

MASTERCARD WORLD CARD LEBANON

EFFECTIVE DATE OF COVER

April 1 2014

SUMMARY OF COVER

Insurance Coverage	Maximum Benefit Amount (USD)
Purchase Protection	Per occurrence: 3,000
	Per aggregate: 20,000
Extended Warranty	Per occurrence: 500
	Per aggregate: 2,000
Fraudulent Charges Card Lost	Per occurrence: 2,000
	Per aggregate: 4,000
Fraudulent Charges Card Not Lost	Per occurrence: 2,000
	Per aggregate: 4,000
<u>Accident & Health Coverage***</u>	Maximum Benefit Amount (USD)
1. Travel Accident & Insured Journey:	
Travel Accident Common Carrier - International Trips	Up to USD 1,000,000
Travel Accident Common Carrier - Domestic Trips	Up to USD 100,000
Travel Accident Insured Journey - International Trips	Up to USD 150,000
Travel Accident Insured Journey - Domestic Trips	Up to USD 75,000
2. Travel Medical Benefits:	
Medical Expenses (Injury or Sickness)	Up to USD 1,000,000 excess of a USD 500 deductible for trips less than 180 days
Emergency Medical Evacuation/Return of Mortal Remains	Up to USD 2,000,000
Daily In-Hospital Cash Benefit	Up to USD 100 per Day
3. Trip Inconvenience Protection:	
Trip Cancellation	Up to USD 7,500 excess of a USD 500 deductible
Trip Curtailment	Up to USD 7,500 excess of a USD 500 deductible
Trip Delay	For delays in excess of 6 hours, Up to USD 100 per hour up to 9 hours maximum
Missed Connection	Up to USD 650, excess of a USD 50 deductible
4. Luggage Protection:	
Common Carrier Lost Baggage	Up to USD 3,000 excess of a USD 75 deductible and subject to a single item max limit of USD 625
Common Carrier Baggage Delay	For delays in excess of 12 hours, up to USD 450

*** Under each of the above Accident & Health Coverage benefits, a 50% sub-limit is applicable for **Spouse** with a maximum of \$250,000 under 1. Travel Accident & Insured Journey, a maximum of \$500,000 under Medical Expenses (Injury or Sickness) and a maximum of \$1,000,000 under Emergency Medical Evacuation/Return of Mortal Remains. A 10% sub-limit is also applicable for **Children** with a maximum of \$10,000 under 1. Travel Accident & Insured Journey, a maximum of \$100,000 under Medical Expenses

(Injury or Sickness) and a maximum of \$200,000 under Emergency Medical Evacuation/Return of Mortal Remains.

Please also See Assistance Department section for information on additional features and benefits.

Each insurance benefit limit described in this Guide is in United States Dollars (USD). Payment of claims will be made in local currency where required by law, with the official Foreign Exchange Rates published on the date Claim payment is made.

Guide Exchange Rate: LBP 1508.29 = USD 1

PART A

PURCHASE PROTECTION INSURANCE TERMS & CONDITIONS FOR LEBANON CARDHOLDERS

SECTION I GENERAL DEFINITIONS

Terms with a specific meaning are defined below and have this meaning wherever they appear with an initial capital letter.

Accidental Damage: items that can no longer perform the function they were intended for due to broken parts or material or structural failures due to an accident.

Annual Aggregate Limit: the maximum amount of benefit per Cardholder available during the **policy period**.

Cardholders/Insured Persons: all individuals who have been issued an Eligible Card, including secondary or additional cardholders on the same account, in the Territory and where such Eligible Card is issued by a participating Issuer.

Covered Purchases: items, other than those listed in Section III Exclusions, purchased entirely with the Eligible Card and/or have been acquired with points earned by a Rewards Program associated with the Eligible Card.

Eligible Card: a participating Issuer's MasterCard World credit or debit cards.

Eligible Cardholders: those Cardholders with Eligible Cards that are valid, open and in good standing (not cancelled, suspended or delinquent) at the time of claim who shall be entitled to receive payment or such other benefit as is provided for in the Purchase Protection Insurance Certificate.

Insurer: AIG Lebanon SAL

Issuer: a bank or financial institution or like entity that is authorized by MasterCard to operate a MasterCard credit card program in the Territory and is participating in the Purchase Protection offering to Cardholders.

Per Occurrence Limit: the maximum amount of benefit available under the Purchase Protection Insurance for any single Covered Purchase.

Policy Period: 1st April 2014 to 31st March 2015

Territory: Worldwide.

Theft: the illegal act of taking a Covered Purchase belonging to the Insured Person, without their consent, with intent to deprive him/her of its value.

SECTION II COVERAGE

The Insurer will pay for loss of Covered Purchases due to Accidental Damage or Theft, occurring within ninety (90) days from the date of purchase as indicated on the store receipt, up to the Per Occurrence Limit, and subject to the Annual Aggregate Limit per Cardholder.

- Covered Purchases given as gifts are covered.
- Covered Purchases include internet purchases.
- Covered Purchases do not have to be registered.

SECTION III EXCLUSIONS

This plan of insurance does not provide coverage for any of the following:

- 1) any motor vehicle airplanes, boats, automobiles and motorcycles and any equipment, parts or accessories; 2) permanent fixtures, including but not limited to carpeting, flooring, tile, air conditioners, refrigerators, or heaters; 3) travelers check(s), cash, tickets of any kind, negotiable instruments, bullion, rare or precious coins or stamps; 4) art, antiques, collectable items, furs, jewelry, gems and precious stones; 5) consumables or perishables; 6) plants or animals; 7) used, rebuilt, refurbished, or remanufactured items at the time of purchase; 8) items rented or leased; 9) items purchased for resale, professional, or commercial use; 9) services, shipping, handling, installation or assembly costs; 10) items damaged through alteration (including cutting, sawing, and shaping); 11) items left unattended in a place to which the general public has access; 12) losses caused by abuse, willful damage, vermin and insect infestation, wear and tear, inherent product defect, mechanical or electrical failure, nuclear, biological or chemical event, terrorism or war.

SECTION IV CONDITIONS

- 1) It is the Insurer's discretion to decide whether to have the item repaired or replaced, or to reimburse the original purchase price less any rebates, discounts or rewards points.
- 2) Covered Purchases that are a pair or a set will be limited to the cost of repair or replacement of the specific item if repairable or replaceable; otherwise, the value of the pair or set will be covered, not to exceed the Per Occurrence Limit.

SECTION V UNIFORM PROVISIONS

1. Valid Account: The Eligible Card must remain open, valid and in good standing for payments to be made.

2. Notice of Claim: Written notice of claim must be given no later than thirty (30) days from the date of the incident. Failure to give notice within (30) days from the date of the incident may result in a denial of the claim. Notice should be sent to:

AIG Lebanon S.A.L.
 Beirut Central District,
 Uruguay street,
 Off Fosch Street
 Mcattaf Building - 3rd floor
 P. O. Box 13-5459 - Beirut
 Lebanon
 Tel: +961-1-788134
 Fax: +961 - 1 990 128

Office Timings: 8:00am to 5:00pm (UAE Time), from Sunday to Thursday
Languages Supported: English / Arabic
Mastercard.Services@AIG.com

3. Proof of Loss:

The Cardholder must provide:

- a) a signed claim form, if provided
- b) copy of purchase receipt showing payment of the item was made entirely with the Eligible Card;
- c) For theft claims, official copies of the police report within ninety (90) days of incident;
- d) For damage claims, official copies of the repair estimates;
- e) Cardholder's statement of account showing the account is open and in good standing at the time of filing the claim.

****Cardholders may be required to send in the damaged item(s), at their expense, for further evaluation of the claim.***

4. Payment of Claims: All benefits will be paid by the Insurer to the Eligible Cardholders. Payment of any indemnity shall be subject to the laws and governmental regulations then in effect in the country of payment.

5. Fraudulent Claims: If the claim is in any respect fraudulent all benefits in respect of such claim shall be forfeited.

6. Governing Law and Jurisdiction: This purchase protection insurance, its eligibility and any terms and conditions are to be interpreted according to the laws of Lebanon. Any dispute will be subject to the jurisdiction of the competent courts of Lebanon.

