Endorsement of “COVID-19 Extension”

The HK Express Travel Insurance has been amended to address certain situations pertaining to COVID-19. This endorsement addresses what an Insured Person is and is not covered for under the "COVID-19 Extension".

This endorsement will attach to and form part of the Insured Person’s policy and is subject to all the terms, conditions and exclusions of the policy except as they are specifically modified by this endorsement.


If an Insured Person incurs losses arising from being diagnosed with COVID-19 during the Period of Insurance, The Company will extend covering the benefits up to the Sum Insured as stated in the table below.

<table>
<thead>
<tr>
<th>Benefits</th>
<th>Sum Insured</th>
<th>HK$</th>
</tr>
</thead>
<tbody>
<tr>
<td>B. Medical Expenses</td>
<td></td>
<td></td>
</tr>
<tr>
<td>B.(a) Medical Expenses</td>
<td>Sum Insured</td>
<td>500,000</td>
</tr>
<tr>
<td>B.(b) Maximum Sum Insured for Sickness Follow-up Medical Expenses</td>
<td>Sum Insured</td>
<td>75,000</td>
</tr>
<tr>
<td>B.(b)(i) Maximum amount for Chinese Medicine Practitioner</td>
<td>Sum Insured</td>
<td>1,500</td>
</tr>
<tr>
<td>B.(b)(ii) Daily maximum amount for Chinese Medicine Practitioner</td>
<td>150</td>
<td></td>
</tr>
<tr>
<td>C. Chubb Assistance – 24-Hour Worldwide Assistance Services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>C.(a) Emergency Medical Evacuation and/or Repatriation</td>
<td>Sum Insured</td>
<td>Unlimited</td>
</tr>
<tr>
<td>C.(b) Return of Mortal Remains</td>
<td>Sum Insured</td>
<td>Unlimited</td>
</tr>
<tr>
<td>C.(c) Compassionate Visit</td>
<td></td>
<td></td>
</tr>
<tr>
<td>C.(c)(i) Daily maximum amount for hotel accommodation expenses</td>
<td>Sum Insured</td>
<td>1,950</td>
</tr>
<tr>
<td>C.(d) Child Escort</td>
<td>Sum Insured</td>
<td>30,000</td>
</tr>
<tr>
<td>C.(e) Deposit Guarantee for Hospital Admission</td>
<td>Sum Insured</td>
<td>39,000</td>
</tr>
<tr>
<td>C.(f) Chubb Assistance – Twenty Four (24) Hour Telephone Hotline And Referral Services</td>
<td>Applicable</td>
<td></td>
</tr>
<tr>
<td>D. Hospital Cash</td>
<td></td>
<td></td>
</tr>
<tr>
<td>D.(a) Maximum amount</td>
<td>Sum Insured</td>
<td>5,000</td>
</tr>
<tr>
<td>D.(b) Maximum daily benefit</td>
<td>500</td>
<td></td>
</tr>
<tr>
<td>F. Hospital Confinement or Compulsory Quarantine Cash Allowance Due To Infectious Disease</td>
<td></td>
<td></td>
</tr>
<tr>
<td>F.(a) Maximum amount</td>
<td>Sum Insured</td>
<td>3,000</td>
</tr>
<tr>
<td>F.(b) Maximum daily benefit</td>
<td>300</td>
<td></td>
</tr>
<tr>
<td>I. Trip Cancellation</td>
<td>Sum Insured</td>
<td>5,000</td>
</tr>
<tr>
<td>J. Trip Curtailment</td>
<td>Sum Insured</td>
<td>5,000</td>
</tr>
<tr>
<td>N. Compassionate Death Cash</td>
<td>Sum Insured</td>
<td>3,000</td>
</tr>
</tbody>
</table>

The above Sum Insured of applicable benefit sections under “COVID-19 Extension” shall be deducted from the Sum Insured of the relevant benefit section under “Part I Schedule of Benefits” of the main policy of HK Express Travel Insurance (Round Trip Plan - Standard). The maximum amount payable under each benefit of this policy remains unchanged.

Definition of Words under “COVID-19 Extension”:

COVID-19 means the strain of Novel Coronavirus 2019 classified in February 2020 by the World Health Organisation as “Coronavirus Disease 2019 (COVID-19)” or any mutation or variation thereof or any related strain, contracted and commencing whilst this Policy is in force and results, directly and independently of all other such causes.

Special Conditions to “COVID-19 Extension”:

“COVID-19 Extension” does not apply to any cruise journey. The Company will not cover any losses arising from directly or indirectly, relating to or in any way connected to any cruise journey taken by an Insured Person, an Immediate Family Member, intended Travel Companion.

Except as specified above, all other benefits under The HK Express Travel Insurance does not cover and the Company will not (under any sections) pay for claims of any kind directly or indirectly arising from, relating to or in any way connected with COVID-19 and/or its outbreak.
HK Express 旅遊保險計劃已因應新型冠狀病毒病 (COVID-19) 部分情況作出修訂。本批註說明受保人在「COVID-19 延伸保障」下，包括及不包括的保障範圍。

本批註將附加至受保人的保單並為保單中之一部分。除了本批註明確修改的保單條文、條款及不保事項外，本批註受保單的全部條文、條款及不保事項約束。

「COVID-19 延伸保障」保障計劃 (來回程計劃 - 標準):

假若受保人在該受保期間因確診感染 COVID-19 而引致損失，本公司將按照下表延伸保障及保額作出賠償。

<table>
<thead>
<tr>
<th>保障</th>
<th>港幣</th>
</tr>
</thead>
<tbody>
<tr>
<td>B. 醫療費用</td>
<td></td>
</tr>
<tr>
<td>B. (a) 醫療費用</td>
<td>保額 500,000</td>
</tr>
<tr>
<td>B. (b) 覆診醫療費用</td>
<td>保額 75,000</td>
</tr>
<tr>
<td>B. (b)(i) 中醫最高限額</td>
<td>保額 1,500</td>
</tr>
<tr>
<td>B. (b)(ii) 中醫每日最高限額</td>
<td>保額 150</td>
</tr>
<tr>
<td>C. Chubb Assistance – 24 小時環球支援服務</td>
<td></td>
</tr>
<tr>
<td>C. (a) 緊急醫療運送及/或運返</td>
<td>保額 不設上限</td>
</tr>
<tr>
<td>C. (b) 遺體運返</td>
<td>保額 不設上限</td>
</tr>
<tr>
<td>C. (c) 親友探望</td>
<td></td>
</tr>
<tr>
<td>C. (c)(i) 酒店住宿費用每日最高限額</td>
<td>保額 1,950</td>
</tr>
<tr>
<td>C. (d) 小童護送</td>
<td>保額 30,000</td>
</tr>
<tr>
<td>C. (e) 入院保證金</td>
<td>保額 39,000</td>
</tr>
<tr>
<td>C. (f) Chubb Assistance – 二十四(24)小時電話熱線及轉介服務</td>
<td>適用</td>
</tr>
<tr>
<td>D. 住院現金</td>
<td></td>
</tr>
<tr>
<td>D. (a) 住院現金最高限額</td>
<td>保額 5,000</td>
</tr>
<tr>
<td>D. (b) 住院現金每日最高限額</td>
<td>保額 500</td>
</tr>
<tr>
<td>F. 傳染病引致的醫院住院或強制隔離現金津貼</td>
<td></td>
</tr>
<tr>
<td>F. (a) 最高限額</td>
<td>保額 3,000</td>
</tr>
<tr>
<td>F. (b) 每日最高限額</td>
<td>保額 300</td>
</tr>
<tr>
<td>I. 取消旅程</td>
<td>保額 5,000</td>
</tr>
<tr>
<td>J. 縮短旅程</td>
<td>保額 5,000</td>
</tr>
<tr>
<td>N. 身故恩恤金</td>
<td>保額 3,000</td>
</tr>
</tbody>
</table>

上述「COVID-19 延伸保障」保障計劃所列的適用保障章節之保額將從主保單 HK Express 旅遊保險計劃「第一部分 — 保障計劃 (來回程計劃-標準)」下所列的相關保障章節之保額中扣除。本保單各項保障的最高應付金額維持不變。

「COVID-19 延伸保障」之詞彙釋義:


「COVID-19 延伸保障」之特別條款:「COVID-19 延伸保障」不適用於任何郵輪旅程。本公司將不承保因受保人、直系家庭成員、擬定同行伙伴參與任何郵輪旅程而直接或間接引致的、與之相關的或以任何方式相關的任何損失。

除了本批註以上列明，HK Express 旅遊保險計劃之所有其他章節不保障任何由 COVID-19 及/或其爆發直接或間接引起或相關的損失，及本公司不會支付任何與其相關之賠償。
HK Express Travel Insurance (Round Trip Plan-Standard)
HK Express 旅遊保險計劃（來回程計劃-標準）

Policy Wording
保單條款
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聯絡我們 ................................................................................................ 38
In consideration of the payment of a premium to The Company and subject to the terms and conditions of this policy, The Company agrees to provide cover in the manner and to the extent set out in this policy.

Please Read This Policy.  
If this policy contains incorrect information, please return it to The Company immediately for correction.

