular residence;

3.6.18.18 Nobody lives in the Insured's regular residence within China at least 30 days prior to the starting of journey.

CHAPTER 4 INSURED AMOUNT AND PREMIUM

ARTICLE 7

The insured amount refers to the maximum amount for compensation or insurance money payment to be paid by the insurer. The insured amount is to be agreed upon by the Applicant and the Insured and shall be expressly indicated in the insurance policy. The separate insured amount is applied to each insured stated in the policy schedule. The policy schedule stipulates in detail the separate insurance coverage and insurance amount applied to all the insurance Contract. The Insured undertakes to pay insurance premium to the .Insurer following the provisions of the insurance Contract.

CHAPTER 5 INSURANCE PERIOD

ARTICLE 8

The insured period is to be agreed upon by the Applicant and the Insured and shall be subject to the insurance period indicated in the insurance policy.

For benefit of Cancellation, the following rules on Period of Cover apply.

The Insured's period of cover sets out 30 days prior to the Insured's journey is scheduled to commence or the date when the Insured buy the benefit, whichever is later. The Insured's period of cover ends when the Insured leave the border (custom).

For benefits other than Cancellation, the following rules on Period of Cover apply.

The Insured's insurance cover will become effective from the effective date on the Insured's Policy Schedule or from the time when the insured leaves the border (leaves the custom),

whichever is later. The Insured's insurance cover will end according to the following rules (whichever is earlier):

- 1、 At 24:00 PM (midnight) at the end of the Expiration Date listed in the Policy Schedule;
- 2、 The time when the Insured returns to China (defined as passing through immigration border control);
- 3、 With respect to the 365 days insurance plan, at 24:00 PM (midnight), at the end of the date when any trip overseas exceeds 90 continuous days (including the beginning day and the termination day of the trip).

Automatic Extension of Policy

The Insured's policy will be automatically extended if the Insured finds that The Insured's return to The People's Republic of China has been delayed because of one or more of the following:

- 1) If a bus, airline, shipping line or rail authority the Insured are travelling on, or that has accepted the Insured's fare or baggage, is delayed; or
- 2) If the delay is due to a reason for which the Insured can claim under the Insured's policy.

Other Extension of Policy

If the delay is for any other reason the Insured's policy will not be automatically extended. The Insured must request the extension at least 7 days before the Insured's original policy expires. The Insurer have the right to accept or decline any extension request. If the Insurer accept to extend the Insured's policy, this will be confirmed by us, by issuing a new policy schedule or policy endorsement. The Insurer will not extend cover beyond the maximum term of cover available under any given plan.

Where the Insured extends his/her trip without prior consent of the Company after the insurance period begins, the insurance period shall end on the expiration date of the insurance period as specified in the insurance policy or the insurance certificate. However, in case of any inevitable delay to the trip scheduled by the Applicant or the Insured prior to the commencement of such trip, the Applicant shall notify the Insured and submit a written application prior to the trip, and the insurance period may be extended accordingly with the written consent of the Company.

CHAPTER 6 DUTY OF INSURER

ARTICLE 9 In the conclusion of an insurance contract, the Insurer shall explain the terms of the contract to the policyholder. Liability exemption clauses relating to an insurer's liability stipulated in an insurance contract shall be expressly brought to the attention of the policyholder by the insurer on the application form, policy or other insurance certificate at the time of conclusion of the contract, and the insurer shall explain to the policyholder in oral or written form with respect to the liability exemption, otherwise, such clauses shall be void.

ARTICLE 10 Upon conclusion of an insurance contract, the Insurer shall issue the policy and other insurance certificates to the policyholder timely.

ARTICLE 11 Where the Insurer deems that the evidence and information provided is incomplete in accordance with the insurance contract, the Insurer shall timely notify the Applicant and the Insured just one time for the request of additional evidence and information.

ARTICLE 12 Upon receipt of a claim request from the Insured, the Insurer shall promptly assess if the claim arising from the insured event; If the circumstances are complicated, the assessment shall be done within 30 days. Where there is one of the following circumstances, the Insurer and the Insured parties shall negotiate to solve the problem:

- 1) The proximate cause of the loss is complicated; the connection between the cause and effect is not closely tied;
- 2) Technically, the evidence of the cause to the loss is unclear
- 3) The claim is suspected to be dishonest or fraud..

