

CHI

CHI TRAVEL INSURANCE PTY LTD

CHI Travel Insurance

NOW INCLUDES WHOLESALER INSOLVENCY*

* on selected plans



**COMBINED FINANCIAL SERVICES GUIDE
AND PRODUCT DISCLOSURE STATEMENT
(INCLUDING POLICY WORDING)**

Allianz 

Global Assistance

Effective Date 14 November 2014

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Financial Services Guide

This Financial Services Guide (FSG) has been designed to help you make an informed decision about the financial services that the Authorised Representative and Allianz Global Assistance can provide to you. It also contains information about how they and others are remunerated for providing these financial services and how your complaints are dealt with.

Where they arrange an insurance policy for you, they will give you a Product Disclosure Statement (PDS) when required. The PDS is designed to provide important information on the significant features and benefits of the policy and is designed to assist you in making an informed decision about whether to buy the product. It may consist of more than one document.

Any advice that is provided to you is general in nature and does not take into account your individual objectives, financial circumstances or needs. Before you make any decisions about the product, you should read the PDS carefully to ensure that it is suitable for you.

ABOUT ALLIANZ GLOBAL ASSISTANCE

Allianz Global Assistance - a trading name of AGA Assistance Australia Pty Ltd ABN 52 097 227 177 AFS Licence No 245631 - of 74 High Street, Toowong, Queensland 4066 Telephone 1800 119 862 is an Australian Financial Services Licensee authorised to deal in and provide general advice on general insurance products. Allianz Global Assistance has been authorised by the insurer, Allianz Australia Insurance Limited (Allianz) ABN 15 000 122 850 AFS Licence No 234708 of 2 Market Street, Sydney, New South Wales, 2000 Telephone 13 26 64, to act on its behalf to deal in and provide general advice and handle and settle claims in relation to travel insurance products underwritten by Allianz.

Allianz Global Assistance has a binding authority which means it can enter into, vary or cancel these insurance products and handle and settle claims without reference to Allianz provided it acts within the binding authority. When providing these services, Allianz Global Assistance acts for Allianz and does not act on your behalf.

CHI TRAVEL INSURANCE AND THE AUTHORISED REPRESENTATIVE

CHI Travel Insurance Pty Ltd (CHI Travel Insurance) ABN 70 131 684 636 Authorised Representative Number 327036 of 10/9 Bungan Street, Mona Vale, New South Wales 2103 Telephone 1800 997 810 or 02 9997 4810 is an authorised representative of Allianz Global Assistance. CHI Travel Insurance is the authorised representative that provides the financial services when you purchase this product through the website at www.chitravelinsurance.com.au or over the telephone.

If you purchase this product through a travel agent, other than CHI Travel Insurance, the full details of the Authorised Representative that provides the financial services to you is set out on the back cover of this Combined Financial Services Guide and Product Disclosure Statement. If no details are provided, please ask the travel agent to provide you with these details.

CHI Travel Insurance and the Authorised Representative are authorised by Allianz Global Assistance to deal in and provide general advice on travel insurance products underwritten by Allianz. CHI Travel Insurance and the

Authorised Representative act for Allianz Global Assistance and do not act on your behalf.

The distribution of this FSG has been authorised by Allianz Global Assistance.

PROFESSIONAL INDEMNITY INSURANCE ARRANGEMENTS

Allianz Global Assistance and its representatives (including its authorised representatives) are covered under professional indemnity insurance that complies with the requirements of section 912B of the Corporations Act. The insurance (subject to its terms and conditions) will continue to cover claims in relation to Allianz Global Assistance's representatives/employees who no longer work for it (but who did at the time of the relevant conduct).

REMUNERATION

The premium for this travel insurance policy is payable to Allianz as the insurer.

CHI Travel Insurance and the Authorised Representative receive a commission (inclusive of GST) when you buy a policy from a travel agent, which is calculated as a percentage of the premium you pay for the travel insurance policy issued to you. It is only paid if you buy a policy.

Allianz Global Assistance is also remunerated by Allianz for providing services on behalf of Allianz. This is a percentage (exclusive of GST) of the premium that you pay for an insurance policy and is only paid if you buy a policy.

Employees and representatives of CHI Travel Insurance, the Authorised Representative and Allianz Global Assistance receive an annual salary.

Employees and representatives of CHI Travel Insurance and the Authorised Representative may also receive a bonus based on performance criteria which can include sales performance.

The above remuneration is included in the premium you pay.

If you would like more information about the remuneration that the Authorised Representative receives, please ask them. If you would like more information about the remuneration that CHI, or employees and representatives of CHI or Allianz Global Assistance, receives please ask them. This request should be made within a reasonable time after this FSG is provided to you and before the financial services are provided to you.

IF YOU HAVE A COMPLAINT

Should you have a complaint or dispute arising out of this insurance, or our employees, authorised representatives or service providers, please call Allianz Global Assistance on 1300 654 811 or put the complaint in writing and send it to 74 High Street, Toowong, Queensland 4066.

A dispute may also be referred to the Financial Ombudsman Service Limited (FOS), which is an independent external dispute resolution body. For more information or to access the FOS process please call 1300 780 808. Alternatively you can write to the FOS at GPO Box 3, Melbourne, Victoria 3001. Access to the FOS is free.

PRIVACY STATEMENT

Allianz Global Assistance and CHI are committed to ensuring the privacy and security of your personal information. They adhere to the privacy terms set out in "Important Matters" in the PDS.

HOW TO CONTACT US

You can contact CHI or Allianz Global Assistance or provide them with instructions using the contact details outlined in this FSG. Please keep this document in a safe place for your future reference.

DATE PREPARED

This FSG was prepared on 26 September 2014.

PART 2 - PRODUCT DISCLOSURE STATEMENT

About this Product Disclosure Statement

A Product Disclosure Statement (PDS) is a document required by the Corporations Act 2001 (Cth) and contains information designed to help you decide whether to buy the policy and to compare it with other products you may be considering.

This PDS sets out the cover available and the terms and conditions which apply. Please note that any recommendations or opinions in this document are of a general nature only and do not take into account your objectives, financial situation or needs.

If we are unable to offer you the cover you seek, it will be because the particular product offered is not designed to cover a particular risk or risks including, but not limited to, some geographical regions, some pre-existing medical conditions or some ages. In such a case, if you would like to discuss your options please use the contact details on the back cover of this PDS.

This PDS, together with the Certificate of Insurance and any written endorsements by us, make up your contract with Allianz. Please retain these documents in a safe place.

ABOUT THE AVAILABLE PLANS

You can choose a plan from either our Traditional or Basic range:

Traditional Plans

- **Plan A - Comprehensive** (includes all Sections*);
- **Plan B - Australia Only** (includes Sections 1A, 1B, 1C, 4, 6, 11, 13, 15 & 16);
- **Plan C - Medical & Liability** (includes Sections* 2, 3 & 15);
- **Plan D - Frequent Traveller** (includes all Sections while travelling internationally and Sections 1A, 1B, 1C, 4 & 6 to 16 while travelling domestically which involves an interstate destination or intrastate destination (minimum of 100km from Home));
- **Plan E - Non Residents** (includes Sections 1A, 2 to 7, 9 & 11 to 16);

Only available to eligible applicants:

- **Plan F Non-Medical Cover** (includes Sections[#] 1A, 1B, 1C, 4, 6, 7 & 9 to 16).

* you will not have cover under certain Sections while travelling in Australia - see "How to Purchase a Traditional Policy" pages 25 & 26 for details.

you will not have cover under Sections 7, 9, 10, 12 and 14 while travelling in Australia.

Basic Plans

- **Basic International** (includes all Sections*);
- **Basic Australia Only** (includes Sections 1A, 1B, 1C, 4, 6, 11, 13, 15 & 16);
- **Basic Frequent Traveller** (includes all Sections while travelling internationally and Sections 1A, 1B, 1C, 4 & 6 to 16 while travelling domestically);
- **Basic Non-Residents** (includes Sections 1A, 2 to 7, 9 & 11 to 16);

Only available to eligible applicants:

- **Basic Non-Medical Cover** (includes Sections[#] 1A, 1B, 1C, 4, 6, 7, 9 to 16).

* you will not have cover under certain Sections while travelling in Australia - see "How to Purchase a Basic Policy" pages 31 & 32 for details.

you will not have cover under Sections 7, 9, 10, 12 & 14 while travelling in Australia.

UNDERSTANDING YOUR POLICY AND ITS IMPORTANT TERMS AND CONDITIONS

To properly understand this policy's significant features, benefits and risks you need to carefully read:

- The benefit limits provided under each plan in the **“Traditional Table of Benefits”** pages 27 to 30 or the **“Basic Table of Benefits”** pages 33 to 35, when *We will pay* a claim under each Section applicable to the cover you choose (**“Your Policy Cover”** pages 36 to 52), any endorsements under **“Additional Options”** page 8 and **“Pre-existing Medical Conditions”** pages 9 to 12 (remember, certain words have special meanings – see **“Words with Special Meanings”** pages 22 to 24);
- **“Important Matters”** (pages 13 to 21) - this contains important information on applicable Excesses, the period of cover and extensions of cover, the cooling-off period, your Duty of Disclosure (including how the duty applies to you and what happens if you breach the duty), our privacy notice and dispute resolution process, the Financial Claims Scheme, when you can choose your own doctor, when you should contact Allianz Global Assistance concerning 24 hour medical assistance, Overseas hospitalisation or medical evacuation, and more;
- When *We will not* pay a claim under each Section applicable to the cover you choose (**“Your Policy Cover”** pages 36 to 52) and **“General Exclusions Applicable to all Sections”** pages 53 to 55 (which provides details of the general exclusions that apply to all covers and benefits); and
- **“Claims”** (pages 56 & 57) - this sets out important information about how we will pay claims. It also sets out certain obligations that you and we have. If you do not meet them we may refuse to pay a claim.

APPLYING FOR COVER

When you apply for the policy, we will confirm with you things such as the period of cover, your premium, what cover options and Excess will apply, and whether any standard terms are to be varied (this may be by way of an endorsement). These details will be recorded on the Certificate of Insurance issued to you.

This PDS sets out the cover we are able to provide you with. You need to decide if the benefit limits, type and level of cover are appropriate for you and will cover your potential loss.

If you have any queries, want further information about the policy or want to confirm a transaction, please use the contact details on the back cover of this PDS.

ABOUT YOUR PREMIUM

You will be told the premium payable for the policy when you apply. It is based on a number of factors such as your destination(s), length of Journey, number of persons covered, your age, Pre-existing Medical Conditions, the plan and any additional options selected. The higher the risk, the higher the premium is.

Your premium also includes amounts that take into account our obligation to pay any relevant compulsory government charges, taxes or levies (e.g. Stamp Duty and GST) in relation to your policy. These amounts are included on your Certificate of Insurance as part of the total premium.

COOLING-OFF PERIOD

Even after you have purchased your policy, you have cooling-off rights (see page 16 of **“Important Matters”** for details).

WHO IS YOUR INSURER?

This policy is underwritten by Allianz Australia Insurance Limited (Allianz) ABN 15 000 122 850 AFS Licence 234708.

WHO IS ALLIANZ GLOBAL ASSISTANCE?

Allianz Global Assistance is a trading name of AGA Assistance Australia Pty Ltd. Allianz Global Assistance has been authorised by Allianz to enter into and arrange the policy and deal with and settle any claims under it, as the agent of Allianz, not as your agent. Allianz Global Assistance acts under a binder which means that it can do these things as if it were the insurer. It administers all emergency assistance services and benefits of this insurance. You may contact Allianz Global Assistance in an emergency 24 hours a day, 7 days a week.

UPDATING THE PDS

We may need to update this PDS from time to time if certain changes occur where required and permitted by law. We will issue you with a new PDS or a supplementary PDS to update the relevant information except in limited cases. Where the information is not something that would be materially adverse from the point of view of a reasonable person considering whether to buy this product, Allianz Global Assistance may issue you with notice of this updated information in other forms or keep an internal record of such changes (you can get a paper copy free of charge by calling CHI).

PREPARATION DATE

The preparation date of this PDS is 26 September 2014.

Summary of Benefits

This is only a summary of the benefits. Please read this PDS carefully for complete details of what *We will pay* and what *We will not pay*, and which of the Sections are provided under each plan (see pages 36 to 52). Importantly, please note that exclusions do apply, as well as limits to the cover.

1A CANCELLATION FEES AND LOST DEPOSITS (pg. 36 to 38)

Cover for cancellation fees and lost deposits for pre-paid travel arrangements due to unforeseen circumstances neither expected nor intended by you and which are outside your control, such as:

– Sickness – Injuries – strikes – collisions – retrenchment – natural disasters.

1B TRAVEL SERVICES PROVIDER INSOLVENCY (pg. 38)

Financial loss due to the Insolvency of a Travel Services Provider.

1C WHOLESALER INSOLVENCY (pg. 39)

Financial loss due to the Insolvency of a named Wholesaler.

2 OVERSEAS EMERGENCY MEDICAL ASSISTANCE/EVACUATION (pg. 39 & 40)

Cover for emergency medical assistance while you are Overseas, including:

– 24 hour emergency medical assistance – ambulance
– medical evacuations – funeral arrangements – messages to family
– Hospital guarantees.

3 OVERSEAS EMERGENCY MEDICAL & HOSPITAL EXPENSES (pg. 40 & 41)

Cover for Overseas emergency medical treatment if you are Injured or become Sick Overseas, including:

– medical – Hospital – surgical – nursing
– emergency dental treatment for the relief of sudden and acute pain to sound and natural teeth.

4 ADDITIONAL EXPENSES (pg. 41 to 43)

Cover for additional accommodation and travel expenses caused by your health problems or someone else's resulting from:

– Sickness – Injury – death.

Also cover for your Travelling Companion's or Relative's accommodation and travel expenses to travel to, stay near or escort you resulting from:

– hospitalisation – medical evacuation.

Cover for piste closure due to adverse snow conditions.

Cover to hire ski and/or golf equipment following loss, theft of or damage to ski and/or golf equipment, as well as cover if your ski and/or golf equipment is delayed or misdirected.

5 HOSPITAL CASH ALLOWANCE (pg. 44)

An allowance of \$50 per day if you are hospitalised for more than 48 continuous hours while Overseas.

6 ACCIDENTAL DEATH (pg. 44)

A death benefit is payable to your estate if you die within 12 months of, and because of, an Injury sustained during your Journey.

7 PERMANENT DISABILITY (pg. 45)

A permanent disability benefit is payable for total loss of sight in one or both eyes, or loss of use of a hand or foot (for at least 12 months, and which will continue indefinitely) within 12 months of, and because of, an Injury you sustained during your Journey.

8 LOSS OF INCOME (pg. 45 & 46)

A weekly loss of income benefit is payable if, due to an Injury sustained during your Journey, you are unable to work after your return to Australia for more than 30 days.

9 LOSS OF TRAVEL DOCUMENTS, CREDIT CARDS AND TRAVELLERS CHEQUES (pg. 46)

Cover for the replacement costs of travel documents lost or stolen from you during your Journey, such as:

– passports – credit cards – travel documents – travellers cheques.

10 THEFT OF CASH, BANK NOTES, CURRENCY NOTES, POSTAL ORDERS OR MONEY ORDERS (pg. 46 & 47)

Cover for the following items stolen from your person:

– bank notes – cash – currency notes – postal orders – money orders.

11 LUGGAGE AND PERSONAL EFFECTS (pg. 47 to 49)

Cover for replacing stolen or permanently lost Luggage and Personal Effects, or reimbursing repair cost for accidentally damaged items, including:

– luggage – spectacles – personal effects – personal computers – cameras.

12 LUGGAGE AND PERSONAL EFFECTS DELAY EXPENSES (pg. 49)

Cover to purchase essential items of clothing and other personal items following your Luggage and Personal Effects being delayed, misdirected or misplaced by your Carrier for more than 12 hours.

13 TRAVEL DELAY EXPENSES (pg. 50)

Cover for additional meals and accommodation expenses, after an initial 6 hour delay, if your Journey is disrupted due to circumstances beyond your control.

14 ALTERNATIVE TRANSPORT EXPENSES (pg. 50)

Cover for additional travel expenses following transport delays to reach:

– a wedding – funeral – conference – sporting event
– pre-paid travel/tour arrangements.

15 PERSONAL LIABILITY (pg. 51)

Cover for legal liability including legal expenses for bodily injuries or damage to property of other persons as a result of a claim made against you.

16 RENTAL VEHICLE EXCESS / RETURN OF RENTAL VEHICLE (pg. 52)

Cover for the excess payable on your Rental Vehicle's motor vehicle insurance resulting from the Rental Vehicle being:

– stolen – crashed – damaged

and/or:

the cost of returning the Rental Vehicle due to you being unfit to do so.

Additional Options

SPECIFIED LUGGAGE AND PERSONAL EFFECTS COVER

The maximum amount we will pay for all claims combined under Section 11 (*Luggage and Personal Effects*) is shown under the “**Traditional Table of Benefits**” pages 27 to 30 or the “**Basic Table of Benefits**” pages 33 to 35 for the plan you have selected.

Please Note: for the purposes of this additional option and Section 11:

- “*specified items*” refers to *Luggage and Personal Effects* that have been listed as covered on your *Certificate of Insurance* with a nominated sum insured.
- “*unspecified items*” refers to *Luggage and Personal Effects* that have not been specifically listed on your *Certificate of Insurance*.

Depending on the plan you choose, cover for any unspecified item is limited as set out below:

Plans A, B, D, E & F

- \$3,000 for personal computers, video recorders or cameras
- \$1,000 for mobile phones (including PDAs and any items with phone capabilities)
- \$750 for all other unspecified items

Basic International, Basic Australia Only, Basic Frequent Traveller, Basic Non-Residents & Basic Non-Medical Cover

- \$750 for all unspecified items.

Additional cover can be purchased for specified items (**excluding jewellery, bicycles and watercraft other than surfboards**) up to a total amount of \$5,000 for all items combined, by paying an additional premium.

There is no cover for bicycles or watercraft (other than surfboards) under the policy. These items must not be specified and cover will not be provided for them.

Your nominated limit for “*Specified Luggage and Personal Effects Cover*” will be shown on your *Certificate of Insurance*. Receipts and/or valuations must be provided in the event of a claim. Depreciation and the standard item limits shown above and under Section 11.1 b] will not apply to any specified items.

This additional option is not available under Plan C.