Part I – Schedule of Benefits (Round Trip Plan – Standard)

<table>
<thead>
<tr>
<th>Benefits</th>
<th>HK$</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A. Personal Accident</strong></td>
<td></td>
</tr>
<tr>
<td>(a) Maximum amount</td>
<td>Sum Insured 300,000</td>
</tr>
<tr>
<td><strong>B. Medical Expenses</strong></td>
<td></td>
</tr>
<tr>
<td>(a) Medical Expenses</td>
<td>Sum Insured 500,000</td>
</tr>
<tr>
<td>(b) Follow-up Medical Expenses</td>
<td>Sum Insured 75,000</td>
</tr>
<tr>
<td>(b)(i) Maximum amount for Chinese Medicine Practitioner</td>
<td>Sum Insured 1,500</td>
</tr>
<tr>
<td>(b)(ii) Daily maximum amount for Chinese Medicine Practitioner</td>
<td>150</td>
</tr>
<tr>
<td><strong>C. Chubb Assistance – 24-Hour Worldwide Assistance Services</strong></td>
<td></td>
</tr>
<tr>
<td>(a) Emergency Medical Evacuation and/or Repatriation</td>
<td>Unlimited</td>
</tr>
<tr>
<td>(b) Return of Mortal Remains</td>
<td>Unlimited</td>
</tr>
<tr>
<td>(c) Compassionate Visit</td>
<td></td>
</tr>
<tr>
<td>(c)(i) Daily maximum amount for hotel accommodation expenses</td>
<td>Sum Insured 1,950</td>
</tr>
<tr>
<td>(d) Child Escort</td>
<td>Sum Insured 30,000</td>
</tr>
<tr>
<td>(e) Deposit Guarantee for Hospital Admission</td>
<td>Sum Insured 39,000</td>
</tr>
<tr>
<td>(f) Chubb Assistance – Twenty Four (24) Hour Telephone Hotline And Referral Services</td>
<td>Applicable</td>
</tr>
<tr>
<td><strong>D. Hospital Cash</strong></td>
<td></td>
</tr>
<tr>
<td>(a) Maximum amount</td>
<td>Sum Insured 5,000</td>
</tr>
<tr>
<td>(b) Maximum daily benefit</td>
<td>500</td>
</tr>
<tr>
<td><strong>E. Burns Benefit</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Sum Insured 100,000</td>
</tr>
<tr>
<td><strong>F. Hospital Confinement or Compulsory Quarantine Cash Allowance Due To Infectious Disease</strong></td>
<td></td>
</tr>
<tr>
<td>(a) Maximum amount</td>
<td>Sum Insured 3,000</td>
</tr>
<tr>
<td>(b) Maximum daily benefit</td>
<td>300</td>
</tr>
<tr>
<td><strong>G. Personal Property</strong></td>
<td></td>
</tr>
<tr>
<td>(a) Maximum amount</td>
<td>Sum Insured 6,000</td>
</tr>
<tr>
<td>(b) Maximum amount for each item / set / pair</td>
<td>Sum Insured 2,000</td>
</tr>
<tr>
<td>(c) Aggregate limit for all Cameras, Camcorders and their accessories and related equipment</td>
<td>4,000</td>
</tr>
<tr>
<td><strong>H. Loss Of Travel Documents</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Sum Insured 3,000</td>
</tr>
<tr>
<td><strong>I. Trip Cancellation</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Sum Insured 5,000</td>
</tr>
<tr>
<td><strong>J. Trip Curtailment</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Sum Insured 5,000</td>
</tr>
<tr>
<td><strong>K. Travel Delay</strong></td>
<td></td>
</tr>
<tr>
<td>(a) Maximum Benefit</td>
<td>Sum Insured 3,000</td>
</tr>
<tr>
<td>(b) Cash Benefit for each period of delay</td>
<td>Every 8 hour period of delay 300</td>
</tr>
<tr>
<td><strong>L. Baggage Delay</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Sum Insured 600</td>
</tr>
<tr>
<td><strong>M. Personal Liability</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Sum Insured 2,000,000</td>
</tr>
<tr>
<td><strong>N. Compassionate Death Cash</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Sum Insured 3,000</td>
</tr>
</tbody>
</table>

Customer Services Hotline: (852) 3191 6638  
24-Hour Worldwide Assistance Hotline: (852) 3723 3030

HK Express Travel Insurance (Round Trip Plan) Policy Wording, Hong Kong SAR. Published 06/2022.  
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Part II – Definition of Words

The following defined terms shall have the meaning set out as follows in this policy:

1. **A Third Degree Burn** means **Bodily Injury** sustained as a result of burn and diagnosed by a **Physician** in which the skin has been damaged or destroyed to its full depth and there is damage to the tissue beneath.

2. **Accident** or **Accidental** means a sudden, unforeseen and unexpected event happening by chance.

3. **Biological Agent** means any pathogenic (disease producing) micro-organism(s) and/or biologically produced toxin(s) (including genetically modified organisms and chemically synthesised toxin(s) which cause illness and/or death in humans, animals or plants.

4. **Bodily Injury** means physical injury caused solely and independently by an **Accident** and sustained during the **Period of Insurance**.

5. **Chinese Medicine Practitioner** means a person other than an **Insured Person** or an **Immediate Family Member** who is duly registered as a Chinese medicine practitioner according to the Chinese Medicine Ordinance (Cap. 549 of the Laws of Hong Kong).

6. **Chubb Assistance** or **Authorised Assistance Service Provider** means the independent service provider appointed by The Company to provide outside **Hong Kong** assistance services to **Insured Persons**.

7. **Camera** means the following personal goods, equipment or accessories belonging to an **Insured Person** taken on the **Journey** or acquired by an **Insured Person** during the **Journey**: camera body, photographic lens, flash, tripod. Any equipment or accessory with a telecommunications function will not be classified as “**Camera**” in this policy.

8. **Camcorder** means the following personal goods, equipment or accessories belonging to an **Insured Person** taken on the **Journey** or acquired by an **Insured Person** during the **Journey**: camcorder body, photographic lens, microphone, monitor, flash, tripod. Any equipment or accessory with a telecommunications function will not be classified as “**Camcorder**” in this policy.

9. **Chemical Agent** means any compound which, when suitably disseminated, produces incapacitating, damaging or lethal effects on people, animals, plants or material property.

10. **Compulsory Quarantine** means the **Insured Person** is being confined in an isolated ward of a **Hospital** or kept in an isolated site appointed by the government for at least one (1) full day and continuously stays in there until discharged from the quarantine.

11. **Confinement** or **Confined** means a continuous period of necessary confinement in a **Hospital** as a **Resident Inpatient** for which the **Hospital** makes a charge for room and board.

12. **Hospital** means a legally constituted establishment operated and licensed pursuant to the laws of the country in which it is located and which meets all of the following requirements:
   (a) Operates primarily for the reception and medical care and treatment of sick, ailing or injured persons on a **Resident Inpatient** basis; and
   (b) Admits a **Resident Inpatient** only under the supervision of one or more **Physicians**, at least one of whom is available for consultation at all times; and
   (c) Maintains organised facilities for medical diagnosis and treatment of **Resident Inpatients** and provides (where appropriate) facilities for major surgery within the confines of the establishment or in facilities controlled by the establishment; and
   (d) Provides full-time nursing service by and under the supervision of a staff of qualified nurses; and
   (e) Has an on-duty staff of at least one **Physician** and one qualified nurse at all times; and
   (f) **“Hospital”** shall not include the following:
      • a mental institution, an institution operating primarily for the treatment of psychiatric or psychological disease including sub-normality or the psychiatric department of a hospital; or
      • a place for the aged, a rest home or a place for drug addicts or alcoholics; or
      • a health hydro or nature cure clinic, a nursing or convalescent home, a special unit of a hospital used primarily as a place for drug addicts or alcoholics or as a nursing, convalescent, rehabilitation, extended-care facility or rest home.

13. **Hong Kong** means the Hong Kong Special Administrative Region of the People’s Republic of China.

14. **Hong Kong Express** means Hong Kong Express Airways Limited.

15. **Immediate Family Member** means an **Insured Person**’s spouse, parents, parents-in-law, grandparents, children, siblings, grandchildren or legal guardians.

16. **Infectious Disease** means any kind of infectious disease for which a pandemic alert is issued by the World Health Organisation.

17. **Insured Person** means the person or persons named in the **Policy Schedule** or subsequent endorsement(s) (if any).

18. **Journey** means the trip outside **Hong Kong** described in the **Policy Schedule**.
19. **Loss of Hearing** means total and irrecoverable loss of complete hearing in an ear in that the ear is beyond remedy by surgical or other treatment. This disability must have continued for at least twelve (12) consecutive months and it must be certified by a *Physician* that the disability will be total, continuous and **Permanent** for the remainder of the **Insured Person's** life.

20. **Loss of Limb** means total and irrecoverable loss of use or loss by physical separation at or above the wrist or ankle joint of a limb. This disability must have continued for at least twelve (12) consecutive months and it must be certified by a *Physician* that the disability will be total, continuous and **Permanent** for the remainder of the **Insured Person's** life.

21. **Loss of Sight** means total and irrecoverable loss of complete sight of an eye in that the eye is beyond remedy by surgical or other treatment. This disability must have continued for at least twelve (12) consecutive months and it must be certified by a *Physician* that the disability will be total, continuous and **Permanent** for the remainder of the **Insured Person's** life.