PART B

EXTENDED WARRANTY BENEFIT TERMS & CONDITIONS FOR LEBANON CARDHOLDERS

SECTION I GENERAL DEFINITIONS

Terms with a specific meaning are defined below and have this meaning wherever they appear with an initial capital letter.

Annual Aggregate Limit: the maximum amount of benefit per Cardholder available during the **policy period**.

Cardholder(s): all individuals who have been issued an Eligible Card, including secondary or additional cardholders on the same account, in the Territory and where such Eligible Card is issued by a participating Issuer.

Covered Purchases: items, other than those listed in Section III Exclusions, purchased entirely with the Eligible Card and/or have been acquired with points earned by a Rewards Program associated with the Eligible Card.

Eligible Card: a participating Issuer's MasterCard World credit or debit cards.

Eligible Cardholders: those Cardholders with Eligible Cards that are valid, open and in good standing (not cancelled, suspended or delinquent) at the time of service request who shall be entitled to receive Payment or such other benefit as is provided for under the Extended Warranty Benefit.

Issuer: a Bank or financial institution or like entity that is authorized by MasterCard to operate a MasterCard credit card program in the Territory and is participating in the Extended Warranty Benefit offer to Cardholders.

Manufacturer Warranty: the contractual obligation to repair or to replace an article due to mechanical breakdown that renders the article unfit for its intended purpose provided by the maker of the item. This includes store brand warranties provided on store brand products.

Per Occurrence Limit: the maximum amount payable under the Extended Warranty Benefit for any single Covered Purchase.

Policy Period: 1st April 2014 to 31st March 2015

Territory: Lebanon.

SECTION II COVERAGE

Upon the expiration of the Manufacturer's Warranty, the Extended Warranty Benefit duplicates the terms of the original Manufacturer's Warranty up to one (1) full year for Covered Purchases that cease to operate satisfactorily and require repairs during the Policy Period. Benefits are provided to pay for the repair or replacement of a Covered Purchase, up to the amount charged for the item or Per Occurrence Limit, whichever is less, subject to the Annual Aggregate Limit.

- Covered Purchases given as gifts are covered.
- Covered Purchases include internet purchases.
- Covered Purchases do not have to be registered.

SECTION III EXCLUSIONS

This Extended Warranty Coverage will not apply to:

1) boats; 2) motorized vehicles including airplanes, automobiles and motorcycles, and any equipment, parts or accessories; 3) land or buildings; 4) consumables and perishables 5) any customized, unique, or rare items 6) used, rebuilt, refurbished and re-manufactured items at the time of purchase; 7) items purchased for resale, professional, or commercial use; 8) items which carry a "satisfaction guaranteed" promise that provides product replacement or benefits for anything other than defects in materials and workmanship of the item; 9) items which carry a Manufacturer's Warranty of longer than three years; 10) services, maintenance, repair, installation or assembly costs; 11) any shipping or promised time frames of delivery, whether or not stated or covered by the Manufacturer's Warranty; and 12) any costs relating to damage to Covered Products caused by accident, neglect, abuse, willful damage, vermin and insect infestation, misuse, theft, sand, fire, earthquake, storm and tempest, lightning, explosion, aircraft impact, water damage, corrosion, battery leakage or Acts of God.

SECTION IV CONDITIONS

- 1) Covered Purchases must have a minimum Manufacturer's Warranty of twelve (12) months; and cannot have greater than a maximum combined Manufacturer's Warranty and additional optional warranty period of three (3) years.
- 2) Covered Purchases must have a valid Manufacturer's Warranty in the country of use stating the extent of cover, the period of cover, what the manufacturer will do to correct the problem and whom to contact for service.
- 3) Covered Purchases may be repaired or replaced or the Cardholders may receive reimbursement of the original purchase price less any rebates, discounts or rewards points.

SECTION V UNIFORM PROVISIONS

1. Valid Account: The Eligible Card must remain open, valid and in good standing for payments to be made.

2. Notice of Service Request: Written request for service must be given no later than thirty (30) days from the date of the incident. Failure to give notice within (30) days from the date of the incident may result in a denial of service. Notice should be sent to:

AIG Lebanon S.A.L.
Beirut Central District,
Uruguay street,

Off Fosch Street
Mcattaf Building - 3rd floor
P. O. Box 13-5459 - Beirut
Lebanon
Tel: +961-1-788134
Fax: +961 - 1 990 128

Office Timings: 8:00am to 5:00pm (UAE Time), from Sunday to Thursday
Languages Supported: English / Arabic
Mastercard.Services@AIG.com

3. Proof of Loss:

The Cardholder must provide:

- a) a signed service request form, if provided
- b) copy of purchase receipt showing payment of the item was made entirely with the Eligible Card and / or Rewards Program;
- c) legible copies of all warranty information including, but not limited to: the manufacturer's original warranty; the store warranty; or any other applicable extended warranty;
- d) Cardholder's statement of account showing the account is open and in good standing at the time of filing the service request.

****Cardholders may be required to send in the damaged item(s), at their expense, for further evaluation.***

4. Payments: MasterCard authorizes **AIG Lebanon SAL** to make payments on their behalf to Eligible Cardholders. Payment of any indemnity shall be subject to the laws and governmental regulations then in effect in the country of payment.

5. Fraud: If the service request is in any respect fraudulent all benefits in respect of such service request shall be forfeited.

6. Governing Law and Jurisdiction: This Extended Warranty Benefit, its eligibility and any terms and conditions are to be interpreted according to the laws of Lebanon. Any dispute will be subject to the jurisdiction of the competent courts of Lebanon.

PART C

FRAUDULENT CHARGES TERMS & CONDITIONS FOR LEBANON CARDHOLDERS

SECTION I GENERAL DEFINITIONS

Terms with a specific meaning are defined below and have this meaning wherever they appear with an initial capital letter.

Annual Aggregate Limit: the maximum amount of benefit per Cardholder available during the **policy period**.

ATM means automatic teller machine.

Bank account means any account for personal use, with a qualified financial institution, against which the account holder can deposit and withdraw money, or, deposit and draw checks.

Burglary means the unlawful taking of your property, or an attempt thereof, by a person or persons who illegally entered **your** primary residence, using force or violence, with visible signs of forced entry.

Business means (i) a trade, profession or occupation including those conducted on a full-time, part-time or occasional basis, or, (ii) any other legal activity in which one is engaged for money or other compensation.

Credit account means any credit arrangement, from a qualified financial institution, for personal use, such as a credit card account or a car/home loan account.

Cardholder(s)/Insured Person(s): all individuals who have been issued an Eligible Card, including secondary or additional cardholders on the same account, in the Territory where such Eligible Card is issued by a participating Issuer.

Eligible Card: the MasterCard World credit or debit cards within the Territory.

Eligible Cardholders: those Cardholders with Eligible Cards that are valid, open and in good standing (not cancelled, suspended or delinquent) at the time of claim who shall be entitled to receive payment or such other benefit as is provided for in this Policy.

Issuer: a bank or financial institution or like entity that is authorized by MasterCard to operate a MasterCard credit or debit card program in the Territory and is participating in the Fraudulent Charges offering to Cardholders.

Lost means no longer in Cardholders' possession due to having been (i) inadvertently misplaced, or, (ii) in an irretrievable place.

Payments: a payment to be made under the terms and conditions of the Policy by an Insurer.

Per Occurrence Limit: the maximum amount payable under the Policy for any single covered loss occurrence.

Policy: this contract of insurance.

Policy Period: 1st April 2014 to 31st March 2015

Relative means Cardholders' legally married spouse, legal civil partner, parent, step-parent, parent in-law, grandparent, child, stepchild, legally adopted child, grandchild, brother, brother in-law, sister, sister in-law, son in-law, daughter in-law, uncle, aunt, niece, nephew, and first cousin.

Robbery means the unlawful taking of **Cardholders'** property, by a person or person(s), by using violence or the threat of violence and who has/have caused, or threatened, physical harm to **you, Cardholders'** spouse and or civil partner and/or children under age 21.

Rewards Program: a program offered by the Issuer allowing the Cardholder to earn value (points, cash, etc.) and redeem rewards (merchandise, travel, etc.) on the Eligible Card.