The insurer shall notify the Insured result of the assessment; If the claim fall within insurance liability, the Insurer shall pay the insurance amount or claim in respect of insurance liability within 10 days from agreement with the Insured; Upon receipt of a claim by an insurer from the Insured which does not fall within insurance liability, the insurer shall, within 3 days starting from the assessment date, the notification for rejection of the claim by explaining the reasons.

ARTICLE 13 Where the amount of compensation or claim cannot be determined within 60 days from receipt of the claim and relevant evidence and information, the insurer shall pay the insurance amount assessed based on the evidence and information available and pays the balance upon determination of amount of compensation or claim payable.

CHAPTER 7 DUTY OF INSURED/POLICYHOLDER

ARTICLE 14 The policyholder may pay the insurer the full premium in one lump sum.

ARTICLE 15 In the conclusion of an insurance contract, the insurer may request relevant information on the insured subject matter or the insured party. The policyholder shall make full and accurate disclosure.

Where the policyholder willfully or grossly negligently fails to perform the obligation to make full and accurate disclosure as provided in the preceding paragraph and as a consequence the insurer is required to reconsider underwriting of the insurance or decide on raising the insurance premium, the insurer shall have the right to terminate the insurance contract.

The right to terminate an insurance contract as provided in the above paragraph shall be extinguished if the insurer does not exercise such right within 30 days after it has knowledge of the cause for termination of the contract.

Where the policyholder fails to perform the obligation to make full and accurate disclosure willfully, the insurer shall not be liable to pay insurance amount or claims for insured events which occurred prior to termination of the insurance contract and shall not refund the insurance premiums.

Where the policyholder fails to perform the obligation to make full and accurate disclosure due to negligence and such negligence bears serious effects on the occurrence of insured events, the insurer shall not be liable to pay insurance amount or claims for insured events which occurred prior to termination of the insurance contract but may refund the insurance premiums.

An insurance event shall refer to an event which falls within the scope of insurance liability agreed upon in the contract.

ARTICLE 16

The policyholder shall give a written notice to the Insurer in timely manners when the mailing address or the residence of the policyholder is changed; otherwise, all notices sent by the insurer to the last mailing address of the policyholder as indicated herein shall be deemed as duly delivered.

CHAPTER 8 APPLICATION AND PAYMENT OF INSURANCE AMOUNT

ARTICLE 17

The Application of the insurance amount must offer sufficient information the Insurer reasonably ask for to support the Insured's claim. In special circumstances the Insured can not offer the following materials, the Insured shall off other legitimate and valid materials. **Where the Insurer fails to verify the truth of evidence and content thereof due to the failure of the claim applicant to provide such evidence timely, the Insurer shall not be liable to pay for the portion that cannot be verified.** If it is needed, the Insurer can ask the policyholder/the Insured/beneficiary to translate the materials into Chinese or English, so that the Insurer can conduct the process of payment smoothly.

17.1 Claim of Accidental death Benefit

17.1.1 Declare of insurance amount payment (declare of claim settlement);

17.1.2 Original insurance policy;

17.1.3 Identification of the Application

17.1.4 Certificate of deregistration of the Insured's registered permanent residence issued by the public security department, or a death certificate issued by second and above or recognized by the Insurer hospital. If the Insured is pronounced dead, the Applicant shall offer the Certificate of death issued by the People's Court.

17.1.5 Any other evidences and materials required by the Company to identify the nature and cause of the insured accident and the extent of loss.

17.1.6 If the Insured delegates others to make the claim, the Applicant shall offer the document as original proxy contest, identification of client and trustee.

17.2 Handling of Disappearance

If the Insured disappears due to an accident and is pronounced dead by the People's Court, The Insurer will then pay the death benefit to the beneficiary. If the Insured is subsequently found to be living then all benefits paid to the beneficiary must be refunded by the beneficiary to the Insurer.

17.3 Claims for Accidental Disability and Burns Benefit

17.3.1 Declare of insurance amount payment (declare of claim settlement);

17.3.2 Original insurance policy;

17.3.3 Identification if the Insured;

17.3.4 Disability or burns diagnose testimonial issued by a second or above hospital or medical organization recognized by the Insurer or a judicial expertise institution;

17.3.5 Other related documents provided by the Applicant;

17.3.6 If the Insured delegates others to make the claim, the Applicant shall offer the document as original proxy contest, identification of client and trustee.