INCREASED RENTAL VEHICLE EXCESS COVER

Plans A, B, D, E & F

A \$3,000 limit applies to your Rental Vehicle excess cover.

You can purchase additional cover in \$500 units, up to a total amount of \$6,000, by paying an additional premium.

This additional option is not available under Plan C.

Basic International, Basic Australia Only, Basic Frequent Traveller, Basic Non-Residents & Basic Non-Medical Cover

A \$2,000 limit applies to your Rental Vehicle excess cover.

You can purchase additional cover of \$2,000, by paying an additional premium.

REMOVAL OF STANDARD EXCESS

You can remove the standard \$100 Excess by paying an additional premium of \$25.

Pre-Existing Medical Conditions

PRE-EXISTING MEDICAL CONDITIONS

Please read this section carefully.

Unless otherwise agreed, the policy only provides medical and Hospital expenses cover for unforeseen emergency medical events which occurred Overseas. Medical conditions that were pre-existing at or before the time of the policy being issued are not covered, unless they are a condition that we expressly agree to cover.

If you have a Pre-existing Medical Condition that is not covered, we will not pay any claims arising from, related to or associated with that condition. This means that you may have to pay for an Overseas medical emergency which can be very expensive in some countries.

What is a Pre-existing Medical Condition?

A Pre-existing Medical Condition means a medical condition which you were aware of:

1. **prior to the time of the policy being issued that involves:**
 - a) your heart, brain or circulatory system/blood vessels, or
 - b) your lungs or a chronic airways disease, or
 - c) cancer, or
 - d) back pain requiring prescribed pain relief medication, or
 - e) surgery involving any joints, the back, spine, brain or abdomen requiring at least an overnight stay in Hospital, or
 - f) Diabetes Mellitus (Type 1 or Type 2); OR
2. **in the 2 years prior to the time of the policy being issued:**
 - a) for which you have been in Hospital or emergency department or day surgery, or
 - b) for which you have been prescribed a new medication or had a change to your medication regime, or
 - c) requiring prescription pain relief medication;

For the purposes of this clause medical condition includes a dental condition; OR

3. **prior to the time of the policy being issued that is:**
 - a) pregnancy, or
 - b) connected with your current pregnancy or participation in an IVF program; OR
4. **for which, prior to the time of the policy being issued:**
 - a) you have not yet sought a medical opinion regarding the cause; or
 - b) you are currently under investigation to define a diagnosis; or
 - c) you are awaiting specialist opinion.

Travellers 75 years of age or over (only available under Plans A, B, Basic International & Basic Australia Only)

If you are 75 years of age or over, the above plans may be available on application. Please contact your CHI agent for further details.

We have the absolute right to accept or decline cover, or impose special conditions such as an Excess.

Medical conditions/circumstances which automatically exclude all cover for medical or Hospital expenses

If you have any of the medical conditions/circumstances listed below, we are unable to offer you cover under the policy for any type of medical or Hospital expenses. This means that if you suffer from such a medical condition/circumstance, you will not have medical or Hospital expenses cover for these medical conditions/ circumstances, or for any other medical conditions or circumstances which are not listed below:

- you are awaiting, or you have had, an organ transplant;
- you have been given a terminal prognosis, or have any condition with a life expectancy of under 24 months;
- you require home oxygen therapy, or you will require oxygen for the Journey;
- you have AIDS or an AIDS defining illness; or
- you have chronic renal failure which is treated by haemodialysis or peritoneal dialysis.

If you suffer from any of the above medical conditions/circumstances, then you will still be able to obtain cover under Plan F (*Non-Medical Cover*) or Basic Non-Medical Cover- see benefit table below. If you are covered under Plan F or Basic Non-Medical Cover there will be no provision to claim under the following Sections of the policy for any claims arising from, related to or associated with any Injury or Sickness suffered by you:

- Section 1A: Cancellation Fees & Lost Deposits
- Section 4: Additional Expenses

This means that under Plan F or Basic Non-Medical Cover, we will not pay:

- any medical or Hospital Expenses; or
- your Journey cancellation or rearrangement costs; or
- any additional or out of pocket expenses (including additional travel and accommodation expenses).

Please contact CHI for further details.

Table of Benefits		Plan F	Basic Non-
		Non-Medical Cover	Medical Cover
Policy section and benefit types		Individual	Individual
*1A.	Cancellation Fees & Lost Deposits	unlimited	\$3,000
1B.	Travel Services Provider Insolvency	\$10,000	\$3,000
1C	Wholesaler Insolvency	\$5,000	\$500
*4.	Additional Expenses	\$50,000	\$5,000
*6.	Accidental Death	\$25,000	\$10,000
*7	Permanent Disability [^]	\$25,000	\$10,000
9.	Loss of Travel Documents, Credit Cards & Travellers Cheques [^]	\$5,000	\$500
10.	Theft of Cash [^]	\$250	\$250
*11.	Luggage & Personal Effects	\$8,000	\$3,000
12.	Luggage & Personal Effects Delay Expenses [^]	\$500	\$250
*13.	Travel Delay Expenses	\$2,000	\$1,000
14.	Alternative Transport Expenses [^]	\$5,000	\$2,000
15.	Personal Liability	\$5 million	\$1 million
*16.	Rental Vehicle Excess / Return of Rental Vehicle	\$3,000	\$2,000

* sub-limits apply - refer to "Your Policy Cover" on pages 36 to 52 for details.

[^] you do not have cover under these Sections while travelling in Australia.

Conditions which are undiagnosed or awaiting specialist opinion

Please note that we are unable to offer any cover for any medical conditions that you were aware of, or arising from signs or symptoms that you were aware of when this policy was issued, and for which at that time:

- you had not yet sought a medical opinion regarding the cause; or
- you were currently under investigation to define a diagnosis; or
- you were waiting specialist opinion.

You may still purchase a travel insurance policy, or apply for cover of other Pre-existing Medical Conditions, however, there will be no provision to claim under any Section of the policy for any claims arising from, related to or associated with any of the above.

Pre-existing Medical Conditions which may be covered with no additional premium payable

Cover under the policy may be provided for a Pre-existing Medical Condition if the Pre-existing Medical Condition is described in the list below, provided that you have not been hospitalised (including day surgery or emergency department attendance) for that condition in the 18 months prior to the time of policy issue.

We do not require any further information if your Pre-existing Medical Condition is described in this list, and has not given rise to your hospitalisation (including day surgery or emergency department attendance) in the 18 months prior to the time of the policy being issued:

- | | |
|--|--|
| 1. Acne | 16. Dupuytren's Contracture |
| 2. Asthma, provided: | 17. Ear Grommets, if no current infection |
| • you are under 60 years of age, and | 18. Eczema |
| • you have no other diagnosed lung disease. | 19. Gastric Reflux (GORD) |
| 3. Bunions | 20. Glaucoma |
| 4. Carpal Tunnel Syndrome | 21. Gout |
| 5. Cataracts | 22. Hay fever |
| 6. Cleft Palate | 23. Hiatus Hernia if no surgery planned |
| 7. Cochlear Implant | 24. Hormone Replacement Therapy |
| 8. Coeliac Disease | 25. Hypercholesterolaemia (High Cholesterol) provided no cardiovascular disease and/or no Diabetes |
| 9. Congenital Adrenal Hyperplasia | 26. Hyperlipidaemia (High Blood Lipids) provided no cardiovascular disease and/or no Diabetes |
| 10. Congenital Blindness | 27. Hypertension provided no cardiovascular disease and/or no Diabetes |
| 11. Congenital Deafness | 28. Hypothyroidism, including Hashimoto's Disease |
| 12. Conjunctivitis | 29. Lipoma |
| 13. Dengue Fever | 30. Macular Degeneration |
| 14. Diabetes Type 1 or Type 2, or Glucose Intolerance provided: | 31. Meniere's Disease |
| • you were diagnosed over 6 months ago; and | 32. Rhinitis |
| • you have had no complications in last 12 months; and | 33. Rosacea |
| • you have had no kidney, eye or neuropathy complications or cardiovascular disease, and | |
| • you are under 50 years of age. | |
| 15. Dry Eye Syndrome | |

- | | |
|--|--|
| 34. Sinusitis | services or treatment associated |
| 35. Tinnitus | with an assisted reproduction |
| 36. Single uncomplicated pregnancy, up to and including 23 weeks, not arising from | program including, but not limited to, in vitro fertilisation (IVF). |

Unless you qualify for Plan F (*Non-Medical Cover*) or Basic Non-Medical Cover, the above free conditions are available to you regardless of whether you elect not to pay the premium for cover of your Pre-existing Medical Condition(s) or had cover declined for your Pre-existing Medical Conditions.

However, if you have been hospitalised (including day surgery or emergency department attendance) for the Pre-existing Medical Condition in the 18 months prior to the time of policy issue, or your Pre-existing Medical Condition does not meet the description above, then we will require further information from you and cover may be excluded.

Please refer to *'How do I obtain cover for my Pre-existing Medical Condition?'* below if your Pre-existing Medical Condition is not described above, or is described but has caused hospitalisation (including day surgery or emergency department attendance) in the 18 months prior to the time of policy issue.

Note that while Pre-existing Medical Conditions not described above will require assessment, there are a range of medical conditions which may not result in any additional premium being charged.

How do I obtain cover for my Pre-existing Medical Condition?

If you are 74 years of age or under, and think you have a Pre-existing Medical Condition and would like cover for that condition, please contact your CHI agent or phone the CHI Medical Assessment line on 1800 671 826 or (02) 9998 7870.

You cannot apply for cover of Pre-existing Medical Conditions under Plans C, E, F, Basic Non-Residents or Basic Non-Medical Cover.

If you have any questions about Pre-existing Medical Conditions, please contact your CHI agent.

Please note that if you have a Pre-existing Medical Condition and:

- a] you do not apply for cover for that Pre-existing Medical Condition; or
- b] you apply for cover for that Pre-existing Medical Condition and we do not agree to provide cover for that Pre-existing Medical Condition; or
- c] we agree to provide cover for that Pre-existing Medical Condition and you do not pay the relevant additional premium,

we **will not** pay any claims arising from, related to or associated with your Pre-existing Medical Condition.

You cannot apply for cover for any medical conditions/circumstances which automatically exclude all cover for medical or Hospital expenses as listed under the heading *'Medical conditions/circumstances which automatically exclude all cover for medical or Hospital expenses'* on page 10 of this PDS.

PLEASE ALSO READ THE "GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS" ON PAGES 53 TO 55 AND THE SECTION-SPECIFIC EXCLUSIONS ON PAGES 36 TO 52.

Important Matters

Under your policy there are rights and responsibilities which you and we have. You must read this PDS in full for more details, but here are some you should be aware of:

WHO CAN PURCHASE THIS POLICY?

Plans A, B, C, F, Basic International, Basic Australia Only & Basic Non-Medical Cover

Cover is only available if:

- you are a Resident of Australia*[#]; and
- you purchase your policy before you commence your Journey; and
- your Journey commences and ends in Australia.[#]

* For temporary residents living in Australia who are not eligible for a Medicare Card

Cover is available under Plan A, B, C, Basic International or Basic Australia Only, however:

- you must purchase your policy in Australia before you commence your Journey; and
- your Journey must commence and end in Australia.

Cover for temporary residents of Australia temporarily travelling Overseas

Cover (excluding any cover for Pre-existing Medical Conditions other than those specifically listed under the heading *'Pre-existing Medical Conditions which may be covered with no additional premium payable'* on pages 11 & 12) is automatically available to temporary residents of Australia temporarily travelling Overseas and who, at the date the Certificate of Insurance is issued:

- are aged 74 years and under,
- hold a return ticket to Australia,
- have a Home address in Australia to which you intend to return, and
- hold a current Australian visa which will remain valid beyond the period of their Journey.

Under Section 2 *"Overseas Emergency Medical Assistance/Evacuation"* if you Injure yourself Overseas or become Sick there or die there and it is necessary to repatriate you or your remains, we will at our option pay the lesser of the cost of returning you to your Home in Australia or to the international airport nearest to where you normally live Overseas. At that point, you will be responsible for all further costs, and cover under all Sections of the policy will end.

For Residents of Australia already Overseas

If you are a Resident of Australia, cover is available under Plan A or Basic International if you purchase your policy while you are Overseas. However:

- your one-way Journey must commence Overseas and end in Australia.

Policies purchased after leaving Australia

You can purchase your policy after you leave Australia, subject to the following conditions:

- cover commences from the time the policy is issued;
- a waiting period of 48 hours from the Issue Date as stated on your Certificate of Insurance applies to all claims arising from, related to or associated with any Injury or Sickness, regardless of the Section that applies to the claim. This means that you will not be covered

for medical expenses, cancellation fees and lost deposits, additional expenses or hospital cash allowance arising from, related to or associated with any Injury or Sickness which happens within this waiting period;

- there is no cover for Pre-existing Medical Conditions other than those specifically listed under the heading 'Pre-existing Medical Conditions which may be covered with no additional premium payable' on pages 11 & 12; and
- cover ends when you return to your Home or the place you intend to reside in Australia, or on the Return Date set out on your Certificate of Insurance, whichever happens first.
For policies purchased after leaving Australia, where the word "Journey" appears in this PDS, its definition in "Words with Special Meanings" (page 22) is deleted and replaced with:

"Journey" means your travel from the time when your policy is issued while you are Overseas to the time when you return to your Home or the place you intend to reside in Australia.

Plan D & Basic Frequent Traveller

Cover is only available if:

- you are a Resident of Australia; and
- you purchase your policy before you commence your Journey; and
- your Journey commences and ends in Australia.

If you have Family cover under Plan D or Basic Frequent Traveller, cover is provided to your spouse (or legally recognised de facto) when they are travelling with you or independently of you. Cover is also provided to your Dependants when they are travelling with you or your spouse (or legally recognised de facto).

Plan E & Basic Non-Residents

Non-Residents Cover

Cover is only available if you are a Non-Resident - which means you:

- are not a Resident of Australia (see page 24 for definition of "Resident of Australia");
- are travelling to, within and from Australia; and
- are not entitled to - or will not during the period of cover be entitled to - receive Medicare benefits (see below).

This policy does not cover any event or occurrence where providing such cover would constitute "health insurance business" as defined under the Private Health Insurance Act 2007 (Cth) or would result in us contravening the Health Insurance Act 1973 (Cth), the Private Health Insurance Act 2007 (Cth) or the National Health Act 1953 (Cth).

Health insurance business as defined under the Private Health Insurance Act 2007 (Cth) includes, but is not limited to, payment of fees or charges for treatment of travellers from countries that have a Reciprocal Health Agreement with Australia. At the time of preparing this PDS, Australia has Reciprocal Health Agreements with New Zealand, Italy, the Netherlands, Norway, Sweden, Finland, Malta, the Republic of Ireland, the United Kingdom, Belgium and Slovenia.

If you require clarification, contact CHI Travel Insurance on 1800 997 810 or (02) 9997 4810 before you apply.

Please note the following conditions apply:

- if a policy is issued after the traveller's arrival in Australia, a waiting period of 48 hours from the Issue Date as stated on your Certificate of Insurance applies to all claims arising from, related to or associated

with any Injury or Sickness, regardless of the Section that applies to the claim. This means that you will not be covered for medical expenses, cancellation fees and lost deposits, additional expenses or hospital cash allowance arising from, related to or associated with any Injury or Sickness which happens within this waiting period.

- **you cannot purchase this cover if the period you are travelling Overseas exceeds the period you will be in Australia.**
- there is no cover for Pre-existing Medical Conditions other than those specifically listed under the heading 'Pre-existing Medical Conditions which may be covered with no additional premium payable' on pages 11 & 12.
- there is no cover for medical or Hospital expenses in your Country of Residence.
- the policy can be signed by a sponsor who is a Resident of Australia.
- where the word 'Australia' or 'Australia or New Zealand' appears in this PDS, the policyholder's Country of Residence is to be substituted, except where it appears in:
 - this section ("Who can Purchase this Policy?");
 - "Jurisdiction and Choice of Law" under "Important Matters" (on page 18);
 - "Words with Special Meanings" (on pages 22 to 24) under the definitions of:
 - "Country of Residence";
 - "Non-Resident"
 - "Resident of Australia"
 - "we", "our" and "us";
 - in Section 1A 1.2 j] & k] of "Your Policy Cover" (on page 38);
 - in Section 3.2 d] of "Your Policy Cover" (on page 41);
 - "General Exclusions Applicable to all Sections" (pages 53 to 55);
 - "Claims are Payable in Australian Dollars to You" and "Travel within Australia Only" (pages 56 & 57); and
 - on the back cover of this PDS.

AGE LIMITS

Age limits are as at the date of issue of your Certificate of Insurance.

Plans A, B, Basic International & Basic Australia Only

Available to travellers of all ages.

Travellers aged 75 years and over

The above plans are only available on application as cover is not automatic. Please contact your CHI agent or phone the CHI Medical Assessment line on 1800 671 826 or (02) 9998 7870.

Please Note: We have the absolute right to accept or decline cover, or impose special conditions such as an Excess. An additional premium for Pre-existing Medical Conditions may also apply.

Plans C, D & Basic Frequent Traveller

Available to travellers aged 74 years and under.

Plan E & Basic Non-Residents

Available to travellers aged 80 years and under.

Plan F & Basic Non-Medical Cover

Available to travellers of all ages who have a Pre-existing Medical Condition or circumstance which is listed on page 10 of the "Pre-existing Medical Conditions" section. Please contact your CHI agent for further details.

PERIOD OF COVER

You are not covered until we issue a Certificate of Insurance. That Certificate forms part of your policy. The period you are insured for is set out in the Certificate.

All Plans* except Plan C, E & Basic Non-Residents

- The cover under Section 1A Cancellation Fees and Lost Deposits, Section 1B Travel Services Provider Insolvency and Section 1C Wholesaler Insolvency begins from the time the policy is issued.
- Cover for all other Sections begins on the date of departure as stated on your Certificate of Insurance.
- Cover ends when you return to your Home, or when we return you to Australia, or on the date of return set out on your Certificate of Insurance, whichever happens first.

* for Residents of Australia already Overseas who have purchased a policy after leaving Australia (*available under Plans A or Basic International*):

- cover begins from the time the policy issued (*a waiting period of 48 hours from the Issue Date as stated on your Certificate of Insurance applies to all claims arising from, related to or associated with any Injury or Sickness, regardless of the Section that applies to the claim (refer to 'For Residents of Australia already Overseas' pages 13 & 14 for details).*)
- cover ends when you return to your Home or the place you intend to reside in Australia, or on the date of return set out on your Certificate of Insurance, whichever happens first.
Refer to page 14 for the amended definition of "Journey" for these policies.