Stolen: items that are taken by force and/or under duress or the disappearance of the item from a known place under circumstances that would indicate the probability of theft.

Insurer: AIG Lebanon SAL

Territory: Worldwide.

Terrorist Act: the use or threatened use of force or violence against person or property, or commission of an act dangerous to human life or property, or commission of an act that interferes with or disrupts an electronic or communication system, undertaken by any person or group, whether or not acting on behalf of or in any connection with any organization, government, power, authority or military force, when the effect is to intimidate, coerce or harm a government, the civilian population or any segment thereof, or to disrupt any segment of the economy. Terrorism shall also include any act which is verified or recognized as an act of terrorism by the government where the event occurs.

Theft: means the unlawful taking of property from **Cardholders'** care and or custody without consent, with the intent of gain, as a result of a **robbery** or a **burglary**.

War: any declared or undeclared war or any warlike activities, including use of military force by any sovereign nation to achieve economic, geographic, nationalistic, political, racial, religious or other ends.

You means the beneficiary of the insurance coverage.

Your means belonging or pertaining to **you**.

We, us, and our means the company providing this insurance – **AIG Lebanon SAL**

SECTION II COVERAGE

This insurance will cover the following, up to the Cardholders' per occurrence and annual aggregate limits listed.

1. If **Cardholders' Eligible Card** is **lost**, or is the object of a **theft**, **we** will reimburse the Cardholder for the unauthorized charges, for which the Cardholder is responsible, on **Cardholders' Eligible Card**, up to 24 hours prior to the Cardholder first reporting of the event to the **Issuer(s)**.
2. If the **Cardholders' Eligible Card** is still in the **Cardholders'** possession and unauthorized charges are made on the **Cardholders' bank account** and/or **credit account**, through: (i) in-store, (ii) telephone, (iii) **ATM** withdrawals, and/or (iv) on-line purchase(s), using **Cardholders' Eligible Card** information, **Insurer** will reimburse the Cardholder for the unauthorized charges, for which the Cardholder is responsible, which are incurred up to two (2) months prior to the Cardholder first reporting of the event to **the Issuer(s)**.

SECTION III EXCLUSIONS

This insurance will not cover:

1. Costs other than those listed in Section II. "What **We** Cover";
2. Additional losses that occur due to **your** failure to comply with Section V.3, "Duties After A Loss";
3. Unauthorized charges made on **Eligible Card** that was **lost** or the object of **theft**, more than 24 hours prior to **your** first reporting the event to **your Eligible Card issuer(s)**;
4. Unauthorized **ATM** withdrawals that were made more than two (2) months prior to **your** first reporting the event to **your Eligible Card issuer(s), bank account issuer(s) and/or credit account issuer(s)**;
5. Unauthorized charges made on **your Eligible Card** if **your Eligible Card** has not been **lost**, or the object of **theft**, more than two (2) months prior to **your** first reporting the event to **your Eligible Card issuer(s)**;
6. Charges incurred by a resident of **your** household, or by a person entrusted with **your Eligible Card**;
7. Losses that do not occur during the **policy period**;
8. Losses that result from, or are related to, **business** pursuits including your work or profession;
9. Losses caused by **your, or your relatives'**, illegal acts;
10. Losses that **you** have intentionally caused;

11. Losses that result from the intentional actions of a **relative**, or actions that a **relative** knew of or planned;
12. Losses due to war, invasion, act of foreign enemy, hostilities or warlike operations (whether war has been declared or not), civil war, rebellion, revolution, insurrection, civil commotion, uprising, military or usurped power, martial law, terrorism, riot or the act of any lawfully constituted authority or vandalism of any kind; or
13. Losses due to the order of any government, public authority, or customs' official.

SECTION IV CONDITIONS

This Policy will only insure the Policyholder's liability under the following conditions:

- i. **Cardholder** must comply with all terms and conditions by which Cardholders' **Eligible Card(s)** is/are issued.
- ii. **Insurer** will only pay for unauthorized charges for which **Cardholder** is responsible under the terms and conditions of the Cardholders' **Eligible Card(s)**.
- iii. **Cardholder** must submit evidence to Insurer that unauthorized charges were made from Cardholders' **bank account** or **credit account**.
- iv. **Cardholders'** account must be valid and in good standing for coverage to apply; Benefits will not be paid if, on the date of occurrence, on the date of claim filing, or on the date of would-be claim payment, **Cardholders'** account is in delinquency, collection, or cancellation status.
- v. Coverage will be voided, whether before or after the loss, if **Cardholder** willfully concealed or misrepresented any material fact or circumstance concerning this insurance or provided fraudulent information to **Insurer**.
- vi. **Cardholder** must use all reasonable means to avoid future loss at and after the time of a loss.
- vii. **If we** make any payment or otherwise make good on any loss applying under this policy, **we** shall be subrogated to all **Cardholders'** rights of recovery against any other person or persons and **you** shall complete, sign and deliver any documents necessary to secure such rights. **You** shall not take any action following a loss to prejudice such rights of subrogation.
- viii. In any action, suit or other proceedings where **we** allege that by reason of provision of any exclusion which may be applicable, any loss or damage is not covered by this policy, the burden of proving that such loss or damage is covered shall be on **you**.
- ix. For each of the coverages, regardless of the number of claims made individually or in aggregate, **Insurer** will pay up to the maximum amount per occurrence and per annual aggregate as shown on this policy
- x. Coverages provided by this policy are in excess; this means that if, at the time of occurrence, **you** have other valid and collectible insurance - such as, but not limited to, homeowner's, contents', renter's, health, travel, accident or medical insurance -

this policy will only cover that amount not covered by such other insurance, up to the limits of the specific coverage as shown in the terms and conditions.

- xi. **We** have no duty to provide coverage under this policy unless there has been full compliance with the duties that are detailed in each policy section.

SECTION V UNIFORM PROVISIONS

1. Valid Account: The Eligible Card must remain open, valid and in good standing for payments to be made.

2. Notice of Claim: Written notice of claim must be given no later than thirty (30) days from the date of the incident. Failure to give notice within (30) days from the date of the incident may result in a denial of the claim. Notice should be sent to:

AIG Lebanon S.A.L.
Beirut Central District,
Uruguay street,
Off Fosch Street
Mcattaf Building - 3rd floor
P. O. Box 13-5459 - Beirut
Lebanon
Tel: +961-1-788134
Fax: +961 - 1 990 128

Office Timings: 8:00am to 5:00pm (UAE Time), from Sunday to Thursday

Languages Supported: English / Arabic

Mastercard.Services@AIG.com

3. Duties after loss:

In the event of a covered loss, **you** shall:

1. Contact **us** at the contact details above, within 24 hours of **your** discovery of a loss, to obtain a claim form and instructions on what to do after a loss;
2. File a police report within 24 hours of discovering a **theft**, unauthorized charges or **ATM** withdrawals;
3. Report the **theft** or loss of **your Eligible Card** to the **Eligible Card issuer(s), bank account issuer(s) or credit account issuer(s)**, within 24 hours of discovering such **theft** or loss;
4. To the extent **your Eligible Card** was not **lost** or the object **theft**, report the unauthorized charges, or **ATM** withdrawal(s), to the **Eligible Card issuer(s), bank account issuer(s) or credit account issuer(s)**, and to **us**, within 24 hours of **your** discovery of a loss;

5. Complete, sign and return the claim form to **us** with all the following documents, within 30 days of making the original claim:
- documentation from the **Eligible Card issuer(s)** verifying the unauthorized charges for which **you** are held responsible;
 - an official police report regarding the loss; and
 - all other relevant documents **we** may ask **you** to provide; and
 - Cooperate with **us** in investigating, evaluating and settling a claim

4. Payment of Claims: All claims will be paid by the local Insurer to the Eligible Cardholders.

5. Fraudulent Claims: If the claim is in any respect fraudulent all payments in respect of such claim shall be forfeited.

6. Governing Law and Jurisdiction: This Fraudulent Charges cover, its eligibility and any terms and conditions are to be interpreted according to the laws of Lebanon. Any dispute will be subject to the jurisdiction of the competent courts of Lebanon.