17.4 Claim of other benefits (provide optionally according to the benefit. please confirm with the Insurer when claim)

17.4.1 Declare of insurance amount payment (declare of claim settlement);

17.4.2 Original insurance policy;

17.4.3 Copies of passport (include visa and seal of travel);

17.4.4 Copy of check in certificate;

17.4.5 Report of policeman;

17.4.6 Estimate of property, property rights certificate and surveyor's report of property;

17.4.7 Bill of medical expense, clinical history report/certificate;

17.4.8 Public carrier report (include travel delay, luggage delay and luggage lost reports);

17.4.9 Testimony of third party;

17.4.10 Property lost report of the hotel;

17.4.11 Report of travel check issued authority;

17.4.12 Original receipts;

17.4.13 Invoice of funeral expenses;

17.4.14 Invoice of accommodation fee and travelling expenses;

17.4.15 Invoice and certificate of travelling expenses that Travel Company refuses to refund;

17.4.16 Legal documents which the policyholder, the Insured or the beneficiary received;

17.4.17 Other documents related to this benefit provided by the Applicant;

17.4.18 If the Insured delegates others to make the claim, the Applicant shall offer the document as original proxy contest, identification of client and trustee.

17.5 Depreciation due to age, wear and tear will be applied to claims for lost or damaged personal baggage and valuables at such rates as the Insurer may reasonably determine. No depreciation will be applied to personal baggage and valuables which have been purchased within one year prior to commencing the Insured's journey or purchased during the Insured's journey.

ARTICLE 18

The right of the Applicant to claim from the Insurer for insurance amount shall be extinguished if

the right is not exercised within 2 years from the date on which the insured party or beneficiary becomes aware of or should be aware of the occurrence of the insured event.

ARTICLE 19

The Insurer will pay all claims in Renminbi, and directly pay to the beneficiary or the Insured. The currency exchange rate will be determined based on the rate on the date of the insured accident.

CHAPTER 9 SETTLEMENT OF DISPUTE AND APPLICATION OF LAW

ARTICLE 20

If there is any dispute arising from performance of this Contract, it shall be settled by both parties through friendly negotiations; in case no settlement can be reached, both parties shall submit such dispute to the arbitration committee indicated in the insurance policy; in case there is not any arbitration committee indicated in the insurance policy or no settlement can be reached, either party may file an action before the competent people's court according to law.

ARTICLE 21

All disputes related to this Contract and arising from performance of this Contract shall be governed by the applicable laws of the People's Republic of China (exclude laws of Hong Kong, Macau and Taiwan).

CHAPTER 10 OTHER MATTERS

ARTICLE 22

Upon execution of this Contract and prior to the commencement of insurance period, the Applicant may cancel this Contract by sending a written notice to the Company.

When the Applicant intends to cancel this Contract, it shall furnish the following documents and materials:

22.1 Application for cancellation of this Contract

22.2 Original of insurance policy;

22.2 Insurance certificate of premium;

22.3 Identity certificate of the Applicant.

Where the Applicant cancels this Contract, the Company will bear no insurance liabilities upon receipt of an application from the Applicant for cancellation of this Contract. Upon 30 days the Insurer receives all the documents and materials above, the insurer shall refund all the insurance premium.

The policyholder may not terminate the contract upon the time that the insurance period starts.