22. **Loss of Speech** means total and irrecoverable loss of speech beyond remedy by surgical or other treatment. This disability must have continued for at least twelve (12) consecutive months and it must be certified by a *Physician* that the disability will be total, continuous and **Permanent** for the remainder of the **Insured Person's** life.

23. **Medical Expenses** means all **Usual, Reasonable and Customary Medical Expenses** necessarily incurred by an **Insured Person** as a result of **Bodily Injury** sustained or **Sickness** contracted, for **Confinement**, surgical, medical, or other diagnostic or remedial treatment given or prescribed by a *Physician*, including employment of a qualified nurse, x-ray examination or the use of an ambulance as the result of an emergency.

24. **Nuclear, Chemical and Biological Terrorism** means the use of any nuclear weapon or device or the emission, discharge, dispersal, release or escape of any solid, liquid or gaseous **Chemical Agent** and/or **Biological Agent** during the **Journey** by any person or group(s) of persons, whether acting alone or on behalf of or in connection with any organisation(s) or government(s) committed for political, religious or ideological purposes or reasons including the intention to influence any government and/or put the public, or any section of the public, in fear.

25. **Period of Insurance** means the period described under the relevant plan in this policy as follows: For **Round Trip Plan** means, in relation to:

   (a) Section I - Trip Cancellation of this policy only, the period of insurance starts from the **Purchase Date** as specified in the **Policy Schedule** and ends at the commencement of the **Journey**; or

   (b) all other sections of this policy, the period of insurance starts at the time when an **Insured Person** arrives at the **Hong Kong** immigration control point to embark on a **Journey** and ends at the earliest of: (i) forty-five (45) days after the **Insured Person** embarked the Travel Period (inclusive of start date) as specified in the **Policy Schedule**; or (ii) the **Insured Person** having passed through **Hong Kong** immigration control point on his/her return; or (iii) after the Travel Period end date shown on the **Policy Schedule**.

26. **Permanent** means:

   (a) In relation to one or both limbs, loss of use lasting twelve (12) consecutive months from the date of **Accident** and being beyond hope of improvement or remedy by surgical or other treatment at the expiry of that period, or loss by physical separation at or above the wrist or ankle joint during the same period; or

   (b) In relation to any other type of loss, being beyond hope of improvement or remedy by surgical or other treatment at the end of twelve (12) consecutive months from the date of **Accident**.

27. **Permanent Total Disability** means disablement that results solely, directly or independently of all other causes from **Bodily Injury** and which occurs within one hundred eighty (180) days of the **Accident** in which such **Bodily Injury** was sustained, which, having lasted for a continuous and uninterrupted period of at least twelve (12) consecutive months, will, in all probability, entirely prevent the **Insured Person** from engaging in gainful employment of any and every kind for the remainder of his/her life and from which there is no hope of improvement.

28. **Personal Property** means personal goods belonging to an **Insured Person** taken on the **Journey** or acquired by an **Insured Person** during the **Journey**. **Personal Property** does not include: (1) jewelry (including but not limited to, for example crystals, earrings, necklaces, rings or brooches etc.) that is not being worn or carried by the **Insured Person** at the time of loss or damage, (2) any form of money, (3) any kind of document, (4) any kind of food or beverage, (5) antiques, (6) contracts, (7) bonds, (8) securities, (9) animals, (10) software, (11) mobile telecommunications device and accessories, and (12) means of transport and accessories (including but not limited to, for example cars, motorcycles, bicycles, boats, motors, scooters, etc).

29. **Physician** means a person other than an **Insured Person** or an **Immediate Family Member** who is a qualified medical practitioner licensed by the competent medical authorities of the jurisdiction in which treatment is provided and who, in providing treatment, practices within the scope of his or her licensing and training.

30. **Policy Schedule** means the document(s) which (i) allows each **Insured Person** to be identified by name, (ii) states the destination of the insured **Journey**, and (iii) indicates which plan (**Round Trip Plan - Standard** or **Round Trip Plan - FunFlex**) has been selected.

31. **Pre-existing Medical Condition** means any sickness or injury of which, in the six (6) consecutive months before the first day of the **Period of Insurance**, an **Insured Person**, **Immediate Family Member** or **Travel Companion** presented signs or symptoms, or for which, in the same period, an **Insured Person**, **Immediate Family Member** or **Travel Companion** was treated for the same condition, or **Physician** has certified that the condition is expected to recur. **Existing Medical Condition** and **Pre-existing Medical Condition** are protected trademarks of Chubb.
Travel Companion sought or received (or ought reasonably to have sought or received) medical treatment, consultation, prescribed drugs, advice or diagnosis by a Physician.

32. Principal Home means an Insured Person’s primary place of residence in Hong Kong.
33. Public Conveyance means any mechanically propelled carrier operated by a company or an individual licensed to carry passengers for hire.
34. Resident Inpatient means an Insured Person whose Confinement as a resident bed patient is necessary for the medical care, diagnosis and treatment of Bodily Injury or Sickness and not merely for any form of nursing, convalescence, rehabilitation, rest or extended-care.
35. Riot means the act of a group of people that disturb the public peace (whether in connection with a Strike or lock-out or not) and the action of any lawfully constituted governmental authority in suppressing or attempting to suppress any such disturbance or in minimising the consequences of such disturbance.
36. Schedule of Benefits means the schedule of benefits in Part I of this policy.
37. Sickness means illness or disease commencing during the Period of Insurance.
38. Strike means the wilful act of any striker or locked-out worker done in furtherance of a strike or in resistance to a lock-out or the action of any lawfully constituted authority in preventing any such act or in minimising the consequences of any such act.
39. Sum Insured means, in relation to each benefit available to an Insured Person under this policy, the maximum amount listed in the Schedule of Benefits or any endorsement(s) corresponding to that benefit.
40. The Company means Chubb Insurance Hong Kong Limited.
41. Travel Companion means a person who accompanies an Insured Person for the entire Journey, who is not an Immediate Family Member.
42. Usual, Reasonable and Customary Medical Expenses means charges for treatment, supplies or medical services medically necessary to treat an Insured Person’s condition and which do not exceed the usual level of charges for similar treatment, supplies or medical services in the locality where the charges are incurred. Charges that would not have been made if no insurance existed are excluded from this definition.

Part III – Description of Cover

Section A – Personal Accident

If an Insured Person sustains Bodily Injury during the Period of Insurance, as a direct and unavoidable result, suffers within twelve (12) consecutive months a loss of the type listed in the Loss Table in this Section A – Personal Accident, The Company will pay the percentage stated for that type of loss in the Loss Table in this Section A – Personal Accident of the Sum Insured stated in Section A(a) of the Schedule of Benefits.

Section A Loss Table:

<table>
<thead>
<tr>
<th>Category</th>
<th>Percentage of the Sum Insured</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Accidental death</td>
<td>100%</td>
</tr>
<tr>
<td>2. Permanent Total Disability</td>
<td>100%</td>
</tr>
<tr>
<td>3. Loss of Limb - all limbs</td>
<td>100%</td>
</tr>
<tr>
<td>4. Loss of Sight - both eyes</td>
<td>100%</td>
</tr>
<tr>
<td>5. Loss of Sight - one eye</td>
<td>100%</td>
</tr>
<tr>
<td>6. Loss of Limb - two limbs</td>
<td>100%</td>
</tr>
<tr>
<td>7. Loss of Limb - one limb</td>
<td>100%</td>
</tr>
<tr>
<td>8. Loss of Speech and Loss of Hearing</td>
<td>100%</td>
</tr>
<tr>
<td>9. Loss of Hearing - both ears</td>
<td>75%</td>
</tr>
<tr>
<td>10. Loss of Hearing - one ear</td>
<td>15%</td>
</tr>
</tbody>
</table>

Special Conditions to Section A:

1. Where an Insured Person suffers more than one type of loss listed in the Loss Table in this Section A – Personal Accident in the same Accident, The Company’s liability under this Section A – Personal Accident shall be limited to one payment for the type of loss which, of all the types of loss actually suffered, attracts the largest percentage stated in the Loss Table in this Section A – Personal Accident of the relevant Sum Insured stated in Section A of the Schedule of Benefits.

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2. **The Company**’s total liability under this Section A – Personal Accident for all **Accidents** involving the same **Insured Person** occurring during the **Period of Insurance** shall not exceed the relevant **Sum Insured**.

3. Where the use or enjoyment of an **Insured Person**’s limb or organ was partially impaired before an **Accident** occurred, **The Company** may, in its sole discretion and after considering a medical assessment by **The Company**’s appointed medical adviser of the extent to which any **Bodily Injury** was, in the medical adviser’s opinion, caused solely and independently by that **Accident**, pay such percentage of the relevant **Sum Insured** as it considers reasonable. No payment shall be made for a limb or organ which was totally unusable before an **Accident** occurred.

4. Exposure: If during the **Period of Insurance**, the **Insured Person** is exposed to the elements as a result of an **Accident** and within twelve (12) months of the **Accident** the **Insured Person** suffers any one type of loss listed in the Loss Table in this Section A – Personal Accident as a direct result of that exposure, the **Insured Person** will be deemed for the purpose of this policy to have suffered a **Bodily Injury** on the date of the **Accident**.