PART D

ACCIDENT AND HEALTH – Assistance Department, Travel Insurance & Emergency Medical Insurance

For Customer Service in case of a medical emergency call:

Assistance Department

24 hours Assistance Departments :

When travelling inside the US (N-America): 866 273 9079 toll free number

For Travel outside the US (N-America): 001 817-826-7014 call collect

For information on how to file a claim, see “General procedure - how to file a claim section”

Assistance Department

Rely on the Assistance Department when you're away from home. The Assistance Department is your guide to many important services you may need when travelling. Benefits are designed to assist You when travelling Out of Country. This is reassuring, especially when You visit a place for the first time or do not speak the language.

Please keep in mind that the Assistance Department is not insurance coverage and that You will be responsible for the fees incurred for professional or emergency services requested of the Assistance Department (for example, medical or legal bills). This benefit may reimburse you for medical related expenses (Please refer to the Travel Medical section for additional information).

1. Who is Covered:

An Eligible Cardholder and his Family.

2. Where the service is available:

In general, coverage applies worldwide, but there are exceptions.

- Restrictions may apply to regions that may be involved in an international or internal conflict, or in those countries and territories where the existing infrastructure is deemed inadequate to guarantee service. You may contact the Assistance Department prior to embarking on a Covered Trip to confirm whether or not services are available at your destination(s).

3. Assistance Department:

- During your trip, in the event of an emergency, the Assistance Department provides information on travel requirements, including documentation (visas, passports), immunizations, or currency exchange rates. The exchange rate

provided may differ from the exact rate that issuers use for transactions on your card. Information on exchange rates for items billed on your statement should be obtained from the financial institution that issued your card.

- In case of loss or theft your travel tickets, passport, visa or other identity papers necessary to return home, the Assistance Department will provide assistance in replacing them by contacting local police, consulates, airline company or other appropriate entities.
- In the event of loss or theft of the transportation ticket to return home, a replacement transportation ticket can be arranged.
- Please note that this service does not provide maps or information regarding road conditions.

4. Medical Assistance Departments:

- Provides a global referral network of general physicians, dentists, hospitals, and pharmacies.
- Provide help with prescription refills with local pharmacists (subject to local laws).
- In the event of an emergency, the Assistance Department will make arrangements for a consultation with a general practice physician. Additionally, the Assistance Department medical team will maintain contact with the local medical staff and monitor your condition.
- If You are hospitalized, we can arrange to have messages relayed home, transfer you to another facility if medically necessary, or have a family member or close friend brought to your bedside if you have been travelling alone (this will be at cardholder's expense).
- If the medical team determines that adequate medical facilities are not locally available in the event of an accident or illness, We will arrange for an emergency evacuation to a hospital or to the nearest facility capable of providing adequate care.
- If a tragedy occurs, we'll assist in securing travel arrangements for You.

5. Legal Referral Services:

- If You are arrested or are in danger of being arrested as the result of any non-criminal action resulting from responsibilities attributed to You, We will assist, if required, to provide You with the name of an attorney who can represent You in any necessary legal matters.

GENERAL KEY TERMS AND DEFINITIONS

Accident: means a sudden, unforeseen, uncontrollable and unexpected physical event to the Insured Person caused by external, violent and visible means occurring during a Covered Trip.

Annual Aggregate Limit: the maximum amount of benefit per Cardholder available during the **policy period**.

Cardholder(s): means all individuals who have been issued an Eligible Card, including secondary or additional cardholders on the same account, in the Territory and where such Eligible Card is issued by a participating Issuer.

Child or Children: means the Eligible Cardholders' son or daughter, biological offspring, stepchildren and directly and biologically related children born outside of marriage aged above 6 months and under eighteen (18) years of age (or under twenty three (23) years of age if a full time student), unmarried and primarily dependent on the Insured Person for support.

Common Carrier: means any land, sea or air travel arrangements for a scheduled tour, trip or cruise to any location pre-paid with the Eligible Card. This includes planned and pre-paid domestic trips only beyond 100km from Your City of Permanent Residence.

City of Permanent Residence: means the city in which you are residing.

Country of Permanent Residence: means the country where You are currently residing and hold a valid residency visa or where you were born there.

Covered Trip: means an Insured Person's land, sea or air travel arrangements for a scheduled tour, trip or cruise pre-paid with the Eligible Card. Covered Trip will be from the departure date to the return date as shown on the ticket purchased with the Eligible Card subject to a maximum of 180 days. This will include planned and pre-paid domestic trips from the Insured Person's City of Permanent Residence.

Eligible Card: means the MasterCard World credit or debit Cardholders' cards issued from time to time in the individual countries within the Territory.

Eligible Cardholders: means those Cardholders aged between 18 years and 69 years with Eligible Cards that are valid, open and in good standing (not cancelled, suspended or delinquent) at the time of purchase of Covered Trip who shall be entitled to receive payment or such other benefit as is provided for in this Policy.

Excess/Deductible/Elimination Period: means the amount of expenses or the number of days of each and every Loss payable by You before the Policy benefits become payable.

Family: means the Spouse and up to 3 Children.

Hospital: means a place that:
(a) holds a valid license (if required by law);

(b) operates primarily for the care and treatment of Sick or injured persons;
(c) has a staff of one or more Physicians available at all times;
(d) provides 24-hour nursing service and has at least one registered professional nurse on duty at all times;
(e) has organized diagnostic and surgical facilities, either on premises or in facilities available to the Hospital or a pre-arranged basis; and
(f) is not, except incidentally, a clinic, nursing home, rest home, or convalescent home for the aged, or a facility operated as a drug and/or alcohol treatment centre.

Injury: means a bodily injury caused solely and directly by violent, accidental, external and visible means resulting directly and independently of all other causes occurring during a Covered Trip while this Policy is in effect.

Insured Person(s): means an Eligible Cardholder or other eligible person(s) who are defined as being eligible under each program's "Who is Covered" provision in this guide.

Insured Events: means an occurrence which is outlined in the Benefits as a circumstance for which coverage is provided that takes place during a Covered Trip. Insured Events include those that occur during acts of Terrorism.

Insurers/We/Us: means the Insurers that shall be responsible for providing Travel Insurance to cardholders in their country of registration.

Issuer: means a Bank or financial institution (or like entity) that is admitted and/or authorized by MasterCard to operate a MasterCard credit card program in the Territory and is participating in the Travel Insurance offering to Cardholders.

MasterCard: means MasterCard Asia/ Pacific Pte. Ltd, a corporation organized under the laws of Singapore, with its offices at 152 Beach Road #35-00, The Gateway East, Singapore 189721.

Medically Necessary: medical services or supplies which (a) are essential for diagnosis, treatment; or care of the covered loss under the applicable benefit for which it is prescribed or performed; (b) meets generally accepted standards of medical practice; and (c) is ordered by a Physician and performed under his or her care, supervision or order.

Per Cover Limit: means the maximum amount payable under any single Cover per Cardholder during the Policy Period.

Physician: means a doctor of medicine or a doctor of osteopathy licensed to render medical services or perform surgery in accordance with the laws of the country where such professional services are performed, however, such definition will exclude chiropractors, physiotherapists, homeopaths and naturopaths.

Policy: means a contract of insurance and any attached endorsements or riders issued to MasterCard.

Policy Period: 1st April 2014 to 31st March 2015

Pre-existing Condition: for an Injury, means a condition for which medical care, treatment, or advice was recommended by or received from a Physician within a two year period preceding the Policy Effective Date, or a condition for which hospitalization or surgery was required within a five year period preceding the Policy Effective Date.

Sickness: means illness or disease of any kind contracted and/or commencing during a Covered Trip.

Spouse: means the Eligible Cardholders' legally married husband or wife between the ages of eighteen (18) years and sixty-nine (69) years.

Territory: means the countries in which Eligible Cards are issued.

Terrorist Act: means the use or threatened use of force or violence against person or property, or commission of an act dangerous to human life or property, or commission of an act that interferes with or disrupts an electronic or communication system, undertaken by any person or group, whether or not acting on behalf of or in any connection with any organization, government, power, authority or military force, when the effect is to intimidate, coerce or harm a government, the civilian population or any segment thereof, or to disrupt any segment of the economy. Terrorism shall also include any act which is verified or recognized as an act of terrorism by the government where the event occurs.