Under Plan D (*Frequent Traveller*) & Basic Frequent Traveller, the maximum period for any one Journey is 37 days for leisure travel or 90 days for business travel. A Journey can be made up of business and/or leisure travel (with the leisure component being up to 37 days), however, the whole Journey cannot exceed a total of 90 days.

Plan C

- Cover for all Sections begins on the date of departure as stated on your Certificate of Insurance.
- Cover ends when you return to your Home, or when we return you to Australia, or on the date of return set out on your Certificate of Insurance, whichever happens.

Plan E & Basic Non-Residents

- The cover under Section 1A Cancellation Fees and Lost Deposits, begins from the time the policy is issued.
- Cover for all other Sections begins on the date of departure as stated on your Certificate of Insurance.
- Cover ends when you return to your Home, or when we return you to your Country of Residence, or on the date of return set out on your Certificate of Insurance, whichever happens first.

COOLING-OFF PERIOD

If you decide that you do not want this policy, you may cancel it within 14 days after you are issued your Certificate of Insurance and PDS, provided you have not started your Journey and you do not want to make a claim or to exercise any other right under the policy. You will be given a full refund of the premium you paid when exercising your cooling-off right.

After this period you can still cancel your policy, but we will not refund any part of your premium if you do.

If this insurance has been submitted to fulfil any visa requirements we hold the right to notify any visa authority that this policy has been cancelled under the Cooling-off Period.

EXTENSION OF COVER

You may extend your cover free of charge if you find that your return to Australia has been delayed because of one or more of the following:

- a bus line, airline, shipping line or rail authority you are travelling on, or that has accepted your fare or Luggage and Personal Effects, is delayed; or
- the delay is due to a reason for which you can claim under your policy (subject to our written approval).

If the delay is for any other reason other than as stated above, we must receive your request to extend your cover at least 7 days before your original policy expires if you send your request by post. All other requests to extend your cover must be received prior to your original policy expiry date. Cover will be extended subject to our written approval, and your payment of the additional premium.

Where we have agreed to extend cover, we will issue you with a new Certificate of Insurance. The period of cover on your new Certificate cannot exceed 12 months.

Cover cannot be extended:

- for any Pre-existing Medical Condition, unless it is listed under the heading '*Pre-existing Medical Conditions which may be covered with no additional premium payable*' on pages 11 & 12, and you have not been hospitalised (including day surgery or emergency department attendance) for that condition in the 18 months prior to application for the extension. This applies even if cover for your Pre-existing Medical Condition was provided under the original policy; or
- for any medical conditions you suffered during the term of your original policy; or
- where you have not advised us of any circumstances that have given (or may give) rise to a claim under your original policy; or
- where at the time of application for the extension you are aged 75 years or over under Plans A, B, C, Basic International & Basic Australia Only; or aged 81 years or over under Plans E & Basic Non-Residents; or
- under Plan D, F, Basic Frequent Traveller & Basic Non-Medical Cover.

CONFIRMATION OF COVER

To confirm any policy transaction, (if the Certificate of Insurance does not have all the information you require), call CHI Travel Insurance on (02) 9997 4810 or 1800 997 810.

EXCESS

Plans A, D, Basic International & Basic Frequent Traveller

We will not pay the first \$100 for any one event under Sections* 1A, 1B, 1C, 3, 9, 10, 11, 15 & 16.

A NIL Excess applies to all other Sections.

* Refer to the "**Traditional Table of Benefits**" on pages 27 to 30 and "**Basic Table of Benefits**" on pages 33 to 35 for details of which Sections are available under each plan.

You can remove the standard \$100 Excess by paying an additional premium (see "**Additional Options**" page 8).

Plans B & Basic Australia Only

We will not pay the first \$100 for any one event under Sections* 1A, 1B, 1C, 11, 15 & 16.

A NIL Excess applies to all other Sections.

* Refer to the "**Traditional Table of Benefits**" on pages 27 to 30 and "**Basic Table of Benefits**" on pages 33 to 35 for details of which Sections are available under each plan.

You can remove the standard \$100 Excess by paying an additional premium (see "**Additional Options**" page 8).

Plan C

We will not pay the first \$100 for any one event under Sections 3 & 15.

A NIL Excess applies to Section 2.

You can remove the standard \$100 Excess by paying an additional premium (see **"Additional Options"** page 8).

Plan E & Basic Non-Residents

We will not pay the first \$100 for any one event under Sections* 1A, 3, 9, 11, 15 & 16.

A NIL Excess applies to all other Sections.

** Refer to the **"Traditional Table of Benefits"** on pages 27 to 30 and **"Basic Table of Benefits"** on pages 33 to 35 for details of which Sections are available under each plan.*

You can remove the standard \$100 Excess by paying an additional premium (see **"Additional Options"** page 8).

Plan F & Basic Non-Medical Cover

We will not pay the first \$100 for any one event under Sections* 1A, 1B, 1C, 9, 10, 11, 15 & 16.

A NIL Excess applies to all other Sections.

** Refer to the **"Traditional Table of Benefits"** on pages 27 to 30 and **"Basic Table of Benefits"** on pages 33 to 35 for details of which Sections are available under each plan.*

You can remove the standard \$100 Excess by paying an additional premium (see **"Additional Options"** page 8).

Please Note: If any additional Excess applies to your policy, the amount is shown on the Certificate of Insurance, Medical Terms of Cover Letter or advised to you in writing before the Certificate is issued to you.

JURISDICTION AND CHOICE OF LAW

This contract of insurance is governed by and construed in accordance with the law of Queensland, Australia and you agree to submit to the exclusive jurisdiction of the courts of Queensland. You agree that it is your intention that this Jurisdiction and Choice of Law clause applies.

YOUR DUTY OF DISCLOSURE

Before you enter into this policy with us, the Insurance Contracts Act 1984 (Cth) requires you to provide us with the information we need to enable us to decide whether and on what terms your proposal for insurance is acceptable and to calculate how much premium is required for your insurance.

You will be asked various questions when you first apply for your policy. When you answer these questions, you must:

- give us honest and complete answers;
- tell us everything you know; and
- tell us everything that a reasonable person in the circumstances could be expected to tell us.

If you vary, extend, reinstate or replace the policy your duty is to tell us before that time, every matter known to you which:

- you know; or
- a reasonable person in the circumstances could be expected to know,

is relevant to our decision whether to insure you and whether any special conditions need to apply to your policy.

You do not need to tell us about any matter that:

- diminishes our risk;
- is of common knowledge;
- we know or should know as an insurer; or
- we tell you we do not need to know.

Who does the Duty apply to?

The duty of disclosure applies to you and everyone who is insured under the policy. If you provide information for another insured, it is as if they provided it to us.

What happens if you or they breach the Duty?

If the duty of disclosure is not complied with, we may cancel the policy and/or reduce the amount we pay if you make a claim. If fraud is involved, we may treat the policy as if it never existed and pay nothing.

FINANCIAL CLAIMS SCHEME

In the unlikely event Allianz Australia Insurance Limited were to become insolvent and could not meet its obligations under the policy, a person entitled to claim may be entitled to payment under the Financial Claims Scheme.

Access to the scheme is subject to eligibility criteria - for more information see the APRA website at:

<http://www.apra.gov.au>

or call the APRA hotline on 1300 558 849.

GENERAL INSURANCE CODE OF PRACTICE

We proudly support the General Insurance Code of Practice.

The Code sets out the minimum standards of practice in the general insurance industry. For more information on the Code please contact Allianz Global Assistance on 1300 654 811.

DISPUTE RESOLUTION PROCESS

In this section, "we", "our" and "us" means Allianz and Allianz Global Assistance.

If you have a complaint or dispute in relation to this insurance, or our services or our representatives, please call us on 1300 654 811, or put the complaint in writing and send it to The Dispute Resolution Department, PO Box 162, Toowong, Queensland 4066. We will attempt to resolve the matter in accordance with our Internal Dispute Resolution process. To obtain a copy of our procedures, please contact us.

A dispute can be referred to the Financial Ombudsman Service Limited (FOS), subject to its terms of reference. The FOS provides a free and independent dispute resolution service for consumers who have general insurance disputes falling within its terms. The contact details for the FOS are:

Financial Ombudsman Service Limited (FOS)

GPO Box 3, Melbourne Victoria 3001

Phone: 1300 780 808

Fax: (03) 9613 6399

Website: www.fos.org.au

Email: info@fos.org.au

PRIVACY NOTICE

To arrange and manage your travel insurance, we (in this Privacy Notice "we", "our" and "us" includes AGA Assistance Australia Pty Ltd trading as Allianz Global Assistance and its duly authorised representatives) collect personal information including sensitive information from you and those authorised by you such as your family members, travelling companions, your doctors, hospitals, as well as from others we consider necessary including our agents.

Any personal information provided to us is used by us to evaluate and arrange your travel insurance. We also use it to administer and provide the insurance services and manage your and our rights and obligations in relation to those insurance services, including managing, processing and investigating claims. We may also collect, use and disclose it for product development, research, IT systems maintenance and development, recovery against third parties and for other purposes with your consent or where authorised by law.

This personal information may be disclosed to third parties involved in the above process, such as travel agents and consultants, travel insurance providers and intermediaries, authorised representatives, reinsurers, claims handlers and investigators, cost containment providers, medical and health service providers, overseas data storage and data handling providers, legal and other professional advisers, your agents and our related and group companies including Allianz. Some of these third parties may be located in other countries. You agree that while those parties will often be subject to confidentiality or privacy obligations, they may not always follow the particular requirements of Australian privacy laws.

When you provide personal information about other individuals, we and our agents rely on you to have made or make them aware:

- that you will or may provide their personal information to us;
- of the types of third parties to whom the personal information may be provided to;
- of the relevant purposes we and the third parties we will disclose it to, will use it for;
- of how they can access it; and
- of the other matters in this Privacy Notice.

We rely on you to have obtained their consent on these matters. If you do not, you must tell us before you provide the relevant information.

You can seek access to and correct your personal information by contacting us. You may not access or correct personal information of others unless you have been authorised by their express consent or otherwise under law, or unless they are your dependants under 16 years of age. In cases where we do not agree to give you access to some personal information, we will give you reasons why.

If you have a complaint about your privacy, please contact:

Privacy Officer, Allianz Global Assistance, PO Box 162, Toowong, QLD 4066 or you can contact the Privacy Commissioner at the Office of The Australian Information Commissioner, GPO Box 2999, Canberra, ACT 2601.

For more information about our handling of personal information, including further details about access, correction and complaints, please see our privacy policy available on request or via www.allianz-assistance.com.au.

If you do not agree to the above or if you do not want us to disclose your personal information to our related and group companies and business partners, you can call us on 1800 023 767. However, if you will not provide us with personal information or allow us to use or disclose it as set out above, we may not be able to provide you with our services or products or may not be able to process your application nor issue you with a policy.

OVERSEAS HOSPITALISATION OR MEDICAL EVACUATION

For emergency assistance anywhere in the world at any time, Allianz Global Assistance is only a telephone call away. The team will help with:

- medical problems, locating nearest medical facilities, access to a Medical Adviser for emergency medical treatment while Overseas, provision of any written guarantees for payment of Reasonable expenses for emergency hospitalisation while Overseas, your evacuation Home;
- locating nearest embassies and consulates, and
- any messages which need to be passed on to your family or employer in the case of an emergency.

If you are hospitalised you, or a member of your travelling party, MUST contact Allianz Global Assistance as soon as possible. If you do not, then to the extent permissible by law, we will not pay for these Hospital expenses or

for any evacuation or airfares that have not been approved or arranged by Allianz Global Assistance.

If you are not hospitalised but you are being treated as an outpatient and the total cost of such treatment will exceed \$2,000 you MUST contact Allianz Global Assistance.

Please note that we will not pay for any Hospital or medical costs incurred in your Country of Residence.

YOU CAN CHOOSE YOUR OWN DOCTOR

You are free to choose your own Medical Adviser or Allianz Global Assistance can appoint an approved Medical Adviser to see you, unless you are treated under a Reciprocal Health Agreement.

You must, however, advise Allianz Global Assistance of your admittance to Hospital or your early return to Australia based on written medical advice.

If you do not get the medical treatment you expect, Allianz Global Assistance can assist you but neither Allianz nor Allianz Global Assistance are liable for anything that results from that.

IN THE EVENT OF A CLAIM

Immediate Notice

of an event giving rise to a claim should be given to Allianz Global Assistance.

24 Hour Emergency Assistance call:

1800 010 075
(within Australia)
+61 7 3305 7499
(reverse charge from Overseas)

PO Box 162
Toowong Qld 4066



Please Note: For claims purposes, evidence of the value of the property insured or the amount of any loss must be kept.

CLAIMS PROCESSING

Allianz Global Assistance will process your claim within 10 business days of receiving a completed claim form and all necessary documentation. If they need additional information, a written notification will be sent to you within 10 business days.

SAFEGUARDING YOUR LUGGAGE AND PERSONAL EFFECTS

You must take all reasonable precautions to safeguard your Luggage and Personal Effects. If you leave your Luggage and Personal Effects Unsupervised in a Public Place we will not pay your claim (for an explanation of what we mean by "Luggage and Personal Effects", "Unsupervised" and "Public Place" – see pages 23 & 24).

Words with Special Meanings

Some words and phrases used in this PDS have a special meaning. When these words and phrases are used, they have the meaning set out below.

"AICD/ICD" means an implantable cardioverter-defibrillator (ICD), also known as an automated implantable cardioverter-defibrillator (AICD).

"arise", "arises" or "arising" means directly or indirectly arising or in any way connected with.

"Carrier" means an aircraft, vehicle, train, tram, vessel or other public transport operated under a licence for the purpose of transporting passengers. This definition excludes taxis.

"Concealed Storage Compartment" means a boot, trunk, glove box, enclosed centre console, or concealed cargo area of a sedan, station wagon, hatchback, van or motorhome.

"Country of Residence" means the country of which you are a permanent resident. If you currently reside in Australia and are eligible for an Australian Medicare Card then, for the purposes of this policy, your Country of Residence is deemed to be Australia.

"Dependant" means your children/grandchildren not in full time employment who are under the age of 21 and travelling with you on the Journey.

"DSM" means The Diagnostic and Statistical Manual of Mental Disorders. It is an American handbook for mental health professionals that lists different categories of mental disorders and the criteria for diagnosing them.

"Duo" means you and your Travelling Companion as named on the Certificate of Insurance. Duo cover does not provide cover for any Dependents.

"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.

"Excess" means the amount which you must first pay for each claim arising from the one event before a claim can be made under your policy.

"Family" means you, your spouse (or legally recognised de facto) and your Dependents (*where Plan B Frequent Traveller or Basic Frequent Traveller has been purchased, "Family" can also mean:*

- you and your spouse (or legally recognised de facto).

"Home" means the place where you normally live in Australia.

"Hospital" means an established hospital registered under any legislation that applies to it, that provides in-patient medical care.

"Individual" means covering you, the person whose name is set out on the Certificate of Insurance. Individual cover does not provide cover for any other person.

"Injure", "Injured" or "Injury" means bodily injury caused solely and directly by violent, accidental, visible and external means, which happens at a definite time and place during your period of cover and does not result from any illness, Sickness or disease.

"Insolvency" or "Insolvent" means bankruptcy, provisional liquidation, liquidation, appointment of a receiver, manager or administrator, entry into any official or unofficial scheme of arrangement, statutory protection, restructuring or composition with creditors, or the happening of anything of a similar nature under the laws of any jurisdiction.

"Journey" means your journey from the time when you leave your Home to go directly to the place you depart from on your travels, and ends when you return to your Home. Refer to page 14 for the definition of "Journey" for policies purchased after leaving Australia.

"Luggage and Personal Effects" means any 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, personal jewellery, photographic and video equipment or personal computers, or electrical devices or portable equipment. However, it does not mean any business samples or items that you intend to trade.

"Medical Adviser" means a qualified doctor of medicine or dentist registered in the place where you received the services.

"Mental illness" means any illness, condition or disorder listed in the current edition of the Diagnostic and Statistical Manual of Mental Disorders.

"Moped" or "Scooter" means any two-wheeled or three-wheeled motor vehicle with an engine displacement of not greater than 50cc.

"Motorcycle" means any two-wheeled or three-wheeled motor vehicle with an engine displacement greater than 50cc.

"Non-Resident" means someone who does not reside in Australia, is travelling to, within and from Australia, and who is not entitled to receive Australian Medicare Benefits.

"Off-piste" means any skiing that is not on groomed terrain or marked slopes that are within the designated ski resort boundaries.

"Open Water Sailing" means sailing more than 10 nautical miles off any land mass.

"Overseas" means in any country other than Australia.

"Pandemic" means a form of an Epidemic that extends throughout an entire continent, even the entire human race.

"Pre-existing Medical Condition" means a medical condition which you were aware of:

1. **prior to the time of the policy being issued that involves:**
 - a) your heart, brain or circulatory system/blood vessels, or
 - b) your lungs or a chronic airways disease, or
 - c) cancer, or
 - d) back pain requiring prescribed pain relief medication, or
 - e) surgery involving any joints, the back, spine, brain or abdomen requiring at least an overnight stay in Hospital, or
 - f) Diabetes Mellitus (Type 1 or Type 2); OR
 2. **in the 2 years prior to the time of the policy being issued:**
 - a) for which you have been in Hospital or emergency department or day surgery, or
 - b) for which you have been prescribed a new medication or had a change to your medication regime, or
 - c) requiring prescription pain relief medication;
- For the purposes of this clause medical condition includes a dental condition; OR
3. **prior to the time of the policy being issued that is:**
 - a) pregnancy, or
 - b) connected with your current pregnancy or participation in an IVF program; OR
 4. **for which, prior to the time of the policy being issued:**
 - a) you have not yet sought a medical opinion regarding the cause; or
 - b) you are currently under investigation to define a diagnosis; or
 - c) you are awaiting specialist opinion.

The above definition applies to you, your Travelling Companion, a Relative or any other person.

“Professional Sport” means any sporting event where any participant receives, or is eligible to receive, an appearance fee, wage, salary or prize money in excess of \$1,000. Participation includes training for, coaching or otherwise competing in that sporting event.