APPENDIX 1 DEFINITIONS

- 1 **“Abroad”** means the countries and regions outside of China.
- 2 **“Accident, Accidentally or Accidental”** means an incident that occurs during the journey suddenly from non-intended or unexpected external factors.
- 3 **“Accidental burns”** means burns to the body soft tissue suffered during your journey as a result of Accidental Injury. The burns shall fall under the third degree, standards for which are injury of skin (epidermis and underlying tissues, incidental injuries of bones and muscles, soft tissue necrosis, incrustation, and falling out at last) of all layers. Calculation of degree and area of burns shall be subject to evaluation in accordance with the clinical identification standards-the *New Nine Classification*.
- 4 **“Accidental injury”** means bodily injury sustained solely and directly by accidental, outward violent and visible means which occurs during your journey independently from all other causes and is not a result of any illness, sickness, disease, or any other naturally occurring condition.
- 5 **"Arises or Arising"** means directly or indirectly arising or in any way connected with.
- 6 **“Beneficiary”** means the person(s) named on the policy endorsement or the executor to your estate, provided they have the necessary written proof provided by the government of China.
- 7 **“China”** means mainland China excluding the regions of Taiwan, Hong Kong, and Macau.
- 8 **“Common carrier”** means any bus, coach, ferry, hovercraft, hydrofoil, ship, train (including underground train, light rail and magnetic train companies) operated by a carrier duly licensed from relevant government authorities for the regular transportation of fare-paying passengers, including any fixed, wing aircraft provided by a regular flight operating airline or an air charter company; and any helicopter provided and operated by an airline operating only between established commercial airports or licensed commercial heliports, and any regularly scheduled airport limousine operating on fixed routes and schedules.
- 9 **"Dependant children"** means your legal children and/or your legal grandchildren less than 18 years old travelling with you on your journey and who are listed as covered in your policy schedule.
- 10 **“Domestic travel”** means any travel within China.
- 11 **“Epidemic”** means a sudden development and rapid spreading of a contagious disease in a region where it developed in a simply endemic state or within a previously unscathed community.
- 12 **“Essential replacement baggage”** means essential clothing and personal items considered necessary and reasonable by us.
- 13 **“Force Majeure”** means any object condition that is unpredictable, inevitable and

uncontrollable.

14 “**Fragile items**” means glass, crystal, potteries, porcelain, marble, works of art, antiques, musical instruments, glasses, perishable foodstuffs, alcohol or other items of a similar nature.

15 “**Home**” means the address in China where you were living prior to starting your journey.

16 “**Hospital**” means an established registered hospital which holds a legal international license as a medical institute and has qualified medical practitioners and nurses offering in-patient medical treatments and nursing services 24 hours a day and is not a medical centre which serves as a convalescent home, a clinic, a nursing or therapeutic institution, or a place for alcoholics or drug addicts.

17 “**Immediate family member**” means your spouse, parent, son or daughter, brother or sister, grandparent or grandchild.

18 “**Journey**” means a trip abroad which takes place within the period of insurance, which begins on the day of your international departure from the time when you leave your daily residential or work address or the place you are staying in China in order to go directly to your international departure terminal and ends on:

(1) the date when you return to China and arrive at your daily residential or work place, or place you are staying in China before your onward journey home after completion of your trip abroad;
or

(2) The expiry date of your policy shown in your policy schedule; or

(3) the date we determine that you should return home to China for treatment;

Whichever date is sooner.

If you have purchased a policy which is valid for more than one journey, the policy will be valid for all journeys during the period of insurance. Each journey will be insured for a period not exceeding 90 consecutive days, provided the journey commences and ends during the period of Insurance.

19 “**Legal residents**” means a Chinese national who holds a valid passport issued by the appropriate authority or a person who either has a valid residence permit or a valid Visa issued by the appropriate authority and who has or intends to reside in China for a minimum period of six continuous months.

20 “**Nurse(s)**” means any nursing professional, who has obtained professional certificates through formal nursing training and provides professional nursing services in the hospital of the geographical area of his or her practice.

21 “**Open water sailing**” means sailing more than 10 nautical miles off any land mass.

22 “**Pair or related set of items**” means a number of items of baggage that belong together or can be used together, for example but not limited to:

- (1) A camera, lenses (attached or not), tripod and accessories;
- (2) A matched or unmatched set of golf clubs, golf bag and buggy (golf equipment);
- (3) A matching pair of earrings.

23 **“Pandemic”** means a form of an epidemic that extends throughout an entire continent or even the entire human race

24 **“Period of insurance”** means from the effective date until the expiry date shown in your policy schedule.

25 **“Personal baggage”** means any suitcases (or similar luggage carriers) or personal items owned by you and that you take with you, or buy on your journey and which are designed to be worn or carried about with you. This includes items of clothing, valuables, but excludes personal money, personal documents, traveler cheques, souvenirs and any business samples or items that you intend to trade.

26 **“Personal documents”** means passports, visas, identity papers and travel and transport tickets, which must be replaced in order for you to complete your return trip to China.

27 **“Personal money”** means coins and banknotes belonging to you.

28 **“Portable Computer”** means a portable computer, laptop computer or hand held computer or device, including accessories and/or attachments.