War: means any declared or undeclared war or any warlike activities, including use of military force by any sovereign nation to achieve economic, geographic, nationalistic, political, racial, religious or other ends.

<u>TRAVEL ACCIDENT COMMON CARRIER & INSURED JOURNEY INSURANCE</u>
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World MasterCard cardholders can benefit from comprehensive travel accident insurance coverage offered through MasterCard.

1. Definitions Travel Accident:

Exposure and Disappearance means if an Insured Person suffers a Loss resulting from being unavoidably exposed to the elements due to a covered Accident, it will be covered

as if resulting from an Injury. If the body of an Insured Person has not been found within one year after the forced landing, stranding, sinking or wrecking of a conveyance in which the Insured Person was a passenger, then it shall be deemed the Insured Person has suffered loss of Life.

Limb means entire arm or entire leg.

Loss means for

- (a) hand or foot means actual severance through or above the wrist or ankle joints;
- (b) eye means entire and irrecoverable loss of sight;
- (c) thumb and index finger means actual severance through or above the joint that meets the hand at the palm;
- (d) speech or hearing means entire and irrecoverable loss of speech or hearing of both ears.

Member is defined as one hand; one foot; sight of one eye; speech; or hearing in both ears.

Principal Benefit means the maximum amount payable for: accidental loss of Life; two (2) or more Members.

2. Who Is Covered:

An Eligible Cardholder and his Family.

3. To Get Coverage:

Coverage is provided automatically when the entire cost of the Common Carrier passenger fare has been charged to your World MasterCard and/or has been acquired with points earned by a rewards program associated with your card (i.e. mileage points for travel).

4. Coverage Description:

➤ ***Travel Accident Common Carrier:***

Provides **Common Carrier Travel Accident Insurance** coverage against Accidental Death, Dismemberment (including loss of sight, speech & hearing) **while travelling on a Common Carrier** if tickets are purchased with your card.

- The maximum Principal Benefit provided for Covered Trips on a Common Carrier is up to USD 1,000,000 per person (sub-limits apply for **Spouse** and **Children**, please refer to the above SUMMARY OF COVER for more details), for international flights.
- The maximum Principal Benefit provided for Covered Trips on a Common Carrier is up to USD 100,000 per person (sub-limits apply for **Spouse** and **Children**,

please refer to the above SUMMARY OF COVER for more details), for domestic flights outside of your City of Permanent Residence.

- A trip commences when the Insured Person boards a Common Carrier for the purpose of going on such trip and continues until such time as the Insured Person alights (departs) from the Common Carrier.

Schedule of Losses:

For Loss of:	Percentage of the Principal Benefit:
Life	100%
Two Members	100%
One Member	50%
Thumb and Index Finger of Same Hand	25%

➤ ***Travel Accident Insured Journey:***

Provides Insured Journey Travel Accident Insurance coverage after you disembark from the Common Carrier at the destination of the trip (as designated on the passenger ticket), against Accidental Death, Dismemberment (including loss of sight, speech & hearing), 24 hours/day worldwide. This coverage is meant to complement and not duplicate the Common Carrier Travel Accident Insurance coverage provided above.

- The maximum Principal Benefit for Insured Journey is up to USD 150,000 per person (sub-limits apply for **Spouse** and **Children**, please refer to the above SUMMARY OF COVER for more details), for international trips.
- The maximum Principal Benefit for Insured Journey is up to USD 75,000 per person (sub-limits apply for **Spouse** and **Children**, please refer to the above SUMMARY OF COVER for more details), for domestic trips outside of your City of Permanent Residence.
- The coverage of an Insured Journey begins when you alight from (leave) a Common Carrier while on a Covered Trip and ends when you board a Common Carrier on a Covered Trip, whichever occurs sooner.
- A trip commences when the Insured Person boards a Common Carrier for the purpose of going on such trip and continues until such time as the Insured Person alights (departs) from the Common Carrier.

Schedule of Losses:

For Loss of:	Percentage of the Principal Benefit:
Life	100%
Two Members	100%
One Member	50%
Thumb and Index Finger of Same Hand	25%

5. Coverage Conditions/Limitations:

- A covered Loss must occur within 365 days of the date of the Accident;
- In the event that you have multiple Losses due to the same Accident, only one (1) payment, the largest, will be paid;
- Coverage extends to Exposure and Disappearance;
- Loss caused by or resulting from Acts of Terrorism (defined herein) are not excluded;
- Once the limit of 1,000,000 USD is reached per person (sub-limits apply for **Spouse** and **Children**, please refer to the above SUMMARY OF COVER for more details), no further payment is made for the Travel Accident & Insured Journey insurance.

6. What is NOT Covered by Travel Accident – In addition to General Exclusions:

Does not cover any loss, fatal or non-fatal, caused by or resulting from:
loss caused directly or indirectly, wholly or partly by medical or surgical treatment
except as may be necessary solely as a result of Injury.

TRAVEL MEDICAL BENEFITS

We will pay the usual reasonable and customary charges for Covered medical Expenses, not due to a Pre-Existing condition, sustained by You while travelling outside of Your Country of Permanent Residence. All expenses must be incurred within (fifty two) 52 weeks of the date Your coverage terminates under this Policy.

1. Who is Covered:

An Eligible Cardholder and his Family.

2. To Get Coverage:

Coverage is provided automatically when the entire cost of the Common Carrier passenger fare has been charged to your eligible World MasterCard card; or has been acquired with points earned by a rewards program associated with your card (i.e. mileage points for travel).

3. Key Features:

- Trips are covered for travel worldwide.
- Coverage is provided for Injury or Sickness, even if it is not an emergency.
- Medical Expense coverage up to a maximum benefit amount of USD 1,000,000 per person (sub-limits apply for **Spouse** and **Children**, please refer to the above SUMMARY OF COVER for more details).
- The Medical Expense coverage is subject to a deductible of USD 500 per claim.
- No limitation on the number of trips.
- Coverage is provided for both, one-way or round trip travel.
- Covered losses caused by or resulting from Acts of Terrorism are not excluded.

MEDICAL EXPENSES:

If You suffer an Injury or Illness and need medical attention while outside of Your Country of Permanent Residence, benefits are provided for Covered Medical Expenses. This coverage provides a maximum benefit up to USD 1,000,000 per person (sub-limits apply for **Spouse** and **Children**, please refer to the above SUMMARY OF COVER for more details).

- There is a deductible of USD 500.

1. Covered Medical Expenses include:

- a) The services of a Physician including diagnosis, treatment and surgery by a Physician;
- b) charges made by a Hospital for room and board, floor nursing and other services, including charges for professional services, except personal services of a non-medical nature, provided, however, that expenses do not exceed

the Hospital's average charge for semi-private room and board accommodation;

- c) Anesthetics (including administration), x-ray examinations or treatments, and laboratory tests, the use of radium and radioactive isotopes, oxygen, blood transfusions, iron lungs and medical treatment;
- d) Ambulance Services; and
- e) Dressings, drugs, medicines and therapeutic services and supplies that can only be obtained upon a written prescription from a Physician or surgeon;
- f) Dental Treatment resulting from injuries sustained to sound, natural teeth subject to a maximum of USD 100 per tooth.

The charges for services enumerated above shall not include any amount of such charges that are in excess of regular and customary charges or excluded.

Regular and Customary means the charge for the services and supplies for which the charge is made if it is not in excess of the average charge for such services and supplies in the locality where received, considering the nature and severity of the Sickness or Injury in connection with which such services and supplies are received.

If the charge incurred is in excess of such average charge, such excess amount shall not be recognized as covered expenses. All charges shall be deemed to be incurred on the date such services or supplies which give rise to the expense or charge are rendered or obtained.