“Public Place” means any place that the public has access to, including but not limited to planes, trains, trams, cruise ships, taxis, buses, air or bus terminals, stations, wharves, streets, museums, galleries, hotels, hotel foyers and grounds, beaches, restaurants, private carparks, public toilets and general access areas.

“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.

“Relative” means any of the following who is resident in Australia or New Zealand. It means your or your Travelling Companion’s spouse, de facto partner, parent, parent-in-law, daughter, son, daughter-in-law, son-in-law, brother, sister, brother-in-law, sister-in-law, grandchild, grandparent, step-parent, step-son, step-daughter, fiancé or fiancée, or guardian.

“Rental Vehicle” means a campervan/motorhome that does not exceed 4.5 tonnes, a sedan, hatchback or station-wagon, four wheel drive or mini bus/people mover rented from a licensed motor vehicle rental company.

“Resident of Australia” means someone who currently resides in Australia and is eligible for an Australian Medicare Card.

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

“Single” means you and your Dependants travelling with you.

“Travel Services Provider” means any scheduled service airline, hotel and resort operator, accommodation provider, motor vehicle rental or hire agency, bus line, shipping line or railway company.

“Travelling Companion” means a person with whom you have made arrangements to travel with you for at least 75% of your Journey before your policy was issued.

“Unsupervised” means leaving your Luggage and Personal Effects:

- with a person who is not named on your Certificate of Insurance or who is not a Travelling Companion or who is not a Relative;
- with a person who is named on your Certificate of Insurance or who is a Travelling Companion or who is a Relative but who fails to keep your Luggage and Personal Effects under close supervision; or
- where they can be taken without your knowledge; or
- at such a distance from you that you are unable to prevent them being taken.

Unsupervised includes forgetting or misplacing items of your Luggage and Personal Effects, leaving them behind or walking away from them.

“we”, “our” and **“us”** means Allianz Australia Insurance Limited.

“Wholesaler” means an entity named as a Wholesaler on pages 58 & 59.

“you” and **“your”** means the person(s) whose name(s) are set out on your Certificate of Insurance, and if you have Single or Family cover, your Dependants.

How to purchase a Traditional Policy

STEP 1	Refer to <i>“Who can purchase this Policy?”</i>	pages 13 to 15
STEP 2	Refer to <i>“Age Limits”</i>	page 15
STEP 3	Read the section entitled <i>“Pre-existing Medical Conditions”</i>	pages 9 to 12
STEP 4	Select your Plan (A, B, C, D or E)	pages 27 to 30
STEP 5	Select your cover type (Single, Duo or Family)	page 36
STEP 6	Nominate the applicable geographical area for your Journey (Plan A only)	see table below
STEP 7	Nominate the duration of your Journey	—
STEP 8	Select any additional options you would like to include	page 8
STEP 9	Apply for cover via one of the following: <ul style="list-style-type: none"> complete the application form and return to your CHI Travel Insurance authorised representative online telephone 	see contact details on back cover of this PDS

Destinations	Geographical Areas
USA, Hawaii, Canada, Africa, South America, Middle East	Area 1
Europe & Japan	Area 2
United Kingdom, Ireland & Asia (excluding Japan)	Area 3
South-West Pacific, Papua New Guinea & Indonesia (including Pacific cruising)	Area 4
New Zealand, Indonesia & Fiji (excluding cruising to these destinations)	Area 5

Plan A (Comprehensive)

You must nominate the applicable geographical area for your Journey. All areas include cover for certain Sections while travelling in Australia – see below for details. Please contact us if there is any uncertainty as to which geographical area applies.

If you are travelling to multiple destinations which are in different geographical areas, you must select the highest geographical area (Area 1 being the highest geographical area, Area 5 the lowest), as this will cover travel in each of the lower geographical areas.

Example:

If you are travelling to Indonesia, Philippines and Europe, you must select Area 2. You will then be covered for all destinations in Areas 2, 3, 4 & 5.

Cover for any loss you suffer must occur in the geographical area (or any lower geographical area) you have selected. However, stopovers of up to 3 nights per policy in a higher geographical area outside of your selected geographical area are permitted.

Example:

If you have chosen Plan A and are travelling to Asia (and have accordingly selected Area 3), you will be covered for all destinations listed in Areas 3, 4 & 5, as well as up to 3 nights stopover in any destinations in Areas 1 & 2.

You will only have cover under Sections 1A, 1B, 1C, 4, 6, 11, 13, 15 & 16 while travelling in Australia (destination must be a minimum of 250km from Home).

Plan C

You will only have cover under Section 15 while travelling in Australia (destination must be a minimum of 250km from Home).

Plan D

You will only have cover under Sections 1A, 1B, 1C, 4 & 6 to 16 while travelling in Australia (destination must be a minimum of 100km from Home).

Plan F

You will only have cover under Sections 1A, 1B, 1C, 4, 6, 11, 13, 15 & 16 while travelling in Australia (destination must be a minimum of 250km from Home).

TRAVEL ON CRUISE LINERS

Travellers on domestic cruises in Australian waters may purchase Plan A (selecting Geographical Area 4) to ensure cover is available for emergency medical assistance and emergency medical and Hospital expenses.

If you do not purchase Plan A, you will not have cover for medical transfer or evacuation (for example, by helicopter) if you need to be transported to the nearest Hospital for emergency medical treatment.

TRAVELLERS 61 YEARS AND OVER

The following additional premiums apply to travellers aged 61 years and over where applicable (note: an additional surcharge for Pre-existing Medical Conditions may also apply).

Travellers aged 61-70 years: +35% of premium
Travellers aged 71-74 years: +90% of premium
Travellers aged 75-80 years*: +180% of premium
Travellers aged 81-84 years: +390% of premium**
Travellers aged 85-89 years: +440% of premium**
Travellers aged 90 years and over: +490% of premium**

* Only available for Plans A, B, E & F.

** Only available for Plans A, B & F.

BONUS DAYS

CHI Travel Insurance Plans (excluding Plan D) offer bonus days to assist with premium calculations as follows:

PERIOD OF COVER	EXTRA FREE DAYS
3 days to 19 days	1 day
23 days to 52 days	3 days
2 months to 4 months	5 days
5 months to 11 months	7 days

EXAMPLE OF BONUS DAY CALCULATION

Cover Required: Plan A Comprehensive/Single/Area 1
Travel Dates: 1/12/14 - 17/12/14 (17 days cover required)
Premium: \$277 (16 day period of cover plus 1 free day – refer Bonus Days Table above).

Please Note: Day of travel and day of return are counted as days.

Return date shown on your Certificate of Insurance is expiry date - bonus days do not extend beyond the expiry date shown on your Certificate.

Traditional Table of Benefits

All Benefits and premiums are in Australian dollars.
If you are travelling in the course of your business, please see page 57 for information on how GST may affect your claims.

Section	Benefit Type	Plan A Comprehensive			Plan B Australia Only			Plan C Medical & Liability			Plan D Frequent Traveller		Plan E Non-Residents		
		Single	Duo (per person)	Family	Single	Duo (per person)	Family	Single	Duo (per person)	Family	Single	Family	Single	Duo (per person)	Family
*1A.	Cancellation Fees and Lost Deposits	unlimited	unlimited	unlimited	unlimited	unlimited	unlimited				unlimited	unlimited	unlimited	unlimited	unlimited
1B.	Travel Services Provider Insolvency	\$10,000	\$10,000	\$20,000	\$10,000	\$10,000	\$20,000				\$10,000	\$20,000			
1C	Wholesaler Insolvency	\$5,000	\$5,000	\$10,000	\$5,000	\$5,000	\$10,000				\$5,000	\$10,000			
*2.	Overseas Emergency Medical Assistance/Evacuation	unlimited	unlimited	unlimited				unlimited	unlimited	unlimited	unlimited	unlimited	unlimited	unlimited	unlimited
3.	Overseas Emergency Medical and Hospital Expenses	unlimited	unlimited	unlimited				unlimited	unlimited	unlimited	unlimited	unlimited	unlimited	unlimited	unlimited
*4.	Additional Expenses	\$50,000	\$50,000	\$100,000	\$50,000	\$50,000	\$100,000				\$50,000	\$100,000	\$50,000	\$50,000	\$100,000
*5.	Hospital Cash Allowance	\$5,000	\$5,000	\$10,000							\$5,000	\$10,000	\$5,000	\$5,000	\$10,000
*6.	Accidental Death	\$25,000	\$25,000	\$50,000	\$25,000	\$25,000	\$50,000				\$25,000	\$50,000	\$25,000	\$25,000	\$50,000
*7.	Permanent Disability	\$25,000	\$25,000	\$50,000							\$25,000	\$50,000	\$25,000	\$25,000	\$50,000
*8.	Loss of Income	\$10,400	\$10,400	\$20,800							\$10,400	\$20,800			
9.	Travel Documents, Credit Cards & Travellers Cheques	\$5,000	\$5,000	\$10,000							\$5,000	\$10,000	\$5,000	\$5,000	\$10,000
10.	Theft of Cash	\$250	\$250	\$250							\$250	\$250			
*11.	Luggage and Personal Effects	\$8,000	\$8,000	\$16,000	\$8,000	\$8,000	\$16,000				\$8,000	\$16,000	\$8,000	\$8,000	\$16,000
*12.	Luggage and Personal Effects Delay Expenses	\$500	\$500	\$1,000							\$250	\$500	\$250	\$250	\$500
*13.	Travel Delay Expenses	\$2,000	\$2,000	\$4,000	\$2,000	\$2,000	\$4,000				\$2,000	\$4,000	\$2,000	\$2,000	\$4,000
14.	Alternative Transport Expenses	\$5,000	\$5,000	\$10,000							\$5,000	\$10,000	\$5,000	\$5,000	\$10,000
15.	Personal Liability	\$5 million	\$5 million	\$5 million	\$5 million	\$5 million	\$5 million	\$5 million	\$5 million	\$5 million	\$5 million	\$5 million	\$5 million	\$5 million	\$5 million
*16.	Rental Vehicle Excess/Return of Rental Vehicle	\$3,000	\$3,000	\$3,000	\$3,000	\$3,000	\$3,000	\$3,000	\$3,000	\$3,000	\$3,000	\$3,000	\$3,000	\$3,000	\$3,000

* sub-limits apply.

Plan A – Comprehensive															
Duration	Area 1			Area 2			Area 3			Area 4			Area 5		
	Single	Duo	Family	Single	Duo	Family	Single	Duo	Family	Single	Duo	Family	Single	Duo	Family
3 days	\$117	\$223	\$234	\$83	\$157	\$166	\$78	\$148	\$156	\$61	\$116	\$122	\$55	\$104	\$110
5 days	\$161	\$306	\$322	\$117	\$222	\$234	\$114	\$217	\$228	\$85	\$161	\$170	\$79	\$151	\$158
8 days	\$175	\$333	\$350	\$143	\$271	\$286	\$136	\$259	\$272	\$99	\$187	\$198	\$92	\$175	\$184
12 days	\$221	\$420	\$442	\$170	\$324	\$340	\$150	\$285	\$300	\$118	\$224	\$236	\$110	\$210	\$220
14 days	\$248	\$471	\$496	\$185	\$352	\$370	\$162	\$309	\$324	\$124	\$236	\$248	\$117	\$222	\$234
16 days	\$277	\$526	\$554	\$203	\$385	\$406	\$176	\$335	\$352	\$141	\$269	\$282	\$132	\$250	\$264
19 days	\$303	\$575	\$606	\$228	\$434	\$456	\$202	\$384	\$404	\$159	\$301	\$318	\$148	\$281	\$296
23 days	\$332	\$630	\$664	\$249	\$472	\$498	\$219	\$417	\$438	\$176	\$334	\$352	\$164	\$311	\$328
27 days	\$382	\$726	\$764	\$281	\$533	\$562	\$270	\$514	\$540	\$205	\$389	\$410	\$191	\$362	\$382
32 days	\$412	\$783	\$824	\$295	\$560	\$590	\$285	\$542	\$570	\$215	\$409	\$430	\$201	\$383	\$402
38 days	\$492	\$934	\$984	\$327	\$621	\$654	\$310	\$589	\$620	\$238	\$452	\$476	\$223	\$423	\$446
45 days	\$571	\$1,085	\$1,142	\$420	\$798	\$840	\$381	\$723	\$762	\$302	\$574	\$604	\$282	\$535	\$564
52 days	\$600	\$1,140	\$1,200	\$454	\$863	\$908	\$401	\$762	\$802	\$315	\$599	\$630	\$294	\$558	\$588
2 months	\$655	\$1,244	\$1,310	\$483	\$918	\$966	\$463	\$881	\$926	\$330	\$627	\$660	\$308	\$584	\$616
3 months	\$867	\$1,647	\$1,734	\$655	\$1,244	\$1,310	\$620	\$1,178	\$1,240	\$452	\$859	\$904	\$420	\$798	\$840
4 months	\$1,042	\$1,980	\$2,084	\$735	\$1,397	\$1,470	\$729	\$1,386	\$1,458	\$530	\$1,008	\$1,060	\$494	\$939	\$988
5 months	\$1,196	\$2,273	\$2,392	\$844	\$1,604	\$1,688	\$837	\$1,591	\$1,674	\$609	\$1,156	\$1,218	\$566	\$1,075	\$1,132
6 months	\$1,362	\$2,587	\$2,724	\$968	\$1,838	\$1,936	\$961	\$1,826	\$1,922	\$674	\$1,281	\$1,348	\$628	\$1,193	\$1,256
7 months	\$1,530	\$2,908	\$3,060	\$1,077	\$2,046	\$2,154	\$1,072	\$2,037	\$2,144	\$795	\$1,511	\$1,590	\$742	\$1,409	\$1,484
8 months	\$1,679	\$3,190	\$3,358	\$1,180	\$2,242	\$2,360	\$1,175	\$2,232	\$2,350	\$872	\$1,657	\$1,744	\$813	\$1,545	\$1,626
9 months	\$1,864	\$3,542	\$3,728	\$1,309	\$2,488	\$2,618	\$1,304	\$2,478	\$2,608	\$950	\$1,806	\$1,900	\$885	\$1,682	\$1,770
10 months	\$2,030	\$3,857	\$4,060	\$1,390	\$2,641	\$2,780	\$1,385	\$2,631	\$2,770	\$1,044	\$1,983	\$2,088	\$972	\$1,847	\$1,944
11 months	\$2,194	\$4,169	\$4,388	\$1,513	\$2,875	\$3,026	\$1,508	\$2,865	\$3,016	\$1,174	\$2,231	\$2,348	\$1,094	\$2,079	\$2,188
12 months	\$2,293	\$4,357	\$4,586	\$1,628	\$3,093	\$3,256	\$1,623	\$3,083	\$3,246	\$1,263	\$2,400	\$2,526	\$1,175	\$2,233	\$2,350

Plan B – Australia Only			
Duration	Single	Duo	Family
3 days	\$60	\$114	\$120
5 days	\$81	\$155	\$162
8 days	\$85	\$161	\$170
12 days	\$91	\$173	\$182
14 days	\$109	\$208	\$218
23 days	\$123	\$233	\$246
30 days	\$145	\$276	\$290
35 days	\$168	\$318	\$336
45 days	\$172	\$327	\$344
2 months	\$220	\$418	\$440
3 months	\$241	\$458	\$482

Plan C – Medical & Liability			
Duration	Single	Duo	Family
1 month	\$179	\$340	\$358
2 months	\$231	\$440	\$462
3 months	\$2		

How to purchase a Basic Policy

STEP 1	Refer to “Who can purchase this Policy?”	pages 13 to 15
STEP 2	Refer to “Age Limits”	page 15
STEP 3	Read the section entitled “Pre-existing Medical Conditions”	pages 9 to 12
STEP 4	Select your Plan (Basic International, Basic Australia Only, Basic Frequent Traveller or Basic Non-Residents)	pages 33 to 35
STEP 5	Select your cover type (Single, Duo or Family)	page 36
STEP 6	Nominate the applicable geographical area for your Journey (Basic International only)	see table below
STEP 7	Nominate the duration of your Journey	---
STEP 8	Select any additional options you would like to include	page 8
STEP 9	Apply for cover via one of the following: <ul style="list-style-type: none"> complete the application form and return to your CHI Travel Insurance authorised representative online telephone 	see contact details on back cover of this PDS

Destinations	Geographical Areas
USA, Hawaii, Canada, Africa, South America, Middle East	Area 1
Europe & Japan	Area 2
United Kingdom, Ireland & Asia (excluding Japan)	Area 3
South-West Pacific, Papua New Guinea & Indonesia (including Pacific cruising)	Area 4
New Zealand, Indonesia & Fiji (excluding cruising to these destinations)	Area 5

Basic International

You must nominate the applicable geographical area for your Journey. All areas include cover for certain Sections while travelling in Australia – see below for details. Please contact us if there is any uncertainty as to which geographical area applies.

If you are travelling to multiple destinations which are in different geographical areas, you must select the highest geographical area (Area 1 being the highest geographical area, Area 5 the lowest), as this will cover travel in each of the lower geographical areas.

Example:
If you are travelling to Indonesia, Philippines and Europe, you must select Area 2. You will then be covered for all destinations in Areas 2, 3, 4 & 5.

Cover for any loss you suffer must occur in the geographical area (or any lower geographical area) you have selected. However, stopovers of up to 3 nights per policy in a higher geographical area outside of your selected geographical area are permitted.

Example:

If you have chosen Basic International and are travelling to Asia (and have accordingly selected Area 3), you will be covered for all destinations listed in Areas 3, 4 & 5, as well as up to 3 nights stopover in any destinations in Areas 1 & 2.

You will only have cover under Sections 1A, 1B, 1C, 4, 6, 11, 13, 15 & 16 while travelling in Australia (destination must be a minimum of 250km from Home).

Basic Frequent Traveller

You will only have cover under Sections 1A, 1B, 1C, 4 & 6 to 16 while travelling in Australia (destination must be a minimum of 100km from Home).

Basic Non-Medical Cover

You will only have cover under Sections 1A, 1B, 1C, 4, 6, 11, 13, 15 & 16 while travelling in Australia (destination must be a minimum of 250km from Home).

TRAVEL ON CRUISE LINERS

Travellers on domestic cruises in Australian waters may purchase Basic International (selecting geographical area 4) to ensure cover is available for emergency medical assistance and emergency medical and Hospital expenses.

If you do not purchase Basic International, you will not have cover for medical transfer or evacuation (for example, by helicopter) if you need to be transported to the nearest Hospital for emergency medical treatment.