5. Disappearance: Where an **Insured Person**’s body has not been found within one (1) year of the date of the disappearance, sinking or wrecking of the means of transport being used by the **Insured Person** on the date of the disappearance, sinking or wrecking:
   (a) It will be presumed that the **Insured Person** suffered **Accidental** death resulting from **Bodily Injury** at the time of such disappearance, sinking or wrecking; and
   (b) Subject to receiving an undertaking, signed by the deceased **Insured Person**’s legal representatives, that if the presumption of **Accidental** death resulting from **Bodily Injury** is subsequently found to be wrong, any amount paid by **The Company** under this Section A – Personal Accident will be immediately refunded to **The Company**. **The Company** will pay to the legal representatives of the deceased **Insured Person** the percentage stated for **Accidental** death in the Loss Table in this Section A – Personal Accident of the relevant **Sum Insured** stated in Section A of the **Schedule of Benefits**.

**Exclusion to Section A:**
This Section A – Personal Accident does not cover:

1. **Sickness**, disease or bacterial infection.

**Section B – Medical Expenses**

(a) **Medical Expenses:**
   If an **Insured Person** incurs **Medical Expenses** during the **Period of Insurance** arising from **Bodily Injury** or **Sickness**, **The Company** will reimburse the **Insured Person** for those **Medical Expenses** up to the **Sum Insured** stated in Section B(a) of the **Schedule of Benefits**.

(b) **Follow-up Medical Expenses:**
   If an **Insured Person** incurs **Medical Expenses** outside **Hong Kong** during a **Journey** arising from **Bodily Injury** or **Sickness** and, after returning to **Hong Kong**, that **Insured Person** still requires treatment in **Hong Kong** for the same **Bodily Injury** or **Sickness** as given or prescribed by a **Physician** and/or **Chinese Medicine Practitioner**, **The Company** will continue to reimburse the **Insured Person** for:
   (i) Reasonable medical expenses incurred in **Hong Kong** for the purpose of Chinese medical treatment and charged by a **Chinese Medicine Practitioner**; or
   (ii) Any **Medical Expenses** incurred in **Hong Kong** other than as set out at Section B (b)(i) – **Medical Expenses** above; up to ninety (90) days after the **Insured Person**’s return to **Hong Kong** or until the **Sum Insured** stated in Section B(b) of the **Schedule of Benefits** has been exhausted, whichever comes first.

**Special Conditions to Section B:**

1. The **Authorised Assistance Service Provider** must be notified promptly if the **Insured Person** is admitted or anticipates admission to **Hospital** as a **Resident Inpatient** during the **Period of Insurance** outside **Hong Kong**. Failure to give the notice required by this condition precedent will result in **The Company** having no liability under this policy for those **Medical Expenses**.

2. **The Company**’s liability under Section B(a) – **Medical Expenses** for all **Medical Expenses** incurred during the **Period of Insurance** shall not exceed the **Sum Insured** stated in Section B(a) of the **Schedule of Benefits**.

3. **The Company**’s liability under Section B(b) – **Medical Expenses** for each and every expense incurred shall not exceed the amount stated in Section B(b) of the **Schedule of Benefits**.

4. **The Company**’s liability under Section B(b)(i) – **Medical Expenses** for all expenses charged by **Chinese Medicine Practitioner** shall not exceed the amount stated in Section B(b)(i) of the **Schedule of Benefits**. The maximum daily amount incurred by **Chinese Medicine Practitioner** shall be the amount stated in Section B(b)(ii) of the **Schedule of Benefits**.

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The Company’s liability of Medical Expenses (including medical expenses charged by Chinese Medicine Practitioner) incurred in Hong Kong shall not exceed the amount stated in Section B(b) of the Schedule of Benefits.

The Company’s total liability under this Section B – Medical Expenses for all Medical Expenses and all medical expenses charged by Chinese Medicine Practitioner shall not exceed the Sum Insured stated in Section B(a) of the Schedule of Benefits.

Exclusions to Section B:
This Section B – Medical Expenses does not cover:
1. Any expense included or contemplated in the cost of a Journey at the time it was paid for.
2. Surgery or medical treatment which, in the opinion of the Physician attending the Insured Person, can reasonably be delayed until the Insured Person returns to Hong Kong.
3. Any expense incurred after an Insured Person has failed, within a reasonable period, to follow a Physician’s advice to return to Hong Kong to continue treatment for Bodily Injury suffered or Sickness contracted outside Hong Kong.
4. Any expense incurred during a Journey after an Insured Person has been advised by a Physician prior to the departure of the Journey that he or she is unfit to travel.
5. Any expenses incurred under Section B(a) – Medical Expenses after twelve (12) months from the date the first expenses were incurred.
6. Any follow up expenses incurred under Section B(b) – Medical Expenses after ninety (90) days from the date the Insured Person returned to Hong Kong.
7. Health check-ups or any investigation(s) not directly related to admission diagnosis, Bodily Injury or Sickness or any treatment or investigation which is not medically necessary.
8. The cost of crutches, walking frames, orthopaedic braces and supports, cervical collars, wheelchairs, prostheses, contact lenses, spectacles, hearing aids, dentures and other medical equipment or optical treatment.

Section C – Chubb Assistance – 24-Hour Worldwide Assistance Services

(a) Emergency Medical Evacuation and/or Repatriation:
Where a Physician, designated by an Authorised Assistance Service Provider, certifies that Bodily Injury or Sickness renders an Insured Person unfit to travel or continue with their Journey or is a danger to their life or health; and the necessary medical treatment is not available, either at the nearest Hospital where the Insured Person was transported to or in the immediate vicinity thereof, after suffering the Bodily Injury or Sickness, The Company may, based on the advice of that Physician that the Insured Person is medically fit to be evacuated, determine in its sole discretion, that the Insured Person, should be evacuated to another location for the necessary medical treatment.

The Authorised Assistance Service Provider shall arrange for the evacuation within a reasonable timeframe and utilise the best suited means, based on the medical severity of the Insured Person’s condition for the transport of the Insured Person, including but not limited to, air ambulance, surface ambulance, regular air transport, railroad or any other appropriate means. All decisions as to the means of transport and the final destination will be made by Authorised Assistance Service Provider, and will be based solely upon medical necessity. The Insured Person may, in appropriate circumstances, be returned to Hong Kong.

The Company will pay the actual cost of the Insured Person’s emergency medical evacuation and/or repatriation and associated medical services and medical supplies directly to Authorised Assistance Service Provider.

(b) Return of Mortal Remains:
Upon the death of an Insured Person as a direct and unavoidable result of Bodily Injury or Sickness, The Company will pay the actual cost for transporting the Insured Person’s mortal remains from the place of death to Hong Kong, or the cost of local burial at the place of death as approved by the Authorised Assistance Service Provider.

(c) Compassionate Visit:
If a Physician certifies that Bodily Injury or Sickness renders an Insured Person and Insured Person being Confined in a Hospital outside Hong Kong for over three (3) consecutive days or suffers death during Journey, The Company will pay (i) the cost of one (1) economy class round trip ticket for one (1) person to visit the Insured Person outside Hong Kong, and (ii) the cost of one (1) ordinary room accommodation in any reasonable hotel outside Hong Kong, excluding the cost of drinks, meals and any other room services, for a maximum period of five (5) consecutive nights, up to the Sum Insured stated in Section C(c)(i) of the Schedule of Benefits.

(d) Child Escort:
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Where:

(i) An **Insured Person** is **Confined** as a direct and unavoidable result of **Bodily Injury** or **Sickness** which a **Physician** certifies as either rendering that **Insured Person** unfit to travel or continue with his/her **Journey** or as being a danger to his/her life or health or suffers death during **Journey**; and

(ii) That **Insured Person** is accompanied by a child who is an **Insured Person** and was at or under seventeen (17) years old on the first day of the **Period of Insurance**; and

(iii) That child is at risk of being left unattended as a result of the **Insured Person**’s **Confinement** for over three (3) consecutive days or the **Insured Person**’s death.

**The Company** will arrange and pay up to the **Sum Insured** stated in Section C(d) of the **Schedule of Benefits**, for an economy class one-way ticket, together with escort services, for that child to be escorted back to Hong Kong.

(e) **Deposit Guarantee for Hospital Admission:**

Upon admission to a **Hospital**, the **Authorised Assistance Service Provider** provides a guarantee for admission up to the **Sum Insured** stated in Section C(e) of the **Schedule of Benefits** in respect of any one (1) **Insured Person**. Such deposit shall be fully refunded to the **Authorised Assistance Service Provider** and is borne solely by the **Insured Person** unless otherwise covered under Section B - Medical Expenses.

(f) **Chubb Assistance – Twenty Four (24) Hour Telephone Hotline And Referral Services:** The services are provided by way of referral and arrangement only and all expenses incurred are to be borne by the **Insured Person**:

- Inoculation and Visa Requirement Information services
- **Embassy Referral**
- Interpreter Referral
- Loss of Baggage Assistance
- Loss of Travel Document Assistance
- Telephone Medical Advice
- Medical Service Provider Referral
- Monitoring of Medical Condition when Hospitalised
- Arrangement of Appointments with Doctors
- Arrangement of Hospital Admission

For full details on this service, please refer to the telephone hotline and referral service information provided by **Chubb Assistance**. If you have any queries on this telephone hotline and referral service, please telephone **Chubb Assistance** on (852) 3723 3030.