29 **“Pre-existing medical Condition** means

- (1) an ongoing medical or dental condition, or related complication you have before the effective date of your policy, the symptoms of which you are aware of, or that is currently being or has been investigated by a qualified medical practitioner, nurse, medical adviser, dentist, chiropractor, or physiotherapist; or
- (2) a medical or dental condition for which advice, treatment or medication has been prescribed by a qualified medical practitioner, nurse, medical adviser, dentist, chiropractor or physiotherapist, within five years before the effective date of your policy; or
- (3) a medical or dental condition which shall cause a healthy and cautious person to seek diagnosis, advice, treatment or medical care or medication by a qualified medical practitioner, nurse, medical adviser, dentist, chiropractor or physiotherapist, within five years before the effective date of your policy; or
- (4) pregnancy.

Please Note: This definition applies to the Insured, travel companion of the Insured , immediate family members of the Insured or any other Person.

30 **“Public place”** means any place that the public has access to, including but not limited to hotels, hotel foyers and grounds, restaurants, air or bus terminals, stations, taxis, wharves, private car parks and beaches.

31 **“Qualified medical practitioner”** means a qualified doctor of medicine or dentist registered in the country where you receive the services and is not you or an Immediate Family Member.

32 **“Reasonable”** means, for medical or dental expenses, the standard level of care given in the country you are in OR, for other expenses, the standard level you have booked for the rest of your journey or as determined by us.

33 **“Return Trip”** means the trip from your last international departure point to China, including any trip to another destination for transit purposes prior to returning to China.

34 **“Safe or Safety Deposit Box”** means a box which is provided by a commercial bank or hotel which can only be locked and accessed by you using a key or a combination lock.

35 **“Sick”** or **“Sickness”** means a medical condition, not being an injury, which first occurs during your period of insurance.

36 **“Single Article limit”** means the maximum amount shown in your policy schedule which we will pay for a single valuable or item of personal baggage, valuable, pair or set.

37 **“Terrorist acts”** means any force or violence that is actually or threatened to be done to any natural person, property or government, thus directly causing loss, damage, danger or destruction thereto or any act that threatens the life or property of human beings for the purpose of obtaining benefits of economy, race, nationalism, politics, ethnic group or religion, in regardless of any announcement of the benefit above. Criminal activities mainly in the interest of one’s own or criminal activities mainly in connection with the receding personal relation between the victim and the offender shall not be deemed as terrorist acts, which, however, shall include any act that is approved or confirmed as a terrorist act by the local national government.

38 **“Transit”** means to transfer from one flight to another flight or mode of transport which does not involve a stopover at that destination for more than 24 hours.

39 **“Travelling Companion”** means a person with whom you have made arrangements to travel with you for at least 75% of your journey before you entered into your policy.

40 **“Unsupervised”** means:

- (1) leaving your personal baggage with a person you have not previously met;
- (2) leaving it in a position where it could reasonably be taken without your knowledge; or
- (3) leaving it at such a distance from you that you are unable to prevent it being taken.

41 **“Valuable(s)”** means, watches, items made of precious metals, or precious stones, furs, leather ware goods, binoculars, telescopes, computers, computer games, software, television, fax, telephone, portable satellite and scuba diving equipment, films, tapes, cassettes, DVDs, compact or computer discs, memory sticks and cartridges, and any other kind of photographic, audio, video or computer equipment.

Please note: Jewellery is specifically excluded in this policy.

42 **“Valuable(s) Limit”** means the maximum amount shown in your policy schedule which we will pay for all valuables lost, stolen or damaged during your journey.

43 **“War”** means any war or military action, whether declared or not, initiated by a sovereign nation to achieve economic, geographic, nationalistic, racial, religious or other ends.

44 **“Severe injury or sickness”** means Injured accidentally or being sick to a level of severity where the hospital (2nd tier and above) declares the risk of death.

45 **“Being quarantined”** means being isolated from healthy people due to medical condition (e.g. epidemic disease).

46 **“The Insurer”** means the insurer of the policy, Allianz Insurance Company Guangzhou Branch, and its service provider Mondial Assistance (Beijing) Services Co., Ltd.

47 **“The Insured”** and **“The Insured’s”** mean the applicant(s) and the person whose name(s) are set out in the Policy Schedule.