TRAVELLERS 61 YEARS AND OVER

The following additional premiums apply to travellers aged 61 years and over where applicable (note: an additional surcharge for Pre-existing Medical Conditions may also apply).

Travellers aged 61-70 years: +35% of premium
Travellers aged 71-74 years: +90% of premium
Travellers aged 75-80 years*: +180% of premium
Travellers aged 81-84 years: +390% of premium**
Travellers aged 85-89 years: +440% of premium**
Travellers aged 90 years and over: +490% of premium**

* Not available for Basic Frequent Traveller.

** Not available for Basic Frequent Traveller or Basic Non-Residents.

BONUS DAYS

CHI Travel Insurance Plans (excluding Basic Frequent Traveller) offer bonus days to assist with premium calculations as follows:

PERIOD OF COVER	EXTRA FREE DAYS
3 days to 19 days	1 day
23 days to 52 days	3 days
2 months to 4 months	5 days
5 months to 11 months	7 days

EXAMPLE OF BONUS DAY CALCULATION

Cover Required: Basic International/Single/Area 1
Travel Dates: 1/12/14 - 17/12/14 (17 days cover required)
Premium: \$194 (16 day period of cover plus 1 free day – refer Bonus Days Table above).

Please Note: Day of travel and day of return are counted as days. Return date shown on your Certificate of Insurance is expiry date - bonus days do not extend beyond the expiry date shown on your Certificate.

Basic Table of Benefits

All Benefits and premiums are in Australian dollars. If you are travelling in the course of your business, please see page 57 for information on how GST may affect your claims.

Section	Benefit Type	Basic International			Basic Australia Only			Basic Frequent Traveller		Basic Non-Residents		
		Single	Duo (per person)	Family	Single	Duo (per person)	Family	Single	Family	Single	Duo (per person)	Family
*1A.	Cancellation Fees and Lost Deposits	\$3,000	\$3,000	\$6,000	\$3,000	\$3,000	\$6,000	\$3,000	\$6,000	\$3,000	\$3,000	\$6,000
1B	Travel Services Provider Insolvency	\$3,000	\$3,000	\$6,000	\$3,000	\$3,000	\$6,000	\$3,000	\$6,000			
1C	Wholesaler Insolvency	\$500	\$500	\$1,000	\$500	\$500	\$1,000	\$500	\$1,000			
*2.	Overseas Emergency Medical Assistance/Evacuation	unlimited	unlimited	unlimited				unlimited	unlimited	unlimited	unlimited	unlimited
3.	Overseas Emergency Medical and Hospital Expenses	unlimited	unlimited	unlimited				unlimited	unlimited	unlimited	unlimited	unlimited
*4.	Additional Expenses	\$5,000	\$5,000	\$10,000	\$5,000	\$5,000	\$10,000	\$5,000	\$10,000	\$5,000	\$5,000	\$10,000
*5.	Hospital Cash Allowance	\$3,000	\$3,000	\$6,000	\$3,000	\$3,000	\$6,000	\$3,000	\$6,000	\$3,000	\$3,000	\$6,000
*6.	Accidental Death	\$10,000	\$10,000	\$20,000	\$10,000	\$10,000	\$20,000	\$10,000	\$20,000	\$10,000	\$10,000	\$20,000
*7.	Permanent Disability	\$10,000	\$10,000	\$20,000				\$10,000	\$20,000	\$10,000	\$10,000	\$20,000
*8.	Loss of Income	\$5,200	\$5,200	\$10,400				\$5,200	\$10,400			
9.	Travel Documents, Credit Cards & Travellers Cheques	\$500	\$500	\$1,000				\$500	\$1,000	\$500	\$500	\$1,000
10.	Theft of Cash	\$250	\$250	\$250				\$250	\$250	\$500	\$500	\$1,000
*11.	Luggage and Personal Effects	\$3,000	\$3,000	\$6,000	\$1,500	\$1,500	\$3,000	\$3,000	\$6,000	\$1,500	\$1,500	\$3,000
*12.	Luggage and Personal Effects Delay Expenses	\$250	\$250	\$500				\$250	\$500	\$250	\$250	\$500
*13.	Travel Delay Expenses	\$1,000	\$1,000	\$2,000	\$1,000	\$1,000	\$2,000	\$1,000	\$2,000	\$1,000	\$1,000	\$2,000
14.	Alternative Transport Expenses	\$2,000	\$2,000	\$4,000				\$2,000	\$4,000	\$2,000	\$2,000	\$4,000
15.	Personal Liability	\$1 million	\$1 million	\$1 million	\$1 million	\$1 million	\$1 million	\$1 million	\$1 million	\$1 million	\$1 million	\$1 million
*16.	Rental Vehicle Excess/Return of Rental Vehicle	\$2,000	\$2,000	\$2,000	\$2,000	\$2,000	\$2,000	\$2,000	\$2,000	\$2,000	\$2,000	\$2,000

* sub-limits apply.

Amount Payable (includes premium, stamp duty and GST where applicable)

Duration	Basic International														
	Area 1			Area 2			Area 3			Area 4			Area 5		
	Single	Duo	Family	Single	Duo	Family	Single	Duo	Family	Single	Duo	Family	Single	Duo	Family
3 days	\$82	\$156	\$164	\$58	\$110	\$116	\$55	\$105	\$110	\$43	\$82	\$86	\$38	\$72	\$76
5 days	\$113	\$215	\$226	\$82	\$156	\$164	\$80	\$152	\$160	\$59	\$112	\$118	\$56	\$106	\$112
8 days	\$123	\$234	\$246	\$100	\$190	\$200	\$95	\$181	\$190	\$69	\$131	\$138	\$65	\$124	\$130
12 days	\$155	\$295	\$310	\$119	\$226	\$238	\$105	\$200	\$210	\$83	\$158	\$166	\$77	\$146	\$154
14 days	\$174	\$331	\$348	\$130	\$247	\$260	\$114	\$217	\$228	\$87	\$165	\$174	\$82	\$156	\$164
16 days	\$194	\$369	\$388	\$142	\$270	\$284	\$123	\$234	\$246	\$99	\$188	\$198	\$92	\$175	\$184
19 days	\$212	\$403	\$424	\$160	\$304	\$320	\$142	\$270	\$284	\$111	\$211	\$222	\$104	\$198	\$208
23 days	\$232	\$441	\$464	\$174	\$331	\$348	\$153	\$291	\$306	\$123	\$234	\$246	\$115	\$219	\$230
27 days	\$267	\$507	\$534	\$197	\$374	\$394	\$189	\$359	\$378	\$143	\$272	\$286	\$134	\$255	\$268
32 days	\$289	\$549	\$578	\$206	\$391	\$412	\$200	\$380	\$400	\$151	\$287	\$302	\$141	\$268	\$282
38 days	\$344	\$654	\$688	\$229	\$435	\$458	\$217	\$412	\$434	\$167	\$317	\$334	\$156	\$296	\$312
45 days	\$400	\$760	\$800	\$294	\$559	\$588	\$266	\$505	\$532	\$212	\$403	\$424	\$197	\$374	\$394
52 days	\$420	\$798	\$840	\$318	\$604	\$636	\$281	\$534	\$562	\$221	\$420	\$442	\$206	\$391	\$412
2 months	\$458	\$870	\$916	\$338	\$642	\$676	\$324	\$616	\$648	\$231	\$439	\$462	\$215	\$409	\$430
3 months	\$607	\$1,153	\$1,214	\$458	\$870	\$916	\$434	\$825	\$868	\$317	\$602	\$634	\$294	\$559	\$588
4 months	\$730	\$1,387	\$1,460	\$515	\$979	\$1,030	\$510	\$969	\$1,020	\$371	\$705	\$742	\$346	\$657	\$692
5 months	\$837	\$1,590	\$1,674	\$591	\$1,123	\$1,182	\$586	\$1,113	\$1,172	\$426	\$809	\$852	\$396	\$752	\$792
6 months	\$953	\$1,811	\$1,906	\$677	\$1,286	\$1,354	\$673	\$1,279	\$1,346	\$472	\$897	\$944	\$440	\$836	\$880
7 months	\$1,071	\$2,035	\$2,142	\$754	\$1,433	\$1,508	\$750	\$1,425	\$1,500	\$557	\$1,058	\$1,114	\$519	\$986	\$1,038
8 months	\$1,175	\$2,233	\$2,350	\$826	\$1,569	\$1,652	\$822	\$1,562	\$1,644	\$611	\$1,161	\$1,222	\$569	\$1,081	\$1,138
9 months	\$1,305	\$2,480	\$2,610	\$917	\$1,742	\$1,834	\$913	\$1,735	\$1,826	\$665	\$1,264	\$1,330	\$620	\$1,178	\$1,240
10 months	\$1,421	\$2,700	\$2,842	\$973	\$1,849	\$1,946	\$969	\$1,841	\$1,938	\$731	\$1,389	\$1,462	\$680	\$1,292	\$1,360
11 months	\$1,536	\$2,918	\$3,072	\$1,059	\$2,012	\$2,118	\$1,056	\$2,006	\$2,112	\$822	\$1,562	\$1,644	\$766	\$1,455	\$1,532
12 months	\$1,605	\$3,050	\$3,210	\$1,139	\$2,164	\$2,278	\$1,136	\$2,158	\$2,272	\$884	\$1,680	\$1,768	\$823	\$1,564	\$1,646

Duration	Basic Australia Only		
	Single	Duo	Family
3 days	\$42	\$80	\$84
5 days	\$57	\$108	\$114
8 days	\$59	\$112	\$118
12 days	\$64	\$122	\$128
14 days	\$77	\$146	\$154
23 days	\$86	\$163	\$172
30 days	\$102	\$194	\$204
35 days	\$117	\$222	\$234
45 days	\$120	\$228	\$240
2 months	\$154	\$293	\$308
3 months	\$169	\$321	\$338

Duration	Basic Frequent Traveller		
	Single	Duo	Family
3 days	\$42	\$80	\$84
5 days	\$57	\$108	\$114
8 days	\$59	\$112	\$118
12 days	\$64	\$122	\$128
14 days	\$77	\$146	\$154
23 days	\$86	\$163	\$172
30 days	\$102	\$194	\$204
35 days	\$117	\$222	\$234
45 days	\$120	\$228	\$240
2 months	\$154	\$293	\$308
3 months	\$169	\$321	\$338

Annual Premium \$449.00 (Single) or \$572.00 (Family)

- Worldwide or Domestic Journeys
- Maximum period any one Journey is 37 days for leisure travel or 90 days for business travel. A Journey can be made up of business and/or leisure travel (with the leisure component being up to 37 days), however, the whole Journey cannot exceed a total of 90 days.
- Cover re-instated on the completion of each Journey (except for Section 15 Personal Liability - the amount shown in the Basic Table of Benefits is the most we will pay for all claims combined under Section 15 for the 12 month policy period).
- Single or Family* cover
**Family* cover includes you and:*
 - your spouse (or de facto partner); or
 - your spouse (or de facto partner) and Dependants
- see page 14 for details
- Not available for travellers aged 75 years and over.

Duration	Basic Non-Resident (see pages 14 & 15 for who is eligible)		
	Single	Duo	Family
5 days	\$102	\$194	\$204
8 days	\$112	\$213	\$224
12 days	\$123	\$234	\$246
14 days	\$145	\$276	\$290
16 days	\$192	\$365	\$384
23 days	\$212	\$403	\$424
30 days	\$251	\$477	\$502
35 days	\$293	\$557	\$586
45 days	\$320	\$608	\$640
52 days	\$343	\$652	\$686
2 months	\$364	\$692	\$728
3 months	\$466	\$885	\$932
4 months	\$567	\$1,077	\$1,134
5 months	\$640	\$1,216	\$1,280
6 months	\$723	\$1,374	\$1,446
7 months	\$829	\$1,575	\$1,658
8 months	\$919	\$1,746	\$1,838
9 months	\$1,015	\$1,929	\$2,030
10 months	\$1,122	\$2,132	\$2,244
11 months	\$1,218	\$2,314	\$2,436
12 months	\$1,270	\$2,413	\$2,540

Your Policy Cover

YOUR CHOICES

Under the policy, you choose the cover you require based on your travel arrangements

- i] an act or threat of terrorism.
- j] the death, Injury or Sickness of any person who resides outside of Australia or New Zealand, who is not listed on your Certificate of Insurance.
- k] where you are a full-time permanent employee and pre-arranged leave is cancelled by your employer unless you are a full-time member of the Australian Defence Force or of federal, state or territory emergency services.

YOU MUST CHECK "GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS" PAGES 53 TO 55 FOR OTHER REASONS WHY WE WILL NOT PAY.

Section 1B TRAVEL SERVICES PROVIDER INSOLVENCY

Cover is available under all Plans except Plans C, E & Basic Non-Residents.

1.3 WE WILL PAY

We will pay the following if your claims arises as a result of the Insolvency of a Travel Services Provider:

- a] the value of the unused arrangements, less any refunds due to you, if you have to cancel any prepaid transport or accommodation arrangements booked for your Journey. We will also pay the travel agent's cancellation fees, up to the amounts set out below, however, we will not pay more than the level of commission or service fees normally earned by the agent, had your Journey not been cancelled. Documentary evidence of the travel agent's lost commission or service fees is required.
The maximum we will pay is as follows:
 - \$2,000 for Single cover
 - \$2,000 per person for Duo cover
 - \$4,000 for Family cover
 - \$2,000 for Individual cover
- b] the Reasonable cost of rearranging your Journey, prior to or after the commencement of your Journey, provided that this cost is not greater than the cancellation fees or lost deposits which would have been incurred had the Journey been cancelled.
- c] the Reasonable additional hotel accommodation and transportation expenses incurred if you have to return Home.

The maximum amount we will pay for all claims combined under this Section for Single, Family & Individual cover is shown under the Table of Benefits for the plan you have selected.

For Duo cover, the maximum amount shown for Single cover under the Table of Benefits for the plan you have selected applies to each person.

1.4 WE WILL NOT PAY

We will not pay:

- a] for any travel or accommodation not booked while you are in Australia.
- b] due to the Insolvency of any travel agent, tour wholesaler, tour operator or booking agent.
- c] due to the Insolvency of a Travel Services Provider if, at the time the Certificate of Insurance was issued, the Travel Services Provider was Insolvent, or a reasonable person would have reason to expect the Travel Services Provider might become Insolvent. Please visit CHI's website to see the latest Travel Services Provider Insolvency notice.
- d] any accommodation expenses incurred after the date you originally planned to return to Australia.

YOU MUST CHECK "GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS" PAGES 53 TO 55 FOR OTHER REASONS WHY WE WILL NOT PAY.

Section 1C WHOLESALER INSOLVENCY

Cover is available under all Plans except Plans C, E & Basic Non-Residents.

1.5 WE WILL PAY

We will pay the unrecoverable value of any unused prepaid transport or accommodation arrangement(s), provided by or arranged by a Wholesaler, which is lost by you due to the Insolvency of the Wholesaler.

The maximum amount we will pay for all claims combined under this Section for Single, Family & Individual cover is shown under the Table of Benefits for the plan you have selected.

For Duo cover, the maximum amount shown for Single cover under the Table of Benefits for the plan you have selected applies to each person.

1.6 WE WILL NOT PAY

We will not pay:

- a] for any travel or accommodation not booked while you are in Australia.
- b] due to the Insolvency of any travel agent, booking agent or Travel Services Provider.
- c] if, at the time the Certificate of Insurance was issued, the Wholesaler was Insolvent, or a reasonable person would have reason to expect the Wholesaler might become Insolvent.

YOU MUST CHECK "GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS" PAGES 53 TO 55 FOR OTHER REASONS WHY WE WILL NOT PAY.

Section 2 OVERSEAS EMERGENCY MEDICAL ASSISTANCE/EVACUATION

Cover is available under all Plans except Plan B, F, Basic Australia Only & Basic Non-Medical Cover.

PLEASE NOTE: You will not have cover under this Section while travelling in your Country of Residence.

Allianz Global Assistance will help you with any Overseas medical emergency (see "Overseas Hospitalisation or Medical Evacuation" on pages 20 & 21). You may contact them at any time 7 days a week.

2.1 ALLIANZ GLOBAL ASSISTANCE WILL ARRANGE FOR THE FOLLOWING ASSISTANCE SERVICES IF YOU INJURE YOURSELF OVERSEAS, OR BECOME SICK WHILE OVERSEAS:

- a] access to a Medical Adviser for emergency medical treatment while Overseas.
- b] any messages which need to be passed on to your family or employer in the case of an emergency.
- c] provision of any written guarantees for payment of Reasonable expenses for emergency hospitalisation while Overseas.
- d] your medical transfer or evacuation if you must be transported to the nearest Hospital for emergency medical treatment Overseas or be brought back to Australia with appropriate medical supervision.
- e] the return to Australia of your Dependants if they are left without supervision following your hospitalisation or evacuation.

If you die as a result of an Injury or a Sickness during your Journey, we will pay for the Reasonable cost of either a funeral or cremation Overseas and/or of bringing your remains back to your Home. The maximum amount we will pay is \$15,000 for all claims combined.

Please note that we will not pay for any medical costs incurred in your Country of Residence.

The maximum amount we will pay for all claims combined under this Section for Single & Family cover is shown under the Table of Benefits for the plan you have selected.

For Duo cover, the maximum amount shown for Single cover under the Table of Benefits for the plan you have selected applies to each person.

2.2 WE WILL NOT PAY

- a] We will not pay for any expenses for medical evacuation, funeral services or cremation or bringing your remains back to Australia unless it has been first approved by Allianz Global Assistance.
- b] We will not pay if you decline to promptly follow the medical advice we have obtained, and we will not be responsible for subsequent medical, Hospital or evacuation expenses.
- c] We will not pay for medical evacuation or the transportation of your remains from Australia to an Overseas country.

YOU MUST CHECK "GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS" PAGES 53 TO 55 FOR OTHER REASONS WHY WE WILL NOT PAY.

Section 3 OVERSEAS EMERGENCY MEDICAL & HOSPITAL EXPENSES

Cover is available under all Plans except Plans B, F, Basic Australia Only & Basic Non-Medical Cover

PLEASE NOTE: You will not have cover under this Section while travelling in your Country of Residence.