**Special Conditions to Section C:**

1. Services under Section C – Chubb Assistance – 24 Hour Worldwide Assistance Services are provided by the **Authorised Assistance Service Provider**. **The Company** or the **Authorised Assistance Service Provider** must be promptly notified of the occurrence of any event which may give rise to a potential claim under Section C(a)–(e) – Chubb Assistance – 24 Hour Worldwide Assistance Services. Failure to give the notice required by this condition precedent could result in **The Company** having no liability under this Section C – Chubb Assistance – 24 Hour Worldwide Assistance Services of the policy.

2. The arrangements for, means and final destination of emergency medical evacuation and/or repatriation will be decided by the **Authorised Assistance Service Provider** and will be based entirely upon medical necessity.

3. Upon payment being made under this Section C – Chubb Assistance – 24 Hour Worldwide Assistance Services, **The Company** shall be entitled to any monies refundable from an original return airfare.

**Exclusions to Section C:**

This Section C – Chubb Assistance – 24 Hour Worldwide Assistance Services does not cover any:

1. Expenses included or contemplated in the cost of a **Journey** at the time it was paid for.

2. Expenses incurred during a **Journey** after an **Insured Person** has been advised by a **Physician** prior to the departure of the **Journey** that he or she is unfit to travel.

3. Expenses incurred for services provided by another party for which the **Insured Person** is not liable to pay.

4. Expenses for a service not approved and arranged by an **Authorised Assistance Service Provider**.

5. Treatment performed or ordered by a person who is not a **Physician**.

6. Expenses incurred in relation to treatment that can be reasonably delayed until the **Insured Person** returns to Hong Kong.

**Section D – Hospital Cash**

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Upon the **Confinement** in a **Hospital** outside **Hong Kong** of an **Insured Person** as a direct and unavoidable result of **Bodily Injury** or **Sickness**, **The Company** will pay an **Insured Person** a daily benefit of the amount stated in Section D(b) of the **Schedule of Benefits** for each day of **Confinement**, up to the **Sum Insured** stated in Section D(a) of the **Schedule of Benefits**.

**Special Conditions to Section D:**
1. Payment of benefits under this Section D – Hospital Cash shall only be made after the **Confinement** ends.
2. Payment of benefits under this Section D – Hospital Cash shall be in addition to those payable under Section B – Medical Expenses.

**Exclusion to Section D:**
This Section D – Hospital Cash does not cover:
1. Loss claimed under Section F – Hospital Confinement or Compulsory Quarantine Cash Allowance due to Infectious Disease for the same incident.

**Section E – Burns Benefit**

If an **Insured Person** who sustains **Bodily Injury** is diagnosed by a **Physician** to have suffered from **A Third Degree Burn**, **The Company** will pay the percentage stated for the degree of burn in the Burns Table in this Section E – Burns Benefit of the relevant **Sum Insured** stated in Section E of the **Schedule of Benefits**.

**Burns Table**

<table>
<thead>
<tr>
<th>Burns Table</th>
<th>Percentage of Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>A Third Degree Burn on</td>
<td></td>
</tr>
<tr>
<td><strong>Head:</strong></td>
<td></td>
</tr>
<tr>
<td>Equal to or greater than 12%</td>
<td>100%</td>
</tr>
<tr>
<td>Equal to or greater than 8% but less than 12%</td>
<td>75%</td>
</tr>
<tr>
<td>Equal to or greater than 5% but less than 8%</td>
<td>50%</td>
</tr>
<tr>
<td>Equal to or greater than 2% but less than 5%</td>
<td>25%</td>
</tr>
<tr>
<td><strong>Body:</strong></td>
<td></td>
</tr>
<tr>
<td>Equal to or greater than 20%</td>
<td>100%</td>
</tr>
<tr>
<td>Equal to or greater than 15% but less than 20%</td>
<td>75%</td>
</tr>
<tr>
<td>Equal to or greater than 10% but less than 15%</td>
<td>50%</td>
</tr>
</tbody>
</table>

**Special Conditions to Section E:**
1. Where an **Insured Person** suffers more than one type of burn listed in the Burns Table in this Section E – Burns Benefit in the same **Accident**, **The Company**'s liability under this Section E – Burns Benefit shall be limited to a single payment for the type of burn which, of all the types of burn actually suffered, attracts the largest percentage stated in the Burns Table in this Section E – Burns Benefit of the **Sum Insured** stated in Section E of the **Schedule of Benefits**.
2. Payment of benefits under this Section E – Burns Benefit shall be in addition to those payable under Section A– **Personal Accident**.

**Section F – Hospital Confinement or Compulsory Quarantine Cash Allowance due to Infectious Disease**

If the **Insured Person** is **Confined** in a **Hospital** outside **Hong Kong** due to **Infectious Disease** during the **Period of Insurance**, **The Company** will pay an **Insured Person** a daily benefit of the amount stated in Section F(b) of the **Schedule of Benefits** for each day of **Confinement**, up to the **Sum Insured** stated in Section F(a) of the **Schedule of Benefits**.

In the event that the **Insured Person** is suspected or confirmed to have contracted **Infectious Disease** during the **Period of Insurance** and results in **Compulsory Quarantine** by the local government during the **Journey** or by the **Hong Kong** Government within three (3) days upon completion of the **Journey** and returning to **Hong Kong**, **The Company** will pay the **Insured Person** a daily quarantine allowance of the amount stated in Section F(b) of the **Schedule of Benefits** for each day of such **Compulsory Quarantine**, up to the **Sum Insured** stated in Section F(a) of the **Schedule of Benefits**.

**Special Conditions to Section F:**
1. Regardless of the number of days of Confinement or Compulsory Quarantine due to Infectious Disease, The Company’s liability under Section F shall not exceed the Sum Insured stated in Section F(a) of the Schedule of Benefits.

Exclusion to Section F:
This Section F – Hospital Confinement or Compulsory Quarantine Cash Allowance due to Infectious Disease does not cover:
1. Any home quarantine.
2. If the planned destination(s) has been declared as an infected area on or before the Purchase Date as specified in the Policy Schedule.
3. Loss claimed under Section D – Hospital Cash for the same incident.

Section G – Personal Property

Subject to a reduction or allowance for physical deterioration, depreciation or obsolescence, The Company will indemnify, at its absolute discretion, reinstate, repair or replace Personal Property lost, stolen or damaged during the Period of Insurance, up to the Sum Insured stated in Section G(a) of the Schedule of Benefits.

Special Conditions to Section G:
1. The local police or equivalent local law enforcement officials must be notified within twenty-four (24) hours of the occurrence of any Personal Property lost, stolen or damaged by the wilful act of a third party and which may give rise to a claim under this Section G – Personal Property. Failure to give the notice required by this condition precedent will result in The Company having no liability under this Section G – Personal Property.
2. Any claim for Personal Property lost, stolen or damaged by the wilful act of a third party under this Section G – Personal Property must be accompanied by written proof of loss having been reported to the police or equivalent local law enforcement officials. Failure to provide written proof of the notice required by this condition precedent will result in The Company having no liability under this Section G – Personal Property.
3. If loss, theft or damage occurs in transit, the Public Conveyance carrier must be promptly notified of the loss or damage within twenty-four (24) hours of the discovery of the loss or damage. Failure to give the notice required by this condition precedent will result in The Company having no liability under this Section G – Personal Property of the policy.
4. Any claim for Personal Property lost, stolen or damaged in transit must be accompanied by written proof of loss having been reported to the responsible Public Conveyance carrier. Failure to provide written proof of the notice required by this condition precedent will result in The Company having no liability under this Section G – Personal Property.
5. The Company’s maximum liability for loss or theft of, or damage to, all Cameras and Camcorders during the Period of Insurance will be restricted to the amount stated in Section G(c) of the Schedule of Benefits.
6. The Company’s maximum liability for loss or theft of, or damage to, each item of Personal Property during the Period of Insurance will be restricted to the amount stated in Section G(b) of the Schedule of Benefits.
7. Where any item of lost, stolen or damaged Personal Property forms part of a pair or set, The Company’s maximum liability for that item and that pair or set will be restricted to the amount stated in Section G(b) of the Schedule of Benefits.
8. The Company’s total liability under this Section G – Personal Property for all loss, theft or damage in connection with Personal Property during the Period of Insurance shall not exceed the Sum Insured stated in Section G(a) of the Schedule of Benefits.
9. Upon any payment being made under this Section G – Personal Property, The Company shall be entitled to take and retain the benefit and value of any recovered or damaged Personal Property and to deal with salvage at its absolute discretion.

Exclusions to Section G:
This Section G – Personal Property does not cover:
1. Loss, theft or damage arising from an Insured Person’s negligence including, but not limited to, leaving Personal Property unattended.
2. Any unexplained loss.
3. Any loss or damage to Personal Property which was left unattended in a vehicle (except locked in the trunk) or Public Conveyance or in other public places.
4. Loss of, or damage to, any **Personal Property** due to moth, vermin, wear and tear, atmospheric or climatic conditions, gradual deterioration, mechanical or electrical failure, any process of cleaning, restoring, repairing, alteration, confiscation or detention or destruction by customs or any other authority.