2. What is Not Covered by "Medical Expenses" (In addition to General Exclusions):

In addition to the General Exclusions, "Medical Expense" benefits are not payable for any losses, fatal or non-fatal, which are caused by or resulting from:

- 1. a Pre-existing Condition, as defined herein;
- 2. services, supplies or treatment, including any period of hospital confinement, which was not recommended, approved and certified as necessary and reasonable by a Physician;
- 3. routine physicals, laboratory diagnostic, x-ray examinations or other examinations, except in the course of a disability established by the prior call or attendance of a Physician;
- 4. Elective, cosmetic or plastic surgery, except as the result of an accident;
- 5. dental care, except as the result of injury to sound, natural teeth caused by accident while this policy is in effect;
- 6. Expenses incurred in connection with weak, strained, or flat feet, corns, calluses, or toenails;
- 7. The diagnosis and treatment of acne;
- 8. Deviated septum, including sub mucous resection and/or other surgical correction thereof;
- 9. Organ transplants that competent medical professionals consider experimental;
- 10. Well child care including exams and immunizations;
- 11. Expenses which are not exclusively medical in nature.

12. Private hospital or medical care within The Country of Residence where public funded services or care is available.
13. Any expenses incurred in Country of Residence.
14. Eyeglasses, contact lenses, hearing aids, and examination for the prescription or fitting thereof, unless Injury or Sickness has caused impairment of vision or hearing; or
15. Treatment provided in a government hospital or services for which no charge is normally made
16. Mental, nervous, or emotional disorders or rest cures;
17. Pregnancy and all related conditions, including services and supplies related to the diagnosis or treatment of infertility or other problems related to inability to conceive a child; birth control, including surgical procedures and devices.

EMERGENCY MEDICAL EVACUATION / RETURN OF MORTAL REMAINS:

Medical Evacuation

1. We will pay up to the maximum combined benefit of up to USD 2,000,000 per person (sub-limits apply for **Spouse** and **Children**, please refer to the above SUMMARY OF COVER for more details), for covered expenses due to emergency medical evacuation or Return of Mortal Remains if incurred outside of Your Country of Permanent Residence. An Emergency Evacuation must be ordered by the Assistance Department or a Physician who certifies that the severity or the nature of Your Injury or Sickness warrants Your Evacuation.

Covered expenses are those for Transportation and medical treatment, including medical services and medical supplies necessarily incurred in connection with Your Emergency Evacuation. All Transportation arrangements made for evacuating You must be by the most direct and economical route possible.

Expenses for Transportation must be:

- (a) recommended by the attending Physician;
- (b) required by the standard regulations of the conveyance transporting You; and
- (c) arranged and authorized in advance by the Assistance Department.

2. Definitions

Emergency Evacuation - means:

- (a) Your medical condition warrants immediate transportation from the place where You are injured or sick to the nearest Hospital where appropriate medical treatment can be obtained;
- (b) after being treated at a local Hospital, Your medical condition warrants transportation to Your current place of residence to obtain further medical treatment or to recover; or
- (c) both (a) and (b) above.

Transportation - means any land, water or air conveyance required to transport You during an Emergency Evacuation. Transportation includes, but is not limited to, air ambulances, land ambulances and private motor vehicles.

Return of Mortal Remains

1. We will pay benefits for covered expenses reasonably incurred while travelling outside of Your country of Permanent Residence, to return Your body to if You die. Benefits will not exceed the combined maximum limit of USD[†] 2,000,000 per person (sub-limits apply for **Spouse** and **Children**, please refer to the above SUMMARY OF COVER for more details), for both the Medical Evacuation and Return of Mortal Remains.

Covered expenses include, but are not limited to, expenses for:

- a) embalming;
- b) cremation;
- c) coffins; and
- d) transportation.

These expenses must be authorized and arranged by the Assistance Department and You must contact the numbers listed in the Customer Service Section.

DAILY IN-HOSPITAL CASH BENEFIT:

If You are hospitalized as an Inpatient, due to Injury or Illness while outside Your Country of Permanent Residence, a benefit of USD 100 per day per person (sub-limits apply for **Spouse** and **Children**, please refer to the above SUMMARY OF COVER for more details), will be provided for each day an Insured Person is hospitalized. The Hospital confinement must be recommended by a Physician.

Inpatient means an Insured Person who is confined to a Hospital, under the recommendation of a Physician, and for whom a room and board charge is made.

Exclusions

1. Pre-existing Condition ;
2. Hospitalization in Your Country of Residence;
3. Pregnancy and resulting childbirth, miscarriage or disease of the female organs of production;
4. Routine physical exams;
5. Cosmetic or plastic surgery, except as a result of Injury;
6. Any mental or nervous disorder or rest cures.

TRIP INCONVENIENCE PROTECTION

World MasterCard cardholders may benefit from peace of mind knowing that travel and accommodation expenses paid in advance are covered if a trip is unexpectedly cancelled or delayed.

1. Who Is Covered:

An Eligible Cardholder and his Family.

2. To Get Coverage:

Coverage is provided automatically when the entire cost of the Common Carrier passenger fare has been charged to your eligible World MasterCard card; or has been acquired with points earned by a rewards program associated with your card (i.e. mileage points for travel).

- Coverage is effective only if the trip is purchased before the Insured Person becomes aware of any circumstances that could lead to the cancellation of his/her journey.

TRIP CANCELLATION COVERAGE

1. We will pay loss of travel and/or accommodation deposits up to a maximum limit of USD 7,500 per person (sub-limits apply for **Spouse** and **Children**, please refer to the above SUMMARY OF COVER for more details), after the payment of a USD 500 deductible by You if prior to the Contracted Date of Departure Your trip is cancelled and You are prevented from taking the Trip due to a Sickness, Injury or Death to You; Your Travelling Companion; Your Immediate Family Member; or Your Travelling Companion's Immediate Family Member.

2. Cancellation:

We will reimburse You for the unused, non-refundable cancellation portion of the Hotel cost and/or the Common Carrier ticket cancellation charges provided that You booked and paid for these costs before such Sickness, Injury or Death occurred.

3. Special Notification of Claim:

You must notify us as soon as reasonably possible in the event of a Trip Cancellation. We will not be liable for any additional penalty charges incurred that would not have been imposed had You notified us as soon as reasonably possible.

4. Definitions:

Immediate Family Member - means a person's legal spouse; children; children-in-law; siblings; siblings-in-law; parents; parents-in-law; grandparents; grandchildren; legal

guardian, ward,; step or adopted children; step-parents; aunts, uncles; nieces, and nephews, who reside in The Country of Residence

Prevented from taking the Trip - means:

- 1) With regard to Sickness, Injury or Death of You or Your Travelling Companion, a Physician has recommended that due to the severity of You or Your Travelling Companion's condition it is Medically Necessary that You or Your travelling Companion cancels the Trip. You or Your Travelling Companion must be under the direct care and attendance of a physician.

- 2) With regard to Sickness, Injury or Death of the Immediate Family Member of You or Your Travelling Companion, the severity or acuteness of their condition or the circumstances surrounding that condition is/are such that a ordinarily prudent person must cancel the Trip.

Travelling Companion - means up to two (2) person(s) who is/are booked to accompany You on the Trip.

5. Exclusions:

1. Claims arising from depression or anxiety, mental or nervous disorder, alcohol or drug abuse, addiction or overdose;
2. Claim arising from elective cosmetic or plastic surgery, except as a result of an accident;
3. Claims arising from pregnancy and all related conditions.
4. Pre-existing Condition

TRIP CURTAILMENT

1. We will pay loss of deposits up to a maximum of USD 7,500 per person (sub-limits apply for **Spouse** and **Children**, please refer to the above SUMMARY OF COVER for more details), after the payment of a USD 500 deductible by You if prior to the Contracted Date of Return, Your Trip is cancelled and You are unable to continue the Trip due to a Sickness, Injury or Death to: You; Your Travelling Companion; Your Immediate Family Member; or Your Travelling Companion's Immediate Family Member.

2. Interruption:

We will reimburse You for the unused, non-refundable, cost of travel arrangements pre-paid to the Hotel and/or the Common Carrier ticket, less the value of applied credit from unused return travel ticket, to return home or rejoin the Land/Sea Arrangements. This benefit is limited to the cost of one-way economy airfare by scheduled carrier and is subject to the Per Cover Limit stated in the Schedule

3. Accompaniment of Minors:

In the event, You are travelling alone with a minor up to 15 years old and You are unable to continue the Trip due to a Sickness, Injury or Death resulting in the minor being left unattended, We will pay the cost of a round trip economy airfare ticket in a scheduled carrier from Your Country of Residence for an adult designated by Your family to accompany the minor back to Your Country of Residence. **These expenses must be authorized in advance by the Assistance Department and You must contact the numbers listed in the Customer Service Section.**

4. Special Notification of Claim:

You must notify us as soon as reasonably possible in the event of a Trip Interruption claim. We will not be liable for any additional penalty charges incurred that would not have been imposed had You notified us as soon as reasonably possible.