3.1 WE WILL PAY

- a] We will reimburse the Reasonable medical or Hospital expenses you incur until you get back to Australia if you Injure yourself Overseas, or become Sick there. The medical or Hospital expenses must have been incurred on the written advice of a Medical Adviser. You must make every effort to keep your medical or Hospital expenses to a minimum. If we determine that you should return Home to Australia for treatment and you do not agree to do so, we will pay you the amount which we determine would cover your medical expenses and/or related costs had you agreed to our recommendation. You will then be responsible for any ongoing or additional costs relating to or arising out of the event you have claimed for. We will only pay for treatment received and/or Hospital accommodation during the 12 month period after the Sickness first showed itself or the Injury happened.
- b] We will also pay the cost of emergency dental treatment, **up to the maximum amount shown below for the plan selected**, for dental costs incurred which the treating dentist certifies in writing is for the relief of sudden and acute pain to sound and natural teeth:
 - Plans A, C, D & E**
 - \$1,000 per person
 - Basic International, Basic Frequent Traveller & Basic Non-Residents**
 - \$500 per person

Please note that we will not pay for any medical costs incurred in your Country of Residence.

The maximum amount we will pay for all claims combined under this Section for Single & Family cover is shown under the Table of Benefits for the plan you have selected.

For Duo cover, the maximum amount shown for Single cover under the Table of Benefits for the plan you have selected applies to each person.

3.2 WE WILL NOT PAY

We will not pay for expenses:

- a] when you have not notified Allianz Global Assistance as soon as practicable of your admittance to Hospital.
- b] after 2 weeks treatment by a chiropractor, physiotherapist or dentist unless approved by Allianz Global Assistance.
- c] if you do not take the advice of Allianz Global Assistance.
- d] if you have received medical care under a Reciprocal National Health Scheme. Please visit www.dfat.gov.au for details on Reciprocal Health Agreements with Australia.
- e] for damage to dentures, dental prostheses, bridges or crowns.
- f] relating to dental treatment involving the use of precious metals or for cosmetic dentistry.

YOU MUST CHECK "GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS" PAGES 53 TO 55 FOR OTHER REASONS WHY WE WILL NOT PAY.

Section 4 ADDITIONAL EXPENSES

Cover is available under all Plans except Plan C.
(See below for details of cover under Section 4.1d] & e])

4.1 WE WILL PAY

- a] We will reimburse any Reasonable additional accommodation and travel expenses if you cannot travel because of an Injury or Sickness which needs immediate treatment from a Medical Adviser who certifies in writing that you are unfit to travel. We will also reimburse your Reasonable additional accommodation and travel expenses for you to be with your Travelling Companion if he or she cannot continue their Journey for the same reason. We will also reimburse the Reasonable accommodation and travel expenses of your Travelling Companion or a Relative to travel to you, stay near you or escort you, if you are in Hospital suffering from a life threatening or other serious condition, or are evacuated for medical reasons. He or she must travel, stay with you or escort you on the written advice of a Medical Adviser and with the prior approval of Allianz Global Assistance.
 - b] If you shorten your Journey and return to Australia on the written advice of a Medical Adviser approved by Allianz Global Assistance, we will reimburse the Reasonable cost of your return to Australia. We will only pay the cost of the fare class that you had planned to travel at and you must take advantage of any pre-arranged return travel to Australia.
 - c] If, during your Journey, your Travelling Companion or a Relative of either of you:
 - dies unexpectedly;
 - is disabled by an Injury; or
 - becomes seriously Sick and requires hospitalisation (except arising out of a Pre-existing Medical Condition), we will reimburse the Reasonable additional cost of your return to Australia. We will only pay the cost of the fare class you had planned to travel at.
- Cover under 4.1 d] & e] only applies to Plans A, B, D, E or F**
- d] We will reimburse you for airfares for you to return to the place you were when your Journey was interrupted, if you return to your Home because:
 - during your Journey, a Relative of yours dies unexpectedly or is hospitalised following a serious Injury or a Sickness (except arising from a Pre-existing Medical Condition); and

- it is possible for your Journey to be resumed; and
- there is more than 14 days remaining of the period of cover, as noted on your Certificate of Insurance; and
- you resume your Journey within 12 months of your return to Australia.

The most we will pay under this benefit is as follows:

- \$3,000 for Single cover
- \$3,000 per person for Duo cover
- \$6,000 for Family cover
- \$3,000 for Individual cover

e] If, as a result of a Pre-existing Medical Condition, a Relative of yours is hospitalised in Australia or New Zealand, or dies in Australia or New Zealand after the policy is issued, and at the time of policy issue you were unaware of the likelihood of such hospitalisation or death, we will pay for the Reasonable additional cost of your return to Australia and/or the cost of airfares for you to return to the place you were when your Journey was interrupted. The most we will pay for all events under this benefit is as follows:

- \$2,000 for Single cover
- \$2,000 per person for Duo cover
- \$4,000 for Family cover
- \$2,000 for Individual cover

f] In addition, we will reimburse your Reasonable additional travel and accommodation expenses if a disruption to your Journey arises from any of the following reasons:

- your scheduled or connecting transport is cancelled, delayed, shortened or diverted because of a strike, riot, hijack, civil protest, weather, natural disaster or avalanche.
- you unknowingly break any quarantine rule.
- you lose your passport, travel documents or credit cards or they are stolen.
- an accident involving your mode of transport. You must have written confirmation of the accident from an official body in the country where the accident happened.
- your Home is rendered uninhabitable by fire, explosion, earthquake or flood.

If you do not have a return ticket booked to Australia before you were Injured or became Sick, we will reduce the amount of your claim by the price of the fare to Australia from the place you planned to return to Australia from. The fare will be at the same fare class as the one you left Australia on.

Wherever claims are made by you under this Section and Section 1A (*Cancellation Fees and Lost Deposits*) for cancelled services/facilities or alternative arrangements for the same or similar services/facilities, we will pay for the higher of the two amounts, not both.

WE WILL ALSO PAY FOR THE FOLLOWING REASONS

- g] You are prevented from skiing at a pre-booked ski resort for more than 24 continuous hours during your Journey, because adverse snow conditions cause a total closure of the lift system. However:
1. we will not pay for claims relating to ski resorts that do not have skiing facilities greater than 1,000 metres above sea level.
 2. we will not pay for claims arising outside the period 15 December to 31 March in Northern Hemisphere resorts, and 15 June to 30 September in Southern Hemisphere resorts.

We will pay a daily benefit of \$100 for Single or Individual cover, \$100 per person for Duo cover, or \$200 for Family cover. The maximum amount we will pay for all claims combined is \$500 for Single or Individual cover, \$500 per person for Duo cover or \$1,000 for Family cover.

h] We will reimburse you for the costs of hiring alternative ski and/or golf equipment following:

1. accidental loss, theft of, or damage to, ski and/or golf equipment owned by you, for which a claim has been accepted by us under Section 11 (*Luggage & Personal Effects*); or
2. the misdirection or delay, for a period of more than 24 hours from the scheduled time of arrival at the snow and/or golf destination, of your ski and/or golf equipment.

You must provide all receipts for the ski and/or golf equipment that you hire.

The maximum amount we will pay for all claims combined is \$300 for Single or Individual cover, \$300 per person for Duo cover or \$600 for Family cover.

i] We will pay you your prepaid travel and accommodation that you do not use, less any refunds due to you, if you want to cancel your Journey and return Home after the scheduled transport service on which you are travelling is hijacked.

We will pay you a benefit of \$1,000 for each 24 hour period. The maximum amount we will pay for all claims combined is \$2,500 for Single or Individual cover, \$2,500 per person for Duo cover or \$5,000 for Family cover.

The maximum amount we will pay for all claims combined under this Section for Single, Family & Individual cover is shown under the Table of Benefits for the plan you have selected.

For Duo cover, the maximum amount shown for Single cover under the Table of Benefits for the plan you have selected applies to each person.

4.2 WE WILL NOT PAY

We will not pay:

- a] if you were aware of any reason, before your period of cover commenced, that may cause your Journey to be cancelled, disrupted or delayed.
- b] if you can claim your additional travel and accommodation expenses from anyone else.
- c] if your claim relates to the financial collapse or Insolvency of any transport, tour or accommodation provider.
- d] for delays or rescheduling by a bus line, airline, shipping line or rail authority unless it is due to a strike, riot, hijack, civil protest, weather or natural disaster.
- e] if you operate a Rental Vehicle in violation of the rental agreement.
- f] as a result of you or your Travelling Companion changing plans.

YOU MUST CHECK "GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS" PAGES 53 TO 55 FOR OTHER REASONS WHY WE WILL NOT PAY.

Section 5 HOSPITAL CASH ALLOWANCE

Cover is available under all Plans except Plans B, C, F, Basic Australia Only & Basic Non-Medical Cover.

PLEASE NOTE: You will not have cover under this Section while travelling in your Country of Residence.

5.1 WE WILL PAY

We will pay you \$50 for each day you are in Hospital if you are in Hospital for more than 48 continuous hours while you are Overseas.

The maximum amount we will pay for all claims combined under this Section for Single & Family cover is shown under the Table of Benefits for the plan you have selected.

For Duo cover, the maximum amount shown for Single cover under the Table of Benefits for the plan you have selected applies to each person.

5.2 WE WILL NOT PAY

- a] We will not pay for the first 48 continuous hours you are in Hospital.
- b] We will not pay if you cannot claim for Overseas medical expenses connected with the hospitalisation under Section 3 (*Overseas Emergency Medical & Hospital Expenses*).

YOU MUST CHECK "GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS" PAGES 53 TO 55 FOR OTHER REASONS WHY WE WILL NOT PAY.

Section 6 ACCIDENTAL DEATH

Cover is available under all Plans except Plan C.

6.1 WE WILL PAY

We will pay the death benefit, to the estate of the deceased, if:

- a] you are Injured during your Journey and you die because of that Injury within 12 months of the Injury; or
- b] during your Journey, something you are travelling on disappears, sinks or crashes and you are presumed dead and your body is not found within 12 months.

The maximum amount we will pay for the death of accompanying Dependants is \$5,000 each, subject to the maximum amount shown in the Table of Benefits for the plan selected (*Single & Family cover only*).

The limit for the death of one person under Family cover who is not an accompanying Dependant is the sum insured for Single cover as per the plan selected.

The maximum amount we will pay for all claims combined under this Section for Single, Family & Individual cover is shown under the Table of Benefits for the plan you have selected.

For Duo cover, the maximum amount shown for Single cover under the Table of Benefits for the plan you have selected applies to each person.

6.2 WE WILL NOT PAY

YOU MUST CHECK "GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS" PAGES 53 TO 55 FOR REASONS WHY WE WILL NOT PAY.

Section 7 PERMANENT DISABILITY

Cover is available under all Plans except Plans B, C & Basic Australia Only.

PLEASE NOTE: Unless you have chosen Plan D or Basic Frequent Traveller, you will not have cover under this Section while travelling in your Country of Residence.

7.1 WE WILL PAY

- a] We will pay if you are Injured during your Journey; and
- b] because of the Injury, you become permanently disabled within 12 months of the Injury.

For the purposes of Section 7, "Permanently disabled" means:

- you have totally lost all of the sight in one or both eyes, or the use of a hand or foot at or above the wrist or ankle; and
- the loss is for at least 12 months and, in Allianz Global Assistance's opinion after consultation with an appropriate medical specialist, will continue indefinitely.

The maximum amount we will pay for the permanent disability of accompanying Dependants is \$5,000 each, subject to the maximum amount shown in the Table of Benefits for the plan selected (*Single & Family cover only*).

The limit for the permanent disability of one person under Family cover who is not an accompanying Dependant is the sum insured for Single cover as per the plan selected.

The maximum amount we will pay for all claims combined under this Section for Single, Family & Individual cover is shown under the Table of Benefits for the plan you have selected.

For Duo cover, the maximum amount shown for Single cover under the Table of Benefits for the plan you have selected applies to each person.

7.2 WE WILL NOT PAY

YOU MUST CHECK "GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS" PAGES 53 TO 55 FOR REASONS WHY WE WILL NOT PAY.

Section 8 LOSS OF INCOME

Cover is only available if you chose Plans A, D, Basic International & Basic Frequent Traveller.

PLEASE NOTE: Unless you have chosen Plan D or Basic Frequent Traveller, you will not have cover under this Section while travelling in your Country of Residence.

8.1 WE WILL PAY

If you are Injured during your Journey and become disabled within 30 days because of the Injury, and the disablement continues for more than 30 days after your return to Australia, we will pay as follows:

Plans A & D

- \$400 per person, per week for a period of up to 26 weeks

Basic International & Basic Frequent Traveller

- \$400 per person, per week for a period of up to 13 weeks

We will only pay if you cannot do your normal or suitable alternative work and you lose all your income.

The maximum amount we will pay for all claims combined under this Section for Single, Family & Individual cover is shown under the Table of Benefits for the plan you have selected.

For Duo cover, the maximum amount shown for Single cover under the Table of Benefits for the plan you have selected applies to each person.

8.2 WE WILL NOT PAY

- a) We will not pay for the first 30 days of your disablement from the time you return to Australia.
- b) We will not pay for the loss of income of Dependents.

YOU MUST CHECK "GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS" PAGES 53 TO 55 FOR OTHER REASONS WHY WE WILL NOT PAY.

Section 9 LOSS OF TRAVEL DOCUMENTS, CREDIT CARDS AND TRAVELLERS CHEQUES

Cover is available under all Plans except Plans B, C & Basic Australia Only.

PLEASE NOTE: Unless you have chosen Plan D or Basic Frequent Traveller, you will not have cover under this Section while travelling in your Country of Residence.

9.1 WE WILL PAY

- a) We will reimburse you the replacement costs (including communication costs) of any travel documents, including passports, credit cards or travellers cheques you lose or which are stolen from you during your Journey.
- b) We will also cover loss resulting from the fraudulent use of any credit card held by you following the loss of the card during your Journey. We will only cover those amounts not covered by any guarantee given by the bank or issuing company to you as the cardholder covering such losses.

The maximum amount we will pay for all claims combined under this Section for Single, Family & Individual cover is shown under the Table of Benefits for the plan you have selected.

For Duo cover, the maximum amount shown for Single cover under the Table of Benefits for the plan you have selected applies to each person.

9.2 WE WILL NOT PAY

To the extent permissible by law, we will not pay if:

- a) you do not report the theft within 24 hours to the police and, in the case of credit cards and travellers cheques, to the issuing bank or company in accordance with the conditions under which the cards or cheques were issued; and
- b) you cannot provide us with a written statement from the police or the issuing bank or company as required by a) above.

YOU MUST CHECK "GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS" PAGES 53 TO 55 FOR OTHER REASONS WHY WE WILL NOT PAY.

Section 10 THEFT OF CASH, BANK NOTES, CURRENCY NOTES, POSTAL ORDERS OR MONEY ORDERS

Cover is available under all Plans except Plans B, C, E, Basic Australia Only & Basic Non-Residents.

PLEASE NOTE: Unless you have chosen Plan D or Basic Frequent Traveller, you will not have cover under this Section while travelling in your Country of Residence.

10.1 WE WILL PAY

We will pay for cash, bank notes, currency notes, postal orders or money orders stolen from your person during your Journey.

The maximum amount we will pay for all claims combined under this Section for Single, Family & Individual cover is shown under the Table of Benefits for the plan you have selected.

For Duo cover, the maximum amount shown for Single cover under the Table of Benefits for the plan you have selected applies to each person.

10.2 WE WILL NOT PAY

To the extent permissible by law, we will not pay if:

- a) you do not report the theft within 24 hours to the police or an office of the bus line, airline, shipping line or rail authority you were travelling on when the theft occurred. You can prove that you made a report by providing us with a written statement from whoever you reported it to.
- b) the cash, bank notes, currency notes, postal orders or money orders were not on your person at the time they were stolen.

YOU MUST CHECK "GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS" PAGES 53 TO 55 FOR OTHER REASONS WHY WE WILL NOT PAY.

Section 11 LUGGAGE AND PERSONAL EFFECTS

Cover is available under all Plans except Plan C.

(See page 48 for details of cover under Section 11.1d)

PLEASE NOTE: for the purpose of this Section:

- "specified items" refers to Luggage and Personal Effects that have been listed as covered on your Certificate of Insurance with a nominated sum insured
- "unspecified items" refers to Luggage and Personal Effects that have not been specifically listed on your Certificate of Insurance

11.1 WE WILL PAY

- a) We will pay the repair cost or value of any Luggage and Personal Effects which, during the Journey, are stolen or accidentally damaged or are permanently lost.

When calculating the amount payable we will apply depreciation due to age, wear and tear for each item. The amount of such depreciation will be determined by us. No depreciation will be applied to goods purchased duty free prior to your departure or goods purchased during your Journey.

We will not pay more than the original purchase price of any item. We have the option to repair or replace the Luggage and Personal Effects instead of paying you.

- b) The maximum amount we will pay for any item (ie. the item limit) is:

Plans A, B, D, E & F

- \$3,000 for personal computers, video recorders or cameras.
- \$1,000 for mobile phones (including PDAs and any items with phone capabilities)
- \$750 for all other unspecified items.

Basic International, Basic Australia Only, Basic Frequent Traveller, Basic Non-Residents & Basic Non-Medical Cover

- \$750 for all unspecified items.

A pair or related set of items, for example (but not limited to):

- a camera, lenses (attached or not), tripod and accessories;
- a matched or unmatched set of golf clubs, golf bag and buggy, or
- a matching pair of earrings,

are considered as only one item for the purpose of this insurance, and the appropriate single individual limit will be applied.

- c) In addition to the limit shown in the Table of Benefits for this Section, we will also pay up to a maximum of \$5,000 (or such other lower amount which you have previously selected) for all items combined, that you have specified under "Specified Luggage & Personal Effects Cover" and paid an additional premium for. The standard item limits shown in 11 b) above do not apply to the specified items listed on your Certificate of Insurance.

Cover under 11.1 d] only applies to Plans A, B, D, E or F

- d] Luggage and Personal Effects left in a motor vehicle are only covered during daylight hours and must have been left in a Concealed Storage Compartment of a locked motor vehicle, and forced entry must have been made.

However, the limits set out below will apply (*this limitation of cover applies to all items even if you have purchased "Specified Luggage and Personal Effects Cover"*):

- \$200 for each item; and \$2,000 in total for all stolen items.

No cover applies if Luggage and Personal Effects are left unattended in the passenger compartment of a motor vehicle at any time, or if the Luggage and Personal Effects have been left in a motor vehicle overnight.

The maximum amount we will pay for all claims combined under this Section for Single, Family & Individual cover is shown under the Table of Benefits for the plan you have selected.