5. Any cosmetic damage or scratching to any **Insured Person**’s suitcase which does not affect its functionality.

6. Any hired or leased equipment.

7. Any loss or damage to, or any **Personal Property** forwarded in advance of a **Journey** or separately mailed or shipped in a **Public Conveyance** other than a **Public Conveyance** carrying the **Insured Person** at the same time.

8. Breakage and damage of fragile article.

9. Any amount/loss which is payable to, refundable to, or recoverable by, an **Insured Person** from any other source of indemnity, reimbursement or compensation.

10. Loss claimed under Section L – **Baggage Delay** for the same incident.

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**Section H – Loss of Travel Documents**

**The Company** will reimburse an **Insured Person** up to the **Sum Insured** stated in Section H of the **Schedule of Benefits** for the replacement cost of travel documents necessary for immigration clearance and/or travel tickets which are lost due to robbery, burglary or theft during the **Period of Insurance**, the absence of which would otherwise lead to delay of the **Journey**.

**Special Conditions to Section H:**

1. The local police or equivalent local law enforcement officials must be notified within twenty-four (24) hours of the occurrence of any event which may give rise to a claim under this Section H – Loss of Travel Documents. Failure to give the notice required by this condition precedent will result in **The Company** having no liability under this Section H – Loss of Travel Documents.

2. Any claim under this Section H – Loss of Travel Documents must be accompanied by written proof of loss having been reported to the police or equivalent local law enforcement officials. Failure to provide written proof of the notice required by this condition precedent will result in **The Company** having no liability under this Section H – Loss of Travel Documents.

3. **The Company**’s total liability under this Section H – Loss of Travel Documents for all loss during the **Period of Insurance** shall not exceed the **Sum Insured** stated in Section H of the **Schedule of Benefits**.

**Exclusion to Section H:**

This Section H – Loss of Travel Documents does not cover:

1. Loss arising from an **Insured Person**’s negligence including, but not limited to, leaving travel documents necessary for immigration clearance and/or travel tickets unattended.

---

**Section I – Trip Cancellation**

If after this policy has been purchased, in the event of:

(a) The sudden and unexpected death of an **Insured Person**, an **Immediate Family Member**, or intended **Travel Companion** occurring within ninety (90) days prior to the date the **Journey** is scheduled to begin; or

(b) The **Bodily Injury or Sickness** of an **Insured Person** or an intended **Travel Companion** occurring within ninety (90) days prior to the date the **Journey** is scheduled to begin; or

(c) The **Bodily Injury or Sickness** of an **Immediate Family Member** occurring within ninety (90) days prior to the date the **Journey** is scheduled to begin; or

(d) The unexpected **Compulsory Quarantine** of an **Insured Person** beginning after this policy has been purchased and continuing within ninety (90) days prior to the date the **Journey** is scheduled to begin; or

(e) The jury service of an **Insured Person** or an **Insured Person** being the subject of a witness summons, notice of which was received by that **Insured Person** after this policy has been purchased and continuing within ninety (90) days prior to the date the **Journey** is scheduled to begin; or

(f) Serious damage to the **Insured Person**’s **Principal Home** from fire, flood or burglary occurring within one (1) week prior to the date the **Journey** is scheduled to begin and which reasonably requires the **Insured Person**’s presence in **Hong Kong** on the scheduled departure date of the **Journey**;

resulting in cancellation of the **Journey**, **The Company** will reimburse, up to the **Sum Insured** stated in Section I of the **Schedule of Benefits**, the **Insured Person**’s loss of **Hong Kong Express** ticket fare paid in advance and forfeited by the **Insured Person**.

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Special Conditions to Section I:

1. Where a Journey is cancelled as a result of Bodily Injury or Sickness of an Insured Person or an intended Travel Companion, that Bodily Injury or Sickness must be certified by a Physician as rendering that Insured Person or intended Travel Companion unfit to travel or as being a danger to their life or health.

2. Where a Journey is cancelled as a result of Bodily Injury or Sickness of an Immediate Family Member, that Bodily Injury or Sickness must be certified by a Physician as being a danger to the life of that Immediate Family Member.

3. Failure to obtain the certifications required by this condition precedent will result in The Company having no liability under this Section I – Trip Cancellation for the Insured Person’s loss of Hong Kong Express ticket fare paid in advance and forfeited.

4. Where an Insured Person is covered under more than any one item above, The Company’s liability under this Section I – Trip Cancellation shall be limited to the one which attracts the largest compensation under Section I in the Schedule of Benefits.

5. The Company’s total liability under this Section I – Trip Cancellation for all reimbursement under this Section I – Trip Cancellation shall not exceed the Sum Insured stated in Section I of the Schedule of Benefits.

Exclusions to Section I:

This Section I – Trip Cancellation does not cover any amount/loss:

1. Payable to, refundable to, or recoverable by, an Insured Person from any other source of indemnity, reimbursement or compensation.

2. An Insured Person is not legally obligated to pay.

3. Cancelled as a direct or indirect result of a prohibition or regulation issued by any national, regional or local government.

4. Cancelled due to the negligence, misconduct or insolvency of the travel agent through whom the Journey was booked.

5. Cancelled due to the inability of a tour operator or wholesaler to complete a group tour due to a deficiency in the number of persons.

6. Cancelled as a direct or indirect result of financial hardship experienced by an Insured Person, changes in an Insured Person’s circumstances or contractual obligations or an Insured Person’s general disinclination to proceed with the Journey.

7. Arising from a condition which, at the time of booking a Journey, existed or might reasonably have been anticipated as being likely to result in the Journey being cancelled.

8. Claimed under Section B – Medical Expenses arising from the same cause or event.

Section J – Trip Curtailment

In the event that a Journey is curtailed because an Insured Person must return directly to Hong Kong following:

(i) His/her death, Bodily Injury or Sickness; or

(ii) The sudden and unexpected death, Bodily Injury or Sickness of an Immediate Family Member or Travel Companion.

The Company will reimburse the Insured Person for the unused Hong Kong Express ticket fare paid in advance and forfeited for the Journey up to the Sum Insured stated in Section J of the Schedule of Benefits.

Special Conditions to Section J:

1. Where a Journey is curtailed as a result of Bodily Injury or Sickness of an Insured Person or of a Travel Companion, that Bodily Injury or Sickness must be certified by a Physician as rendering that Insured Person or Travel Companion unfit to travel or as being a danger to their life or health.

2. Where a Journey is curtailed as a result of Bodily Injury or Sickness of an Immediate Family Member, that Bodily Injury or Sickness must be certified by a Physician as being a danger to the life of that Immediate Family Member.

3. Failure to obtain the certifications required by this condition precedent will result in The Company having no liability for the Insured Person’s loss which may otherwise have been covered by this Section J – Trip Curtailment.

Exclusions to Section J:

This Section J – Trip Curtailment does not cover any amount/loss:

1. Which is payable to, refundable to, or recoverable by, an Insured Person from any other source of indemnity, reimbursement or compensation.

2. Incurred as a direct or indirect result of a prohibition or regulation issued by any national, regional or local government.

3. Incurred due to the negligence, misconduct or insolvency of the travel agent or airline through whom the Journey was booked.

HK Express Travel Insurance (Round Trip Plan) Policy Wording, Hong Kong SAR. Published 06/2022. ©2022 Chubb. Coverages underwritten by one or more subsidiary companies. Not all coverages are available in all jurisdictions. Chubb® and its respective logos, and ChubbInsured are protected trademarks of Chubb.
Section K – Travel Delay

In the event that a Public Conveyance is delayed during the Period of Insurance due to an unanticipated event specified in the Travel Delay Event Table mentioned below, The Company will pay up to the Sum Insured stated in Section K(a) of the Schedule of Benefits, provided that the Insured Person is travelling on a regular route as a fare-paying passenger holding a valid boarding pass/ticket which bears the scheduled departure time/arrival time and the scheduled route and destination, issued by the operator of the Public Conveyance which is legally licenced for such scheduled regular transport.

The Company will pay a cash benefit calculated at the amount stated in Section K(b) of the Schedule of Benefits for each and every full eight (8) consecutive hour period of delay.