Schedule 1
Schedule of Benefits for Disablement

Class	Item	Dismemberment Degree	Payment Percentage
Class 1	1	Permanent and total blindness of both eyes (Note 1)	100%
	2	Permanent and complete loss of two arms or partial loss of two arms as long as the point of dismemberment occurs above the wrist joint (in the direction of the shoulder) or permanent and complete loss of both legs or partial loss of both legs as long as the point of dismemberment occurs above the ankle joint (in the direction of the hip)	
	3	Permanent and complete loss of one arm from or partial loss of an arm as long as the point of dismemberment occurs above the wrist joint (in the direction of the shoulder) and permanent and total loss of one leg or partial loss of a leg as long as the point of dismemberment occurs above the ankle joint (in the direction of the hip)	
	4	Permanent and complete loss of sight of one eye and permanent and complete loss of one arm or partial loss of one arm as long as the point of dismemberment occurs above the wrist joint (in the direction of the shoulder)	
	5	Permanent and complete loss of sight of one eye and permanent and complete loss of one leg or partial loss of a leg as long as the point of dismemberment occurs above the ankle joint (in the direction of the hip)	
	6	Permanent and complete loss of function of all three joints on two arms and two legs (Note 2)	
	7	Permanent and complete loss of chewing and swallowing functions (Note 3)	
	8	Extreme and permanent obstacles in function of the central nervous system or visceral organs inside the chest and abdomen, thus making you unable to perform any type of work during your whole life and needing assistance from other people for the purpose of maintaining necessary daily vital movements (Note 4)	
Class 2	9	Permanent and complete loss of functions from two joints out of three major joints of two arms or two legs or one arm and one leg (Note 5)	75%
	1 0	Permanent loss of two thumbs and eight fingers (Note 6)	
Class 3	1 1	Permanent and complete loss of one arm or partial arm as long as the point of dismemberment occurs above the wrist joint (in the direction of the shoulder) or permanent and complete loss of the whole function of three major joints of one arm	50%
	1 2	Permanent and complete loss of one leg or partial leg as long as the point of dismemberment occurs above the ankle joint (in the direction of the hip) or permanent and complete loss of the whole function of three major joints of one leg	

	1 3	Permanent and complete loss of the hearing function of both ears (Note 7)	
	1 4	Permanent and complete loss of function of two thumbs and eight fingers (Note 8)	
	1 5	Permanent and complete loss of ten toes (Note 9)	
Class 4	1 6	Permanent and complete loss of sight of one eye	30%
	1 7	Permanent and complete loss of function of two joints out of three joints of one arm	
	1 8	Permanent and complete loss of function of two joints out of three joints of one leg	
	1 9	Permanent and complete loss of the thumb and index finger and a minimum of two other fingers of one hand	
	2 0	One leg being permanently shorter by more than 5 centimetres' of the other leg	
	2 1	Permanent and complete loss of function of speaking (Note 10)	
	2 2	Permanent and complete loss of function of ten toes	
Class 5	2 3	Permanent and complete loss of the function of one joint out of three major joints of one arm	20%
	2 4	Permanent and complete loss of the function of one joint out of three major joints of one leg	
	2 5	Permanent loss of two thumbs	
	2 6	Permanent loss of five toes of one foot	
	2 7	Permanent and evident damage of eyelids of two eyes (Note 11)	
	2 8	Permanent and complete loss of the hearing function of one ear	
	2 9	Permanent damage of part of nose and remaining permanent and evident obstacle in sense of smell (Note 12)	
Class 6	3 0	Permanent loss of thumb and index finger of one hand or permanent loss of either the thumb or index finger and at least two other fingers one hand	15%
	3 1	Permanent and complete loss of function of a thumb or an index finger of one hand and at least two other fingers of one hand (Note 13)	
	3 2	Permanent and complete loss of functions of five toes of one foot	
Class 7	3 3	Permanent and complete loss of the thumb or index finger of one hand or permanent and complete loss of no less than two out of three of the middle, ring and pinkie fingers of one hand	10%
	3 4	Permanent and complete loss of function of the thumb and index finger of one hand (Note 13)	

Notes applying to benefit payments under this section:

(1) The loss of sight shall include loss or removal of eyeball or failure to discern brightness and darkness or capability to simply discern the person shaking his hands before his eyes. Optimum corrected visual acuity is lower than 0.02 stated on the international standard OPTO table or eyespot radius is less than 5 degree. Qualified Medical Practitioners who specialize in oculist designated by us shall issue certificates of medical diagnosis.

(2) Permanent loss of joint function shall refer to the complete stiffness or palsy of all joints or failure in all the joints to conduct conscious activity.