For Duo cover, the maximum amount shown for Single cover under the Table of Benefits for the plan you have selected applies to each person.

We will also pay up to the limits(s) shown on your Certificate of Insurance for any additional cover purchased under "Specified Luggage and Personal Effects Cover", up to a maximum of \$5,000.

11.2 WE WILL NOT PAY

To the extent permissible by law, we will not pay a claim in relation to your Luggage and Personal Effects if:

- a] you do not report the loss, theft or misplacement within 24 hours to the police or an office of the bus line, airline, shipping line or rail authority you were travelling on when the loss, theft or misplacement occurred. You must prove that you made a report by providing us with a written statement from whoever you reported it to.
- b] your jewellery, mobile phone, camera, video camera, personal computer, computer equipment or their accessories are checked in to be held and transported in the cargo hold of any aircraft, ship, train, tram or bus (including any loss from the point of check-in until receipt of the said goods).
- c] the loss, theft or damage is to, or of, bicycles.
- d] the loss, theft of or damage is to or of cash, bank or currency notes, cheques or negotiable instruments.
- e] the loss, theft or damage is to, or of, items left behind in any hotel or motel room after you have checked out, or items left behind in any aircraft, ship, train, tram, taxi or bus.
- f] the loss, theft or damage is to, or of, watercraft of any type (other than surfboards).
- g] the Luggage and Personal Effects were being sent unaccompanied or under a freight contract.
- h] the loss or damage arises from any process of cleaning, repair or alteration.
- i] the loss of or damage arises from ordinary wear and tear, deterioration, atmospheric or weather conditions, insects, rodents or vermin.
- j] the Luggage and Personal Effects were left Unsupervised in a Public Place.
- k] the Luggage and Personal Effects were left unattended in a motor vehicle unless they were left in a Concealed Storage Compartment of a locked motor vehicle.
- l] the Luggage and Personal Effects were left overnight in a motor vehicle even if they were left in a Concealed Storage Compartment of a locked motor vehicle.

- m] the Luggage and Personal Effects have an electrical or mechanical breakdown.
- n] the Luggage and Personal Effects are fragile, brittle or an electronic component is broken or scratched – unless either:
 - it is the lens of spectacles, binoculars or photographic or video equipment; or
 - the breakage or scratch was caused by a crash involving a vehicle in which you are travelling.
- o] you are entitled to be reimbursed by the bus line, airline, shipping line or rail authority you were travelling on when the loss, theft, misplacement or damage occurred. However, if you are not reimbursed the full amount of your claim, we will pay the difference between the amount of your loss and what you were reimbursed, up to the limit of your cover (allowing for depreciation due to age, wear and tear).
- p] Damage to sporting equipment while in use (including surfboards).

YOU MUST CHECK "GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS" PAGES 53 TO 55 FOR OTHER REASONS WHY WE WILL NOT PAY.

Section 12 LUGGAGE AND PERSONAL EFFECTS DELAY EXPENSES

Cover is available under all Plans except Plans B, C & Basic Australia Only.

PLEASE NOTE: Unless you have chosen Plan D or Basic Frequent Traveller, you will not have cover under this Section while travelling in your Country of Residence.

12.1 WE WILL PAY

We will reimburse you if any items of your Luggage and Personal Effects are delayed, misdirected or misplaced by the Carrier for more than 12 hours, and in Allianz Global Assistance's opinion it was reasonable for you to purchase essential items of clothing or other personal items.

Your claim must contain written proof from the Carrier who was responsible for your Luggage and Personal Effects that they were delayed, misdirected or misplaced. We will deduct any amount we pay you under this Section for any subsequent claim for lost Luggage and Personal Effects (Section 11).

The maximum amount we will pay for all claims combined under this Section for Single, Family & Individual cover is shown under the Table of Benefits for the plan you have selected.

For Duo cover, the maximum amount shown for Single cover under the Table of Benefits for the plan you have selected applies to each person.

12.2 WE WILL NOT PAY

We will not pay if you are entitled to compensation from the bus line, air line, shipping line or rail authority you were travelling on for the relevant amount claimed.

However, if you are not reimbursed the full amount, we will pay the difference between the amount of your expenses and what you were reimbursed up to the limit of your cover.

YOU MUST CHECK "GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS" PAGES 53 TO 55 FOR OTHER REASONS WHY WE WILL NOT PAY.

Section 13 TRAVEL DELAY EXPENSES

Cover is available under all Plans except Plan C.

13.1 WE WILL PAY

We will reimburse the cost of your Reasonable additional meals and accommodation expenses if a delay to your Journey, for at least 6 hours, arises from circumstances outside your control.

We will pay up to \$200 at the end of the initial 6 hour period. In addition we will pay up to \$200 for each full 24 hour period that the delay continues beyond the initial 6 hour delay.

The maximum amount we will pay for all claims combined under this Section for Single, Family & Individual cover is shown under the Table of Benefits for the plan you have selected.

For Duo cover, the maximum amount shown for Single cover under the Table of Benefits for the plan you have selected applies to each person.

13.2 WE WILL NOT PAY

We will not pay if a delay to your Journey arises from any of the following reasons:

- a] the financial collapse or insolvency of any transport, tour or accommodation provider;
- b] an act or threat of terrorism.

Nor will we pay if:

- c] you can claim your additional meals and accommodation expenses from anyone else.

YOU MUST CHECK "GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS" PAGES 53 TO 55 FOR OTHER REASONS WHY WE WILL NOT PAY.

Section 14 ALTERNATIVE TRANSPORT EXPENSES

Cover is available under all Plans except Plans B, C & Basic Australia Only.

PLEASE NOTE: Unless you have chosen Plan D or Basic Frequent Traveller, you will not have cover under this Section while travelling in your Country of Residence.

14.1 WE WILL PAY

We will pay your Reasonable additional travel expenses to reach a wedding, funeral, conference, sporting event or prepaid travel/tour arrangements on time if your scheduled transport is cancelled, delayed, shortened or diverted and that means you would not arrive on time.

The maximum amount we will pay for all claims combined under this Section for Single, Family & Individual cover is shown under the Table of Benefits for the plan you have selected.

For Duo cover, the maximum amount shown for Single cover under the Table of Benefits for the plan you have selected applies to each person.

14.2 WE WILL NOT PAY

- a] We will not pay if the cancellation, delay, shortening or diversion of your scheduled transport arises from the financial collapse or insolvency of any transport, tour or accommodation provider.
- a] We will not pay if your claim arises from an act or threat of terrorism.

YOU MUST CHECK "GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS" PAGES 53 TO 55 FOR OTHER REASONS WHY WE WILL NOT PAY.

Section 15 PERSONAL LIABILITY

Cover is available under all Plans.

15.1 WE WILL PAY

We will cover your legal liability for payment of compensation in respect of:

- death or bodily injury; and/or
- physical loss of, or damage to, property,

occurring during your Journey which is caused by an accident or a series of accidents attributable to one source or originating cause.

We will also pay your Reasonable legal expenses for settling or defending the claim made against you.

You must not admit fault or liability for the claim, or incur any legal costs without Allianz Global Assistance's prior written approval.

The maximum amount we will pay for all claims combined under this Section for Single, Family & Individual cover is shown under the Table of Benefits for the plan you have selected.

For Duo cover, the maximum amount shown for Single cover under the Table of Benefits for the plan you have selected applies to each person.

15.2 WE WILL NOT PAY

We will not pay for any amount you become legally liable to pay if the claim arises directly or indirectly from, or is in any way connected with, or is for:

- a] bodily injury to you, your Travelling Companion, or to a Relative or employee of either of you;
- b] damage to property belonging to you, or in your care or control, or belonging to, or in the care or control of, your Relative or your Travelling Companion, or to an employee of either of you;
- c] your ownership, custody, control or use of any firearm or weapon, aerial device, watercraft or motorised vehicle;
- d] your conduct of, or employment in any business, profession, trade or occupation;
- e] 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;
- f] any fine or penalty, or aggravated, punitive, exemplary or liquidated damages;
- g] disease that is transmitted by you;
- h] any relief or recovery other than monetary amounts;
- i] a contract that imposes on you a liability which you would not otherwise have;
- j] assault and/or battery committed by you or at your direction; or
- k] conduct intended to cause bodily injury, property damage or liability with reckless disregard for the consequences of you or any person acting with your knowledge, consent or connivance.

YOU MUST CHECK "GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS" PAGES 53 TO 55 FOR OTHER REASONS WHY WE WILL NOT PAY.

Section 16 RENTAL VEHICLE EXCESS / RETURN OF RENTAL VEHICLE

Cover is available under all Plans except Plan C.

16.1 WE WILL PAY

a] If, during your period of cover, a rental vehicle you have rented from a rental company or agency is:

- involved in a motor vehicle accident while you are driving it; or
- damaged or stolen while in your custody,

then we will pay the lesser of:

- the motor vehicle insurance excess or the liability fee you are required to pay under a damage waiver; or
- property damage for which you are liable.

You must provide a copy of:

- your Rental Vehicle agreement;
- an incident report that was completed;
- repair account;
- an itemised list of the value of the damage; and
- written notice from the rental company or agency advising that you are liable to pay the excess or liability fee.

This cover does not take the place of Rental Vehicle insurance and only provides cover for the excess component up to the applicable benefit limit.

b] We will also pay up to \$500 for the cost of returning your Rental Vehicle to the nearest depot, if your attending Medical Adviser certifies in writing that you are unfit to do so during your Journey.

The maximum amount we will pay for all claims combined under this Section for Single, Duo, Family & Individual cover is shown under the Table of Benefits for the Plan you have selected. The amount applies to the total of all claims combined, regardless of the number of persons the claims relate to.

16.2 WE WILL NOT PAY

We will not pay a claim involving the theft or damage to your Rental Vehicle if the claim arises from you operating or using the Rental Vehicle:

- a] in violation of the rental agreement;
- b] while affected by alcohol or any other drug in a way that is against the law of the place you are in; or
- c] without a licence for the purpose that you were using it.

YOU MUST CHECK "GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS" PAGES 53 TO 55 FOR OTHER REASONS WHY WE WILL NOT PAY.

General Exclusions Applicable to all Sections

We will not pay under any circumstances if:

1. You do not act in a responsible way to protect yourself and your property and to avoid making a claim.
2. You do not do everything you can to reduce your loss as much as possible.
3. Your claim is for consequential loss of any kind including loss of enjoyment.
4. At the time of purchasing the policy, you were aware of something that would give rise to you making a claim under this policy.
5. Your claim is for a loss which is recoverable by compensation under any workers compensation or transport accident laws, government sponsored fund, plan, or medical benefit scheme, or any other similar type legislation required to be effected by or under a law.
6. Your claim arises from errors or omissions in any booking arrangements or failure to obtain the relevant visa, passport or travel documents.
7. your claim arises from the refusal, failure or inability of any person, company or organisation (including but not limited to any airline, or other transportation provider, hotel, car rental agency, tour or cruise operator, travel wholesaler, booking agent or other provider of travel or tourism related services, facilities or accommodation), to provide services, facilities or accommodation, by reason of their own Insolvency or the Insolvency of any person, company or organisation with whom or with which they deal except as provided under Section 1B (*Travel Services Provider Insolvency*) or Section 1C (*Wholesaler Insolvency*).
8. Your claim arises because you act illegally or break any government prohibition or regulation including visa requirements.
9. Your claim arises from a government authority confiscating, detaining or destroying anything.
10. Your claim arises from being in control of a Motorcycle unless:
 - you are licensed to drive a Motorcycle under a current Australian motorcycle licence (excluding Learners Permits and Provisional Licences) or a current International Driving Permit; or
 - you are a passenger travelling on a Motorcycle that is in the control of a person who holds a current motorcycle licence valid for the country you are travelling in.
11. Your claim arises from being in control of a Moped or Scooter unless:
 - you are licensed to drive a Moped or Scooter under a current Australian motorcycle/drivers licence (excluding Learners Permits and Provisional Licences), or a current International Driving Permit; or
 - you are a passenger travelling on a Moped or Scooter that is in the control of a person who holds a current motorcycle or drivers licence valid for the country you are travelling in.
12. Your claim arises from, is related to or associated with:
 - an actual or likely Epidemic or Pandemic; or
 - the threat of an Epidemic or Pandemic.Refer to www.who.int and www.smartraveller.gov.au for further information on Epidemics and Pandemics.
13. Your claim arises from, or is associated with, travel to countries or parts of a country for which:
 - a] i. an advice or warning has been released by the Australian Government Department of Foreign Affairs & Trade or any other government or official body, and

- ii. the advice or warning risk rating is "Reconsider your need to travel" or "Do not travel" (or words to that effect) or the advice or warnings advise against all non-essential travel to or in that location or advise against specific transport arrangements or participation in specific events or activities, or
- b]** the mass media has indicated the existence or potential existence of circumstances (including circumstances referred to in a) i. and ii. above) that may affect your travel;
- and
- c]** you did not take appropriate action to avoid or minimise any potential claim under your policy (including delay of travel to the country or part of the country referred to in the relevant advice(s), warning(s) and/or mass media statement(s)).
- Circumstances, in this case, includes but are not limited to strike, riot, weather event, civil protest or contagious disease (including an epidemic or pandemic).
14. Your claim arises from any act of war, whether war is declared or not, or from any rebellion, revolution, insurrection or taking of power by the military.
 15. Your claim arises from a nuclear reaction or contamination from nuclear weapons or radioactivity.
 16. Your claim arises from biological and/or chemical materials, substances, compounds or the like used directly or indirectly for the purpose to harm or to destroy human life and/or create public fear.
 17. Your claim arises directly or indirectly from, or is in any way connected with any Pre-existing Medical Condition of any person including you, your Travelling Companion or a Relative except as provided under Section 1A 1.1 e] (page 37) and Section 4.1 e] (page 42). This exclusion will not apply:
 - a] if you satisfy the provisions as set out under the heading 'Pre-existing Medical Conditions which may be covered with no additional premium payable' (as set out on pages 11 & 12), or
 - b] as provided in your Medical Terms of Cover letter and from the time any additional premium that applies has been received by us for Pre-existing Medical Conditions for which you must apply for cover and for which approval has been given by us. Special conditions, limits and Excesses may apply if we notify you in writing.
 18. Your claim arises from, is related to or associated with any signs or symptoms that you were aware of before cover commenced, but:
 - a] you had not yet sought a medical opinion regarding the cause; or
 - b] you were currently under investigation to define a diagnosis; or
 - c] you were awaiting specialist opinion.
 19. Your claim is in respect of travel booked or undertaken even though you know you are unfit to travel, travel against medical advice, travel to obtain medical treatment or you arrange to travel when you know of circumstances that could lead to the Journey being disrupted or cancelled.
 20. Your claim arises from any Injury or Sickness where a metastatic or terminal prognosis was made prior to the issue of the Certificate of Insurance.
 21. Your claim arises from, or is in any way connected with, complications following elective surgery.
 22. Your claim arises out of pregnancy, childbirth or related complications, unless it is a single uncomplicated pregnancy (up to and including 23 weeks), or we have agreed in writing to provide cover. In any event we will not pay medical expenses for:
 - regular antenatal care;

- childbirth at any gestation; or
 - care of the newborn child.
23. Your claim involves a hospital where you are being treated for addiction to drugs or alcohol, or are using it as a nursing, convalescent or rehabilitation place.
 24. Your claim involves the cost of medication in use at the time the Journey began or the cost for maintaining a course of treatment you were on prior to the Journey.
 25. Your claim arises from, or is in any way related to, Mental illness including:
 - a] dementia, depression, anxiety, stress or other mental or nervous condition; or
 - b] conditions that have resulted in behavioural issues; or
 - c] a therapeutic or illicit drug or alcohol addiction.
 26. Your claim arises from suicide or attempted suicide.
 27. Your claim arises directly or indirectly from, or is in any way connected with, a sexually transmitted disease or virus, unless we have agreed in writing to provide cover as set out in your Medical Terms of Cover letter and you have paid any additional premium that applies.
 28. You were under the influence of any intoxicating liquor or drugs except a drug prescribed to you by a Medical Adviser, and taken in accordance with their instructions.
 29. Despite Allianz Global Assistance's advice otherwise following your call to them, you received private hospital or medical treatment where public funded services or care is available in Australia or under any Reciprocal Health Agreement between the Government of Australia and the government of any other country.
 30. Your claim arises from any medical procedures in relation to AICD/ICD insertion during Overseas travel. If you, your Travelling Companion or a Relative (as listed on your Certificate of Insurance) requires this procedure, due to sudden and acute onset which occurs for the first time during your period of cover and not directly or indirectly related to a Pre-existing Medical Condition, Allianz Global Assistance will exercise their right to organise a repatriation to Australia for this procedure to be completed.
 31. Your claim arises from or is any way related to the death or hospitalisation of any person aged 85 years and over (other than a Relative), who is not listed on the Certificate of Insurance, regardless of the country in which they may live.
 32. Your claim arises directly or indirectly from or is in any way connected with any event or occurrence where providing such cover would constitute "health insurance business" as defined under the Private Health Insurance Act 2007 or would result in us contravening the Health Insurance Act 1973 (Cth), the Private Health Insurance Act 2007 (Cth) or the National Health Act 1953 (Cth).
 33. Your claim arises because you hunt, race (other than on foot), engage in Open Water Sailing, play polo, go mountaineering or rock climbing using ropes or climbing equipment (other than for hiking), from skiing Off-piste, from Professional Sport of any kind, or from parachuting or hang gliding.
 34. Your claim arises because you dive underwater using an artificial breathing apparatus, unless you hold an open water diving licence recognised in Australia or you were diving under licensed instruction.
 35. Your claim arises from travel in any air supported device other than as a passenger in a fully licensed aircraft operated by an airline or charter company. This exclusion does not apply to regulated or licensed ballooning.

Claims

HOW TO MAKE A CLAIM

You must give Allianz Global Assistance notice of your claim as soon as possible by calling 1300 654 811. If there is a delay in claim notification, or you do not provide them with sufficient detail to process your claim, they can reduce your claim by the amount of prejudice they have suffered because of the delay.

You must give Allianz Global Assistance any information they reasonably ask for to support your claim at your expense, such as but not limited to police reports, valuations, medical reports, original receipts or proof of ownership.

You must co-operate with Allianz Global Assistance at all times in relation to the provision of supporting evidence and such other information as they may reasonably require.