Travel Delay Event Table:

<table>
<thead>
<tr>
<th>The unanticipated event</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Adverse weather</td>
</tr>
<tr>
<td>2. Natural disaster</td>
</tr>
<tr>
<td>3. Strike involving the employees of the operator of a Public Conveyance</td>
</tr>
<tr>
<td>4. Mechanical fault or electrical breakdown of a Public Conveyance</td>
</tr>
<tr>
<td>5. Hijacking</td>
</tr>
</tbody>
</table>

Special Conditions to Section K:

1. The period of delay will be calculated by the difference between the scheduled local departure time stated in the Insured Person’s original itinerary for the Journey and the Insured Person’s actual local departure time for the same destination.
2. For a Journey eventually cancelled after delay, the period of delay will be calculated by reference to the scheduled local departure time stated in the Insured Person’s original itinerary for the Journey and the Insured Person’s scheduled local departure time for the same destination of the first alternative transport arranged by the Public Conveyance that the Insured Person could have taken if the trip had not been cancelled.
3. Where a Journey involves a sequence of connecting transport, the total period of delay will be calculated by reference to the difference between the original scheduled local arrival time at the final destination stated in the Insured Person’s original itinerary for the Journey and the actual local arrival time at the same destination of the last transport in the sequence. For a Journey eventually cancelled after delay, the period of delay will be calculated by reference to the difference between the original scheduled local arrival time at the final destination stated in the Insured Person’s original itinerary for the Journey and the scheduled local arrival time at the same destination of the last transport in the sequence if the trip had not been cancelled and the Insured Person had taken the first available alternative transport arranged by the Public Conveyance.
4. An Insured Person must take reasonable steps to mitigate any period of delay. Failure to take reasonable steps to mitigate any period of delay as required by this condition precedent will result in The Company having no liability under this Section K – Travel Delay.
5. Any claim under this Section K – Travel Delay must be accompanied by written confirmation from the carrier associated with the delay stating the scheduled and actual departure time at the stated departure point and/or the scheduled and actual local arrival time at the stated destination and the reason for the delay in departing the departure point and/or reaching that destination. Failure to provide the written confirmation required by this condition precedent will result in The Company having no liability under this Section K – Travel Delay.
6. The Company’s total liability under this Section K – Travel Delay during the Period of Insurance shall not exceed the maximum amount under Section K of the Schedule of Benefits.
Exclusions to Section K:
This Section K – Travel Delay does not cover:
1. Any loss arising from an event or occurrence announced before this policy is purchased which might reasonably have been anticipated, at that time, would be likely to result in the Journey being delayed.

Section L – Baggage Delay

In the event that, during the Period of Insurance, the checked-in baggage is delayed, misdirected or temporarily misplaced by a Public Conveyance for more than eight (8) consecutive hours after an Insured Person’s arrival at the transport terminal of the destination stated in the Insured Person’s original itinerary for the Journey, The Company will pay a lump sum allowance to the Insured Person stated in Section L of the Schedule of Benefits.

Special Condition to Section L:
1. Any claim under this Section L – Baggage Delay must be accompanied by written confirmation from the carrier associated with the delay, misdirection or temporary misplacement of the baggage for more than eight (8) consecutive hours after an Insured Person’s arrival at the destination’s transport terminal stated in the Insured Person’s original itinerary for the Journey. Failure to provide the written confirmation required by this condition precedent will result in The Company having no liability under this Section L – Baggage Delay.

Exclusions to Section L:
This Section L – Baggage Delay does not cover any amount/loss:
1. Where the delay, misdirection or temporary misplacement of the baggage is unexplained or is due to confiscation or detention by customs or any other authority.
2. For baggage forwarded in advance of a Journey or separately mailed or shipped in a Public Conveyance other than a Public Conveyance carrying the Insured Person at the same time.
3. Resulting directly or indirectly from terrorism, or action taken by governmental authorities in hindering, combating or defending against such an occurrence; detention or destruction under quarantine or customs regulations, confiscation by order of any government of public authority or risk of contraband or illegal transportation or trade.
4. Claimed under Section G – Personal Property and arising from the same cause or event.

Section M – Personal Liability

In the event that an Insured Person becomes legally liable to pay compensation for an Accident occurring during the Period of Insurance which causes Bodily Injury to any other person or destruction of the property of others, The Company will pay that compensation on behalf of the Insured Person up to the Sum Insured stated in Section M of the Schedule of Benefits.

Exclusions to Section M:
This Section M – Personal Liability does not cover compensation:
1. Arising from Bodily Injury sustained by an Immediate Family Member or by a person in the Insured Person’s custody or control.
2. Arising from damage to property which belongs to the Insured Person or an Immediate Family Member or a Travel Companion or which is in the Insured Person’s custody or control.
3. By way of damages for breach of any liability assumed under a contract.
4. For liability arising from the ownership, possession, lease or rental of any vehicle, aircraft, firearm or animal.
5. For liability arising from the undertaking of any trade or profession.
6. For any claim of whatever nature directly or indirectly caused by (a) ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste or from combustion of nuclear fuel, or (b) the radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component of such assembly.

Section N – Compassionate Death Cash

If an Insured Person dies during the Period of Insurance Journey as a direct and unavoidable result of Bodily Injury or Sickness, The Company will pay up to the Sum Insured stated in Section N of the Schedule of Benefits.
Part IV – General Exclusions

General Exclusions Applicable To All Sections:
This policy does not cover loss, consequential loss or liability arising from:

1. Any Pre-existing Medical Condition, congenital or heredity condition.
2. Travelling abroad contrary to the advice of a Physician, or for the purpose of obtaining medical treatment or services.
3. Suicide, attempted suicide or intentional self-infliction of Bodily Injury.
4. Any condition resulting from pregnancy, abortion, childbirth, miscarriage, infertility and other complications arising therefrom, cosmetic surgery or venereal disease.
5. Dental care (unless resulting from Accidental Bodily Injury to teeth which were sound and natural before the Accident).
6. Mental or nervous disorders, insanity, psychiatric condition or any behavioural disorder.
7. War (whether declared or not), invasion, act of foreign enemies, civil war, revolution, rebellion, coup, hostilities (whether war is declared or not).
8. Direct participation in a Strike/ Riot/civil commotion or from the Insured Person performing duties as a member of armed forces, or armed service or disciplined forces (which shall include but not be limited to policemen, customs officers, firemen, immigration officers/inspectors and correctional service officers/inspectors etc.), or as a volunteer and engaged in war or crime suppression.
9. Participation in:
   (a) Any extreme sports and sporting activities that presents a high level of inherent danger (i.e. involves a high level of expertise, exceptional physical exertion, highly specialised gear or stunts) including but not limited to cliff jumping, horse jumping, ultra-marathons, stunt riding, big wave surfing and canoeing down rapids; unless such sports or sporting activities are usual tourist activities that are accessible to the general public without restriction (other than height or general health or fitness warnings) and which are provided by a recognised local tour operator, providing that an Insured Person is acting under the guidance and supervision of qualified guides and/ or instructors of the tour operators when carrying out such tourist activities,
   (b) Any professional competitions or sports in which an Insured Person receives remuneration, sponsorship or any forms of financial rewards, any stunt activity, off-piste skiing,
   (c) Racing, other than on foot but this does not include long-distance running more than ten (10) kilometres, biathlons and triathlons,
   (d) Private white water rafting grade four (4) and above,
   (e) Any kind of climbing, mountaineering or trekking or ordinarily necessitating the use of specialised equipment including but not limited to crampons, pickaxes, anchors, bolts, carabineers and lead-rope or top-rope anchoring equipment,
   (f) Scuba diving unless an Insured Person holds a PADI certification (or similar recognised qualification) or when diving with a qualified instructor. The maximum depth that this policy covers is as specified under the Insured Person’s PADI certification (or similar recognised qualification). However, in any situation, it should not be deeper than thirty (30) meters and he/she must not be diving alone.
10. Prohibition or regulation by any government, or detention or destruction by customs or any other authority.
11. An unlawful, wilful, malicious or reckless act or omission of an Insured Person.
12. The actions of an Insured Person while under the influence of alcohol or drugs to the extent of legal impairment.
13. Riding in any aircraft other than as a passenger in an aircraft.
14. Any dishonest or criminal activity.
15. An Insured Person’s failure to mitigate the loss or the claim under this policy.
16. Any incidents/circumstances which is existing or announced or publicly known on or before the Purchase Date of this policy stated on the Policy Schedule.
17. AIDS or AIDS Related Complex, any Bodily Injury or Sickness commencing at the time of or subsequent to a zero positive test for HIV or related disease, or any other sexually transmitted diseases.
18. The Insured Person engaging in manual labour or non-clerical, or hazardous work including but not limited to offshore drilling, mineral extraction, handling of explosives, site working, stunt works and aerial photography.
19. Any loss or expenses with respect to Cuba.
20. Nuclear, Chemical and Biological Terrorism.
Part V - Extensions

1. **Travel Extension (Applicable to Round Trip Plan Only):** where the duration of a Journey exceeds the Period of Insurance for any reason outside an Insured Person’s control, the Period of Insurance shall be automatically extended without charge by a maximum period of ten (10) calendar days or until the Insured Person passes through Hong Kong immigration control point on their return to Hong Kong, whichever is the earliest.

Part VI – General Conditions

1. **Validity of Policy:** This policy is only valid for leisure travel or business travel (limited to administrative, clerical and non-manual works only) and shall not apply to persons undertaking expeditions, treks or similar journeys. The Insured Person must be fit to travel.

2. ** Entire Contract:** This policy, together with its endorsement(s), attachment(s) (if any), any application form completed by an Insured Person, together with any document(s) attached to that application form or referred to in it, comprise and constitute the entire contract of insurance. This policy shall not be modified except by written amendment signed by an authorised representative of The Company.

3. **Sum Insured under each Section:** Once the Sum Insured available to an Insured Person under any section of this policy has been exhausted, that Sum Insured will not be reinstated and The Company will have no further liability under that section to that Insured Person.

4. **Sum Insured paid out:** Each and every benefit paid under this policy will erode the relevant Sum Insured available to an Insured Person, leaving only the balance of the relevant Sum Insured available to pay any remaining benefit claims which may be presented to The Company by that Insured Person. The Company’s total liability under each section of this policy for each Insured Person involved in an Accident shall not exceed the relevant Sum Insured.