(3) Permanent loss of chewing and swallowing functions shall refer to organic obstacles or dysfunction due to reasons other than teeth, thereby failing to make chewing and swallowing movements and only enabling the intake or swallowing of liquids.

(4) Assistance from others is required to help maintain the daily activities necessary for life, including food intake, passing of urine or stools, putting on and taking off of clothes, getting up, walking, having a bath, etc., which totally cannot be done by oneself without other peoples help.

(5) Major joints of one arm shall mean joints of shoulder, elbow and wrist. The major joints of one leg shall refer to joints of hip, knee and ankle.

(6) Permanent loss of fingers shall mean the complete cut off of the part from proximal interphalangeal joint (a thumb is a interphalangeal joint.).

(7) Permanent loss of the hearing function shall refer to a circumstance that the average hearing loss of language frequency is greater than 90 decibels. The language frequencies are respectively 500, 1000 and 2000 Hz.

(8) Permanent loss of function of fingers shall refer the cut off of distant interphalangeal joint or stiffness of proximal interphalangeal joint or failure of joints in conscious activities.

(9) Permanent loss of toes of a foot shall refer to the complete cut off from phalangeal joints.

(10) Permanent loss of language function shall mean failure of three among the four language functions, namely to pronounce through lips, radula, apyichus and larynx to constitute sound, total excision of vocal cords or aphasia suffered arising from the injury of speech center in the breach. Qualified medical practitioners who specialize in the five senses (ear, nose, throat) designated by us must issue medical diagnosis certificates, excluding, however aphasia as a result of any mental handicap.

(11) Evident loss of eyelids of two eyes shall refer to a circumstance that eyelids cannot completely cover corneas when eyes are shut.

(12) Damage of part of nose and remaining permanent evident obstacle in sense of smell shall refer to the loss of the whole or one half of the nasal cartilage and nasal obstruction in two nostrils as well as nasal dyspnea, failure of correction or loss of sense of smell to two nostrils.

(13) "Permanent and complete" mentioned herein shall refer to a condition that functions still remain completely lost after one hundred and eighty days from the accidental injury, except where is evidence that the accidental injury cannot be corrected (e.g. such as the loss of an eyeball).

(14) If more than one permanent disablement has occurred to the same limb or eye as a result of the same accident but varies in degrees of disablement, benefits shall be paid only for the more serious loss.

(15) If more than one accident has occurred on the same eye or limb and resulted in different degrees of disablements, only one of the accidents will be covered and that will be the accident which resulted in the more serious loss. If the subsequent disablement is of more serious degree, the benefit payment will only be made after deducting any previous benefit payment. If the previous disablement is of more serious degree, no indemnity will be paid to this subsequent loss.

(16) If you suffer from two or more items of disablement stated in the "Schedule of Benefits for Disablement", we will pay the sum of benefits for each accidental disablement, and the amount payable shall not exceed the maximum sum insured shown in your policy schedule.

(17) If you have received benefits for permanent disability and/or third degree burns from us before you die, any benefit payable for accidental death shall be only the balance between the maximum sum insured shown in the policy schedule and the amount already paid by us.

Schedule 2
Allianz Insurance Company Guangzhou Branch
Schedule of Payment for Benefit for Accidental Third Degree Burns

Area	Burns area as a percentage of the body surface area	The Highest Payment of Benefits
Head	No less than 2% but less than 5%	50%
	No less than 5% but less than 8%	75%
	No less than 8%	100%
Body (Excluding Head)	No less than 10% but less than 15%	50%
	No less than 15 but less than 20%	75%
	No less than 20%	100%

Notes applying to benefit payments under this section:

- (1) If more than one burn or permanent disablement has occurred to the same limb as a result of the same accident but varies in degrees of severity, benefits shall be paid only for the more serious loss.
- (2) If more than one accident has occurred on the same limb and resulted in different degrees of burns, only one of the accidents will be paid and that will be the accident which caused the more serious loss.
- (3) If the subsequent accident results in burns of more serious degree, the benefit payment will only be made after deducting any previous benefit payment. If the previous burns are of more serious degree, no indemnity will be paid for this subsequent loss.
- (4) If you suffer from burns occurred to different organs or limbs as a result of different accidents, we will pay the sum of benefits for each accidental burn, and the amount payable shall not exceed the limit of the sum insured as stated in the policy schedule.

The maximum insurance compensation of 5.1 refers to the insurance policy please.