- For medical, Hospital or dental claims, contact Allianz Global Assistance as soon as practicable.
- For loss or theft of your Luggage and Personal Effects, report it immediately to the police and obtain a written notice of your report.
- For damage or misplacement of your Luggage and Personal Effects, caused by the airline or any other operator or accommodation provider, report the damage or misplacement to an appropriate official and obtain a written report, including any offer of settlement that they may make.
- Submit full details of any claim in writing within 30 days of your return.

CLAIMS ARE PAYABLE IN AUSTRALIAN DOLLARS TO YOU

We will pay all claims in Australian dollars. We will pay you unless you tell us to pay someone else. The rate of currency exchange that will apply is the rate at the time you incurred the expense.

DEPRECIATION

Depreciation will be applied to claims for Luggage and Personal Effects at such rates as reasonably determined by Allianz Global Assistance.

YOU MUST NOT ADMIT FAULT OR LIABILITY

In relation to any claim under this policy you must not admit that you are at fault, and you must not offer or promise to pay any money, or become involved in litigation, without the approval of Allianz Global Assistance.

YOU MUST HELP US TO RECOVER ANY MONEY WE HAVE PAID

If we have a claim against someone in relation to the money we have to pay or have paid under this policy, you must do everything you can to help us do that in legal proceedings. If you are aware of any third party that you or we may recover money from, you must inform Allianz Global Assistance of such third party.

IF YOU CAN CLAIM FROM ANYONE ELSE, WE WILL ONLY MAKE UP THE DIFFERENCE

If you can make a claim against someone in relation to a loss or expense covered under this policy and you do not get paid the full amount of your claim, we will make up the difference. You must claim from them first.

OTHER INSURANCE

If any loss, damage or liability covered under this policy is covered by another insurance policy, you must give us details of such insurance.

If you make a claim under the other insurance policy and you are paid the full amount of your claim, you cannot make a claim under this policy.

If you make a claim under the other insurance policy and you are not paid the full amount of your claim, we will make up the difference, up to the amount this policy covers you for. We may seek contribution from your other insurer. You must give Allianz Global Assistance any information they reasonably ask for to help us make a claim from your other insurer.

SUBROGATION

Allianz Global Assistance may, at their discretion, undertake in your name and on your behalf, control and settlement of proceedings for our own benefit to recover compensation or secure indemnity from any party in respect of anything covered by this policy. You are to assist and permit to be done, all acts and things as required by Allianz Global Assistance for the purpose of recovering compensation or securing indemnity from other parties to which we may become entitled or subrogated, upon us paying your claim under this policy regardless of whether we have yet paid your claim and whether or not the amount we pay you is less than full compensation for your loss. These rights exist regardless of whether your claim is paid under a non-indemnity or an indemnity clause of this policy.

RECOVERY

Allianz Global Assistance will apply any money they recover from someone else under a right of subrogation in the following order:

1. To Allianz Global Assistance, their administration and legal costs arising from the recovery.
2. To us, an amount equal to the amount that we paid to you under the policy.
3. To you, your uninsured loss (less any Excess).
4. To you, your Excess.

Once we pay your total loss we will keep all money left over. If we have paid your total loss and you receive a payment from someone else for that loss or damage, you must pay us the amount of that payment up to the amount of the claim we paid you.

If we pay you for lost or damaged property and you later recover the property or it is replaced by a third party, you must pay us the amount of the claim we paid you.

BUSINESS TRAVELLERS – HOW GST AFFECTS YOUR CLAIM

If you are entitled to claim an input tax credit in respect of a cost for which a claim is made, or would be entitled to an input tax credit if you were to incur the relevant cost (i.e. in replacing a lost or stolen item), the amount we would otherwise pay will be reduced by the amount of that input tax credit.

TRAVEL WITHIN AUSTRALIA ONLY

If you are entitled to claim an input tax credit in respect of your premium you must inform Allianz Global Assistance of the amount of that input tax credit (as a percentage) at the time you first make a claim. If you fail to do so, you may have a liability for GST if we pay you an amount under this policy.

FRAUD

Insurance fraud places additional costs on honest policyholders. Fraudulent claims force insurance premiums to rise. We encourage the community to assist in the prevention of insurance fraud.

You can help by reporting insurance fraud by calling Allianz Global Assistance on 1800 453 937. All information will be treated as confidential and protected to the full extent under law.

Wholesaler List

Abercrombie & Kent (Australia) Pty. Ltd. ABN 55 005 422 999;
Academy Travel Pty Ltd ABN 69 150 402 841;
Adventure Destinations Pty Ltd ABN 24 126 175 193;
Adventure World Travel Pty Limited ABN 69 122 505 631;
Aegean Tours Pty Ltd & Bali Assets Pty Ltd Partnership trading as Asiaquest Tours ABN 80 745 382 672;
African Wildlife Safaris Pty Ltd ABN 18 006 516 285 trading as African Wildlife Safaris and Natural Focus Safaris;
ATI Tours Pty Ltd ABN 20 109 484 326;
Australia New Zealand Central Reservations Office Pty Limited ABN 16 073 214 490 trading as ANZCRO;
Australian Pacific Touring Pty Ltd ABN 44 004 684 619;
Baltic and Eastern Europe Travel Pty Ltd ABN 55 060 841 974 trading as Eastern Europe Travel;
Beyond Travel Group Pty Ltd ABN 73 115 510 926;
Bunnik Travel Pty Ltd ABN 38 077 203 466;
Chimu Adventures Pty Ltd ABN 65 110 269 380;
Circuit Travel Pty Ltd ABN 12 001 268 257 trading as Globus Family of Brands;
Club Mediterranee (Australia) Pty Ltd ABN 73 001 302 012;
Concierge Travel Group Pty Limited ABN 92 002 144 130 trading as Elegant Resorts and Villas;
Contiki Holidays (Australia) Pty Ltd ABN 18 002 525 340;
Creative Tours Pty Ltd ABN 23 003 286 459
DAH Holdings Pty Ltd ABN 67 107 041 912 trading as Driveaway Holidays;
The Trustee for the Dziadkiewicz Trust trading as Contours Travel ABN 54 907 026 274;
Dhamala Enterprises Pty Ltd ABN 26 147 310 969 trading as Himalayan Experience;
Dial and Travel Pty Ltd ABN 79 146 754 743 trading as Ormina Tours;
The Trustee for Hauraki Holdings Unit Trust trading as Entire Travel Connection ABN 51 328 832 827;
Exciting Destinations Pty Limited ABN 28 112 971 838 trading as Inca Tours;
Exotic Destinations Pty Ltd ABN 17 075 947 910;
Expedia Inc ABN 25 138 063 573;
The Trustee for the 50 Degrees North Unit Trust trading as 50 Degrees North ABN 37 437 434 292;
Four Corners Travel Group Pty Ltd ABN 95 004 712 734 trading as India Tours & Travel Specialists and African Travel Specialists;
Francis Travel Representation Pty Limited ABN 96 064 965 064 trading as Travel Industry Club;
G.E.T. Educational Tours Pty Ltd ABN 96 004 488 886;
Greece and Mediterranean Travel Centre Pty Ltd ABN 70 102 271 830;
Harvey Holidays Pty Ltd ABN 13 061 284 866 trading as Harvey's Choice Holidays;
H.I.S. Australia Pty Ltd ABN 81 011 037 577 trading as Travel Japan by H.I.S.;
Holiday Marketing Pty Ltd ABN 84 066 954 381 trading as Beachcomber Tours;
The John Ford Family Trust trading as Ibertours ABN 48 627 741 255;

Imperial China Tours Pty Ltd ABN 21 070 223 166;
Insight Vacations Pty Limited ABN 36 002 640 057;
International Rail Australasia Pty Ltd ABN 94 116 403 635;
Intrepid Travel Pty. Ltd. ABN 35 007 172 456 trading as Intrepid Travel;
Kernot International Travel Pty Ltd ABN 72 115 478 101 trading as CIT Holidays;
Keygate Holdings Pty Ltd ABN 46 088 941 682 trading as Asia Escape Holidays
M.E.C. Corporation Pty Ltd ABN 48 101 827 052 trading as Womens Own Adventure;
Majestic International Travel Service Pty Ltd ABN 52 005 586 121 trading as Holidays on Location;
Mulligan Enterprises Pty Ltd ABN 74 137 376 535 trading as Made Easy Tours;
Orfimar Pty Ltd ABN 32 098 803 742 trading as Fairy Chimneys Travel;
Peregrine Adventures Pty. Ltd. ABN 54 006 831 974;
Pinpoint Travel Group Pty Ltd ABN 70 003 745 999;
Potter & Co. Pty Ltd. ABN 21 600 226 800 trading as The Africa Safari Co.;
Qantas Holidays Limited ABN 24 003 836 459;
Rail Plus Australasia Pty Ltd ABN 84 081 473 172;
Scenic Tours Pty Ltd. ABN 85 002 715 602 trading as Scenic Tours;
Sewah International Pty Ltd ABN 31 003 354 087 trading as Nordic Travel;
Southern Cross Safaris Australia Pty Ltd ABN 83 126 019 538 trading as Bench International;
Specialist Holidays Pty Limited ABN 32 134 691 580;
Sundowners Travel Centre Proprietary Limited ABN 11 005 066 348 trading as Sundowners Overland;
Tempo Holidays Pty Ltd ABN 51 007 331 213 trading as Tempo Holidays;
The Impulse Travel Group Pty Limited ABN 92 100 392 345 trading as Above & Beyond Holidays;
Top Deck Tours Pty Ltd ABN 30 107 934 841;
Trafalgar Tours (Aust.) Pty Ltd ABN 73 000 717 715;
Transformational Journeys Pty Ltd ABN 68 160 109 946 trading as Touch of Spirit Tours;
Travel & Living Pty Limited ABN 51 105 498 066 trading as Discover Asia and McLachlan Tours;
Travel Makers Pty Ltd ABN 26 114 388 082 trading as Travel Makers;
Travel the World Pty Limited ABN 69 001 429 250 trading as Tauck World Discovery;
Uniworld River Cruises (Australia) Pty Ltd ABN 31 149 428 348;
Ahmet Burak Kaplan & Vanessa Susan Stewart Wallace Family Partnership trading as Vanbur Travel Marketing & Design ABN 73 128 231 744;
The Trustee for the Venture Holidays SA Unit Trust trading as Venture Holidays ABN 40 101 240 036;
Wendy Wu Tours Pty. Limited ABN 87 082 688 202;
Wildlife Safari (Australia) Pty Ltd ABN 89 053 908 964;
World Challenge Expeditions Pty Ltd ABN 69 104 769 584;
World Trade Travel Pty. Limited ABN 45 061 891 263 trading as Helen Wong Tours;
Worldcar and Travel.com.au Pty. Limited ABN 41 087 966 489 trading as GlobalCars.com.au.

CHI Travel Insurance Application Form

Please do not detach. Return the entire brochure to your agent. If you have insufficient space to complete your answers, please attach a separate sheet.

Traveller's details

			/ /
INSURED'S SURNAME	FIRST NAME	TITLE	DATE OF BIRTH
			/ /
INSURED'S SURNAME	FIRST NAME	TITLE	DATE OF BIRTH

Children's details

			/ /
INSURED'S SURNAME	FIRST NAME	TITLE	DATE OF BIRTH
			/ /
INSURED'S SURNAME	FIRST NAME	TITLE	DATE OF BIRTH
			/ /
INSURED'S SURNAME	FIRST NAME	TITLE	DATE OF BIRTH
			/ /
INSURED'S SURNAME	FIRST NAME	TITLE	DATE OF BIRTH

Traveller's contact details

RESIDENTIAL ADDRESS			
SUBURB	STATE	POSTCODE	
EMAIL			
PHONE (AFTER HOURS)	PHONE (BUSINESS HOURS)	PHONE (MOBILE)	

Travel details

/ /	/ /
DEPARTURE DATE	RETURN DATE / EXPIRY DATE
PERIOD OF TRAVEL (DAYS/MONTHS)	
MAJOR DESTINATIONS	

Cover required Single Duo Family
 Individual (applies to Plan F (Non-Medical Cover & Basic Non-Medical Cover only))

Cover Area 1 2 3 4 5 Australia

Plan selected - Traditional

PLAN	Description	Base Premium
PLAN A	Comprehensive	<input type="checkbox"/> \$
PLAN B	Australia Only	<input type="checkbox"/> \$
PLAN C	Medical & Liability	<input type="checkbox"/> \$
PLAN D	Frequent Traveller	<input type="checkbox"/> \$
PLAN E	Non-Residents	<input type="checkbox"/> \$
PLAN F	Non-Medical Cover	<input type="checkbox"/> \$

OR

Plan selected - Basic

Basic International	<input type="checkbox"/> \$
Basic Australia Only	<input type="checkbox"/> \$
Basic Frequent Traveller	<input type="checkbox"/> \$
Basic Non-Residents	<input type="checkbox"/> \$
Basic Non-Medical Cover	<input type="checkbox"/> \$

Additional costs

Pre-existing Medical Conditions

You are not automatically covered for Pre-existing Medical Conditions. Please refer to the definition of, and guidelines for, Pre-existing Medical Conditions on pages 9 to 12 of the PDS.

- Do you have any Pre-existing Medical Conditions (as outlined in the PDS)? Yes No
- Are any of your Pre-existing Medical Conditions listed on page 10 under the heading 'Medical conditions/circumstances which automatically exclude all cover for medical or hospital expenses'? Yes No

If 'Yes', please note that we are unable to offer a travel insurance policy that provides any benefits for medical or hospital expenses whatsoever.

If you have any of the conditions/circumstances which are excluded, travel insurance is still available to you if you purchase *Plan F (Non-Medical Cover)* or *Basic Non-Medical Cover*, however, there will be no provision to claim under certain sections of the policy for any claims arising from, related to or associated with any Injury or Sickness suffered by you. Please refer to the "Pre-existing Medical Conditions" section of the PDS for details (pages 10 to 12).

- Are all of your Pre-existing Medical Conditions listed on pages 11 & 12 under the heading 'Pre-existing Medical Conditions which may be covered with no additional premium payable'? (not available Plan F or Basic Non-Medical Cover) Yes No

If 'Yes', we will provide automatic cover for the Pre-existing Medical Conditions listed, at no additional premium, **provided you have not** been hospitalised (including Day Surgery or Emergency Department attendance) for the condition(s) in the past 18 months.

- Do you have a Pre-existing Medical Condition which is not listed on pages 10 to 12, and for which you would like to apply for cover for the Journey? (not available Plans C, E, F, Basic Non-Residents or Basic Non-Medical Cover) Yes No

If 'Yes', please contact your CHI travel agent.

If your application for cover is approved, an additional premium may be payable.

Please note that if you have a Pre-existing Medical Condition and:

- you do not apply for cover; or**
- you apply for cover and we do not agree to provide cover; or**
- we agree to provide cover and you do not pay the relevant additional premium, we will not pay any claims arising from, related to or associated with your Pre-existing Medical Condition.**

- If approved, what is your medical assessment number? _____ / _____

Approved Pre-existing Medical Conditions premium(s)	<input type="checkbox"/> \$
Travellers 61-74 years additional premium(s)	<input type="checkbox"/> \$
Travellers 75 years or over additional premium(s)	<input type="checkbox"/> \$
Approval Code(s)	_____ / _____

Traditional Increased Rental Vehicle Excess Cover (\$500 units up to an additional \$6,000) (not available under Plan C)	<input type="checkbox"/>
Additional Sum Insured \$	\$ _____
Basic Increased Rental Vehicle Excess Cover (additional \$2,000)	<input type="checkbox"/> \$

Specified Luggage and Personal Effects Cover (not available under Plan C)		<input type="checkbox"/>
Item	Sum Insured \$	
Item	Sum Insured \$	
Item	Sum Insured \$	
Total Sum Insured \$		\$ _____

Removal of Standard Excess	<input type="checkbox"/> \$
----------------------------	-----------------------------

TOTAL COST \$ _____

Declaration

- I/we acknowledge that a copy of the combined Financial Services Guide [FSG] and Product Disclosure Statement (including Policy Wording) [PDS], were provided to me/us before I/we applied for this insurance, and that I/we have made the decision to purchase the policy after carefully reading the terms, conditions and exclusions contained in the PDS, and agree that this product is suitable for my/our needs.
- I/we acknowledge that I/we have read and understood the Duty of Disclosure and the consequences of non-disclosure.

- I/we authorise any doctor or clinic to provide Allianz Global Assistance with information concerning my/our current or past medical history. I/we have read the Privacy Notice and I/we consent to the collection, use and disclosure of my/our personal information by Allianz or Allianz Global Assistance to such persons and for such purposes stated in the Privacy Notice.
- I/we acknowledge that this policy does not automatically provide cover for Pre-existing Medical Conditions.

- I/we agree to abide with the terms and conditions of this policy and confirm that the above information is correct.

Insured/Sponsor Signature _____ **Date** _____

Insured/Sponsor Signature _____ **Date** _____

If Duo cover has been selected, both insureds must sign.

CLAIMS GUARANTEE

We will process your claim within 10 working days of receiving a completed claim form and all necessary documentation. If we need additional information, a written notification will be sent to you within 10 working days.



CHI TRAVEL INSURANCE PTY LTD

ABN 70 131 684 636

PO Box 495
(10/9 Bungan Street)
Mona Vale NSW 2103

Sales and General Enquiries

Phone: (02) 9997 4810 or 1800 997 810

Fax: (02) 9979 9310

sales@chitravelinsurance.com.au

www.chitravelinsurance.com.au

Claims Enquiries

Phone: 1300 654 811 (within Australia)

CHI Travel Insurance Medical Assessment Line

Phone: (02) 9998 7870 or 1800 671 826

24 Hour Emergency Assistance call

Allianz Global Assistance

+61 7 3305 7499 (reverse charge from overseas)

1800 010 075 (within Australia)

Authorised Representative's Details

Name/Company :

ABN (if applicable) :

AR Number :

Agent Stamp :

This insurance is issued and managed by

AGA Assistance Australia Pty Ltd, trading as Allianz Global Assistance

ABN 52 097 227 177

AFS Licence 245631

74 High Street, Toowong QLD 4066

This insurance is underwritten by

Allianz Australia Insurance Limited

ABN 15 000 122 850

AFS Licence 234708

of 2 Market Street, Sydney NSW 2000

CHI Travel Insurance Pty Ltd

ABN 70 131 684 636

AR Number 327036

is an authorised representative of Allianz Global Assistance