5. Definitions:

Immediate Family Member - means a person's legal spouse; children; children-in-law; siblings; siblings-in-law; parents; parents-in-law; grandparents; grandchildren; legal guardian, ward,; step or adopted children; step-parents; aunts, uncles; nieces, and nephews.

Injury or Sickness – means one which requires treatments by a legally qualified medical practitioner and which results in the Insured Person being certified by the practitioner as unfit to travel or continue with his/her original journey.

Travelling Companion - means up to two (2) person(s) who is/are booked to accompany You on the Trip.

Unable to continue the Trip - means:

- 1) with regard to Sickness, Injury or Death of You or Your Travelling Companion, a Physician has recommended that due to the severity of You or Your Travelling Companion's condition it is Medically Necessary that You or Your Travelling Companion interrupt the Trip. You or Your Travelling Companion must be under the direct care and attendance of a Physician.
- 2) With regard to Sickness, Injury or Death of the Immediate Family Member of You or Your Travelling Companion, the severity or acuteness of their condition or the circumstances surrounding that condition is/are such that a ordinarily prudent person must interrupt the Trip.

6. Exclusions:

1. Claims arising from depression or anxiety, mental or nervous disorder, alcohol or drug abuse, addiction or overdose;
2. Claim arising from elective cosmetic or plastic surgery, except as a result of an accident;
3. Claims arising from pregnancy and all related conditions.

4. Pre-existing Condition.

TRIP DELAY COVERAGE

1. We will pay benefits for Trip Delay, if Your Trip is delayed for at least six (6) hours and the delay is caused by:

- a) inclement weather, which means any severe weather condition that delays the scheduled arrival or departure of a Common Carrier; or
- b) equipment failure of a Common Carrier, which means any sudden, unforeseen breakdown in the Common Carrier's equipment that caused a delay or interruption of normal trips; or
- c) an unforeseen strike or other job action by employees of a Common Carrier, which means any labour disagreement that interferes with the normal departure and arrival of a Common Carrier.

This coverage provides benefits up to a maximum of USD 900 for losses in total not to exceed USD 100 per hour per person (sub-limits apply for **Spouse** and **Children**, please refer to the above SUMMARY OF COVER for more details), as a result of a **delay of at least six (6) consecutive hours** from the time specified in the itinerary supplied to the Insured Person of the departure of the Common Carrier in which the Insured Person had arranged to travel to.

We will reimburse You for any expenses for meals and lodging which were necessarily incurred as the result of this delay and which were not already provided to You by the Common Carrier or any other party free of charge.

2. What is NOT Covered by Trip Delay (Exclusions):

Trip Delay coverage shall not include benefits for any loss caused directly and/or indirectly due to:

- any delay which was made public or known to You prior to the date their trip was booked.

MISSED CONNECTION COVERAGE

1. We will reimburse You up to a maximum of USD 650 per person (sub-limits apply for **Spouse** and **Children**, please refer to the above SUMMARY OF COVER for more details), after the payment of a USD 50 deductible by you for customary charges for necessary accommodations, telephone calls, meals and local Public Transportation incurred by You if You miss your connection flight due to the delay of your previous flight and which were not already provided to You by the Common Carrier or any other party free of charge.

2. Definitions – Trip Inconvenience

Serious Injury or Sickness means one which requires treatments by a legally qualified medical practitioner and which results in the Insured Person being certified by the practitioner as unfit to travel or continue with his/her original journey.

LUGGAGE PROTECTION

COMMON CARRIER LOST BAGGAGE

1. We will pay benefits if Your baggage, which is in the care, custody and control of a Common Carrier, is lost due to theft or due to misdirection by a Common Carrier while You are a ticketed passenger on the Common Carrier during the Trip.

We will reimburse You, up to a maximum of USD 3,000 per person (sub-limits apply for **Spouse** and **Children**, please refer to the above SUMMARY OF COVER for more details), after the payment of a USD 75 deductible by You, for the cost of replacement of the baggage and its contents. All claims must be verified by the Common Carrier.

2. Coverage Conditions/Limitations

We will not pay more than a combined maximum limit of 10% of the maximum stated above for the following:

- jewellery, watches, articles consisting in whole or in part of silver, gold or platinum;
- furs, articles trimmed with or made mostly of fur;
- cameras, including related camera equipment;
- computers and electronic equipment.

We will not pay more than USD 625 per person (sub-limits apply for **Spouse** and **Children**, please refer to the above SUMMARY OF COVER for more details), for any single item.

In case of loss to a pair or set, we may elect to:

(A) repair or replace any part, to restore the pair or set to its value before the loss; or

(B) pay the difference between the cash value of the property before and after the loss.

Luggage, which appears to be delayed or lost, at the final destination, must be formally notified (immediately) and a claim must be filed with the Common Carrier. It must be determined (and verified) to be delayed or unrecoverable by the Common Carrier.

Benefits for baggage and personal effects will be in excess of any amount paid or payable by the Common Carrier responsible for the loss or any other valid and collectible insurance. If at the time of the occurrence of any loss there is other valid and collectible insurance in place, We will be liable only for the excess of the amount of loss, over the amount of such other insurance, and any applicable deductible. For example, if

the Eligible Cardholder's Luggage is determined to be lost/unrecoverable and the full value (total original cost) of the Luggage is USD 3,000 and the Common Carrier reimburses the Eligible Cardholder USD 1,000, the Eligible Cardholder is eligible for reimbursement up to USD 2,000 less the payment of the deductible of USD 75.

3. What Items are Not Covered:

We will not pay Benefits for any of the following:

1. Animals, birds, or fish;
2. Automobiles or automobile equipment, boats, motors, trailers, motorcycles, or other Conveyances or their appurtenances (except bicycles while checked as baggage with a Common Carrier);
3. Household furniture;
4. Eyeglasses or contact lenses;
5. Artificial teeth or dental bridges;
6. Hearing aids;
7. Prosthetic limbs;
8. Musical instruments;
9. Money or securities;
10. Tickets or documents;
11. Perishables and consumable.

Benefits will not be provided for any loss resulting (in whole or in part) from:

1. Wear and tear or gradual deterioration;
2. Insects or vermin;
3. Inherent vice or damage;
4. Confiscation or expropriation by order of any government or public authority;
5. Seizure or destruction under quarantine or custom regulation;
6. Radioactive contamination;
7. Usurped power or action taken by governmental authority in hindering combating or defending against such an occurrence;
8. Transporting contraband or illegal trade;
9. Breakage of brittle or fragile articles, cameras, musical instruments, radios, and similar property.

COMMON CARRIER BAGGAGE DELAY

1. We will reimburse You for the expense of necessary personal effects, up to a maximum limit of USD 450 per person (sub-limits apply for **Spouse** and **Children**, please refer to the above SUMMARY OF COVER for more details), if Your Checked Baggage is delayed or misdirected by a Common Carrier for more than 12 hours from the time You arrive at the destination stated on Your ticket, other than Your final destination, until the time it arrives. Coverage for delayed Luggage is not available in the Insured Person's city of permanent residence.

You must be a ticketed passenger on a Common Carrier. Additionally, all claims must be verified by the Common Carrier who must certify the delay or misdirection.

2. Definitions:

Checked Baggage - means a piece of baggage which was checked in and in the custody of a Common Carrier and for which a claim check has been issued to You by a Common Carrier.

Limitation:

If upon further investigation it is later determined that Your baggage checked with the Common Carrier has been lost, any amount claimed and paid to You under the baggage delay policy section will be deducted from any payment due You under the baggage lost policy section.

GENERAL PLAN EXCLUSIONS

This Policy does not provide coverage for any of the following:

- 1) Intentionally self-inflicted injury, suicide or any attempt thereat while sane or insane; nor
- 2) War, civil war, invasion, insurrection, revolution, use of military power or usurpation government or military power; nor
- 3) any period an Insured Person is serving in the Armed Forces of any country or international authority, whether in peace or war, and in such an event the Company, upon written notification by the Policyholder, shall return the pro rata premium for any such period of service; nor
- 4) loss sustained or contracted in consequence of an Insured Person being intoxicated or under the influence of any narcotic or drug unless administered on the advice of a physician; nor
- 5) any loss of which a contributing cause was the Insured Person's attempted commission of, or wilful participation in, an illegal act or any violation or attempted violation of the law or resistance to arrest by the Insured Person; nor
- 6) Any loss sustained while flying in any aircraft or device for aerial navigation except as specifically provided herein; nor
- 7) congenital anomalies and conditions arising out of or resulting there from, hernia or dental treatment except to sound natural teeth as occasioned by injury; nor
- 8) Bacterial infections except pyogenic infections which are caused by an accidental wound; nor
- 9) flying in any aircraft owned, leased or operated by or on behalf of an Insured Person or any member of an Insured Person's household; nor
- 10) driving or riding as a passenger in or on (a) any vehicle engaged in any race, speed test or endurance test or (b) any vehicle being used for acrobatic or stunt driving; nor

- 11) any claim caused by opportunistic infection or malignant neoplasm, or any other sickness condition, if, at the time of the claim, the Insured Person had been diagnosed as having AIDS (Acquired Immune Deficiency Syndrome), ARC (AIDS Related Complex) or having an antibody positive blood test to HIV (Human Immune Virus). nor
- 12) the use, release or escape of nuclear materials that directly or indirectly results in nuclear reaction or radiation or radioactive contamination; nor
- 13) the dispersal or Application of pathogenic or poisonous biological or chemical materials; nor
- 14) The release of pathogenic or poisonous biological or chemical materials. nor
- 15) Any loss sustained while the Insured person is participating in any professional sports, winter sports, or in sky diving, parachuting, hand gliding, bungee jumping, scuba diving, mountain climbing, pot-holding.
- 16) any Pre-existing Condition or congenital anomalies or any complication arising there from; or
- 17) any sickness, disease, illness and any complications arising there from, unless specifically covered in the Policy; or
- 18) Traveling against the advise of a physician.
- 19) any terrorist or member of a terrorist organization, illegal drug traffickers, or purveyor of nuclear, chemical or biological weapons.
- 20) travel in, to through Afghanistan, Iraq, Cuba or Democratic Republic of Congo.

GENERAL PROCEDURE – HOW TO FILE A CLAIM

Notice of Service request / Claim (non medical emergency claims on re-imburement basis)

Written notice of service request / claim must be given no later than thirty (30) days from the date of the incident. Failure to give notice to the claims department listed below, within thirty (30) days from the date of the incident may result in a denial of the claim. Notice should be sent to:

AIG Lebanon S.A.L.
Beirut Central District,
Uruguay street,
Off Fosch Street
Mcattaf Building - 3rd floor
P. O. Box 13-5459 - Beirut
Lebanon
Tel: +961-1-788134
Fax: +961 - 1 990 128

Office Timings: 8:00am to 5:00pm (UAE Time), from Sunday to Thursday

Languages Supported: English / Arabic

Mastercard.Services@AIG.com

The following procedures should be followed :

- 1) You (cardholder) or the beneficiary or someone legally acting on behalf of either, must notify us as required in the Claim Notification Period, or your claim may be denied - Upon receipt of a notice of claim, the Insurance Company, will furnish to a claimant the necessary Claim Form(s) along with instructions;
- 2) Complete the Claim Form(s) in its entirety;
- 3) Submit all Required Information (proof of loss etc.), as outlined in this section no later than the Submission Period.

Please note, there may be additional information requested at times in order to process your claim. It is your responsibility to provide this information or the claim may not be processed.

For assistance with filing a claim, please contact the numbers listed above

TRAVEL ACCIDENT & INSURED JOURNEY CLAIMS:

Common Carrier – International Trips / Common Carrier Domestic Trips / Insured Journey – International Trips / Insured Journey Domestic Trips

Claim Notification Period: Within ninety (90) days from the date of loss.

Submission Period: No later than ninety (90) days from the date of Claim Notification.

Required Information (proof of loss):

- a) Completed Claim Form and documentation including a death certificate and/or attending physician statement or autopsy report;
- b) Transaction verification confirming the full passenger fare for the Covered Trip had been charged to the eligible card, including copies of Common Carrier ticket(s) and receipts;
- c) Your cardholder's statement of account showing the account is open and in good standing at the time of filing the claim.

TRAVEL MEDICAL BENEFIT CLAIMS:

Medical Expenses (Injury or Sickness) / Emergency Medical Evacuation & Return of Mortal Remains / Daily In-Hospital Cash Benefit

Claim Notification Period: Within ninety (90) days from the date of loss.

Submission Period: No later than ninety (90) days from the date of Claim Notification.

Required Information (proof of loss):

- a) Documentation detailing the nature of injury or sickness with a breakdown of expenses, including certified copies of: medical evidence reports, attending physician statements, medical receipts and related documentation;
- b) Transaction verification confirming the full passenger fare for the Covered Trip had been charged to the eligible card, including copies of Common Carrier ticket(s) and receipts;
- c) Your cardholder's statement of account showing the account is open and in good standing at the time of filing the claim.

TRIP INCONVENIENCE PROTECTION CLAIMS:

Trip Cancellation / Trip Curtailment / Trip Delay / Missed Connection

Claim Notification Period: Within ninety (90) days from the date of loss.

Submission Period: No later than ninety (90) days from the date of Claim Notification.

Required Information (proof of loss):

- a) Documentation detailing the reason for cancellation or delay, including evidence of the nature of Serious Injury or Sickness such as certified copies of: medical evidence reports, attending physician statements, medical receipts and related documentation;
- b) Transaction verification confirming the full passenger fare for the Covered Trip had been charged to the eligible card, including copies of Common Carrier ticket(s) and receipts;
- c) Your cardholder's statement of account showing the account is open and in good

standing at the time of filing the claim.

LUGGAGE PROTECTION CLAIMS:

Lost Baggage / Baggage Delay

Claim Notification Period: Within ninety (90) days from the date of loss.

Submission Period: No later than ninety (90) days from the date of Claim Notification.

Required Information (proof of loss):

- a) Copies of the notification and reporting filed with the Common Carrier and all related correspondence, Property Indemnity Report (PIR) - form must include flight number, vessel number, or bill of lading and baggage check number;
- b) Details of the amounts paid (or payable) by the Common Carrier responsible for the loss, description of contents, cost determination of contents and all other appropriate documents and correspondence;
- c) Your cardholder's statement of account showing the account is open and in good standing.

3. Payments:

All payments to be made by **AIG Lebanon SAL** shall be paid to Eligible Cardholders in the Territory. Payment of any indemnity shall be subject to the laws and governmental regulations then in effect in the country of payment.

Where allowable by law, Benefit for Loss of Life is payable to the beneficiary designated by the Insured Person. If there has been no such designation, then payment of claim will be to the Insured Person's first surviving beneficiary as follows:

- a) Spouse;
- b) Children, in equal shares;
- c) Parents, in equal shares;
- d) Brothers and sisters, in equal shares; or
- e) Executor or administrator

All other benefits will be paid to the Insured Person or other appropriate party where necessary. Payment of any indemnity shall be subject to the laws and governmental regulations then in effect in the country of payment.

Each insurance benefit limit described in this Guide is in United States Dollars (USD). Payment of claims will be made in local currency where required by law, with the official Foreign Exchange Rates published on the date Claim payment is made.

Sanctions: The coverage provided by this policy shall be null and void if it violates any U.S. economic or trade sanctions such as, but not limited to, the sanctions administered

and enforced by the Office of Foreign Assets Control ("OFAC") of the U.S. Treasury Department or if it violates the sanctions laws of any other country.

Insurance coverage provided by a binder, certification of insurance or other evidence of insurance that violates U.S. economic or trade sanctions, as defined above, shall be null and void. Similarly, any claims arising under any policy, binder, certificate of insurance or other evidence of insurance issued to any party, entity or beneficiary that violates U.S. economic or trade sanctions shall be barred pursuant to the requirements of the sanction.

This exclusion applies *pari passu* to coverage directly affected by any sanctions issued by any other country.