5. **Duplicate Coverages:** Each Insured Person agrees that, if they are covered under more than one HK Express Travel Insurance (Round Trip Plan) policy or other travel insurance issued by The Company:
   (a) The Company will consider the Insured Person to be insured under the policy which provides the highest amount of benefit; or
   (b) The Company will consider the Insured Person to be insured under the policy which was issued first if the benefit amount is the same.

   In any case, The Company will refund the premium paid, without interest, to the Insured Person for the policy that does not provide cover.

6. **Notice and Sufficiency of Claim:** Written notice of claim must be given to The Company as soon as is reasonably possible and in any event within thirty (30) days from the first day of the event giving rise to the claim under this policy. Notice given by or on behalf of an Insured Person to The Company with information sufficient to identify the Insured Person shall be deemed valid notice to The Company. The Company, upon receiving a notice of claim, will provide to an Insured Person such forms as it usually provides for filing proof of claim. The Insured Person shall, at his/her own expense, provide such certificates, information and evidence to The Company as it may from time to time require in connection with any claim under this policy and in the form prescribed. Proof of all claims must be submitted to The Company within one-hundred-eighty (180) days from the first day of the event giving rise to a claim.

7. **Claims Investigation:** In the event of a claim, The Company may make any investigation it deems necessary and the Insured Person shall co-operate fully with such investigation. Failure by the Insured Person to co-operate with The Company’s investigation may result in denial of the claim.

8. **Examination of Books and Records:** The Company may examine the Insured Person’s books and records relating to this policy at any time during the Period of Insurance and up to three (3) years after the expiration of this policy or until final adjustment and settlement of all claims under this policy.

9. **Physical Examinations and Autopsy:** The Company, at its expense, has the right to have the Insured Person examined as often as reasonably necessary while a claim is pending. It may also have an autopsy carried out unless prohibited by law.

10. **Other Insurance (Applicable to Sections B, G, H, I, J and M):** If a loss covered by this policy is also covered under any other valid insurance (and regardless of whether that other insurance is stated to be primary, contributory, excess, contingent or otherwise), or is compensated by other party, this policy will be subject to all of its terms and conditions, only cover that loss to the extent that the loss exceeds any amount recovered under the other insurance or other party. In any circumstances, the Insured Person should discover and reveal to The Company any compensation which is/will be recoverable from any other source.

11. **Legal Action:** No legal action shall be brought to recover on this policy until sixty (60) days after The Company has been given written proof of loss. No such action shall be brought after three (3) years from the date of loss.
12. **Rights of Recovery:** In the event that authorisation of payment and/or payment is made by The Company or on its behalf by its authorised representatives, to include the Authorised Assistance Service Provider, The Company reserves the right to recover against the Insured Person the full sum which has been paid, or for which The Company is liable, to the Hospital to which the Insured Person has been admitted, less the liability of The Company under the terms of this policy.

13. **Subrogation:** The Company is entitled to subrogate the Insured Person’s right of recovery/indemnity against any third party and has the right to proceed at its own expense in the name of the Insured Person against third parties who may be responsible for an event giving rise to a claim under this policy. The Insured Person should co-operate and endeavour to secure such rights and shall not take any action to prejudice such rights.

14. **Assignment:** No assignment of interest under this policy shall be binding upon The Company.

15. **To Whom Indemnities Payable:** Any death payment will be paid to the deceased Insured Person’s legal representatives.

Any payment under Section C – Chubb Assistance – 24 Hour Worldwide Assistance Services will be paid to the Authorised Assistance Service Provider or another provider of services rendered to the Insured Person. All other benefits will be paid to the Insured Person.

16. **Currency:** The Sum Insured, benefits and limit of liability stated in the Schedule of Benefits and this policy are expressed in Hong Kong dollars. Notwithstanding the first sentence of this policy, losses and/or benefits will be adjusted and paid in Hong Kong dollars or at The Company’s option in the currency of the local country. When currency conversion is necessary when applying terms and conditions of the policy, the rates of exchange to be adopted shall be those prevailing at the date of loss as per the exchange rate at the median level quoted on www.oanda.com.

17. **Geographical Limit and Operative Time:** The geographical limit and operative time shall apply twenty-four (24) hours a day anywhere within Hong Kong, to and from, and within the geographical limit described as the Journey on the Policy Schedule during the Period of Insurance except for Section C (a) to (e) – Chubb Assistance – 24 Hour Worldwide Assistance Services, when the geographical limit shall apply anywhere to and from, and within the geographical limit described as the Journey on the Policy Schedule outside Hong Kong unless otherwise stated in any endorsement issued by The Company.

18. **Disclaimer:** Section C – Chubb Assistance – 24 Hour Worldwide Assistance Services are arranged by the Authorised Assistance Service Provider and the Authorised Assistance Service Provider is solely responsible for these services. The Authorised Assistance Service Provider is not a subsidiary or an affiliate of Chubb Insurance Hong Kong Limited and Chubb Insurance Hong Kong Limited will not be liable for any loss or damage caused by or relating to this service or any act or omission of the Authorised Assistance Service Provider.

19. **Premium:** The Company has no liability under this policy until the premium is paid. The premium is deemed to be fully earned on the date this policy is purchased. No refund shall be allowed once the policy has been issued.

20. **Arbitration:** Any dispute or difference arising out of, or in connection with, this policy must first be referred to arbitration at the Hong Kong International Arbitration Centre (HKIAC) and in accordance with the prevailing Arbitration Ordinance. If the dispute or difference arising out of, or in connection with, this policy requires medical knowledge (including, but not limited to, questions relating to the Sum Insured for any medical service or an operation not listed in the Schedule of Benefits) the mediator or arbitrator may, in The Company’s reasonable discretion, be a registered medical practitioner or a consultant specialist, surgeon, or Physician. If The Company refuses to pay any claim under this policy and a dispute or difference arising from that refusal is not referred to arbitration within twelve (12) months from the date of refusal, any claim against The Company arising from that dispute or difference will be barred.

21. **Fraud or Mis-statement:** Any false statement made by an Insured Person or concerning any claim shall result in The Company having the right to void this policy or repudiate liability under it.

22. **Jurisdiction:** This policy shall be governed and construed in accordance with the laws of Hong Kong. Subject to General Condition 26, any dispute under this policy shall be settled in accordance with the laws of Hong Kong.

23. **Rights of Third Parties:** Any person or entity who is not a party to this policy shall have no rights under the Contracts (Rights of Third Parties) Ordinance (Cap. 623 of the Laws of Hong Kong) to enforce any terms of this policy.

24. **Clerical Error:** Clerical errors by The Company shall not invalidate insurance otherwise valid nor continue insurance otherwise not valid.

25. **Breach of Conditions:** If the Insured Person is in breach of any of the conditions or provisions of the policy (including a claims condition), The Company may decline to pay a claim, to the extent permitted by law.

26. **Sanctions Exclusions:** This insurance does not apply to the extent that trade or economic sanctions or other laws or regulations prohibit us from providing insurance, including, but not limited to, the payment of claims. All other terms and conditions of the policy remain unchanged.

Chubb Insurance Hong Kong Limited is a subsidiary/branch of a US company and Chubb Limited, a NYSE listed company. Consequently, Chubb Insurance Hong Kong Limited is subject to certain US laws and regulations in addition to EU, UN and Hong Kong sanctions restrictions which may prohibit it from providing cover or paying claims to certain individuals or entities or insuring certain types of activities related to certain countries such as Cuba.
Interpretation of this Policy: Please note that the English version of this policy is the official version. This policy has been provided to you in both English and Chinese languages for ease of reference only. The English version of the policy will prevail if any dispute arises regarding the interpretation of any part of the policy.

Part VII – How to Make A Claim

The Claimant should submit a claim within thirty (30) days of the event taking place to Chubb Claim Centre (www.chubbclaims.com.hk). You can simply scan the below QR code to access the Chubb Claim Centre on your smartphone or tablet.

Alternatively, you can complete a claim form and submit together with the travel documents and the following documents as appropriate to Chubb Insurance Hong Kong Limited within thirty (30) days of the event taking place. Please call 3191 6638 for further assistance.

* For English submission only.

Personal Accident Cover / Burns Benefit / Credit Card Protection
- Medical report or certificate issued by a Physician certifying the degree or severity of disability
- Police report, where relevant

Accidental Death
- Death certificate
- Coroner’s report
- Police report, where relevant
- In the event of a disappearance, presumption of death as proclaimed by court

Medical Expenses / Hospital Cash
- Diagnosis, including patient name and date of diagnosis, certified by a Physician
- Original Hospital bill or receipt issued by a Hospital
- Original receipt for purchase of Medical Equipment

Personal Property / Personal Money / Loss of Travel Documents
- Original receipts, including date of purchase, price, model and type of items lost or damaged
- Photos of the damaged items showing the extent of the damage
- Copy of notification to airline/Public Conveyance and their official acknowledgement in writing when loss of damage has occurred in transit
- Police report (which must be made within 24 hours of the occurrence)
- Copy of notification to the issuing authority in respect of loss of travellers cheques (which must be made within 24 hours of the occurrence)

Trip Cancellation / Trip Interruption / Trip Curtailment
- All bills, receipts and coupons
- Diagnosis and treatment, including patient name and date of diagnosis, certified by a Physician
- Official documentation from airline/Public Conveyance including victim’s name, date, time, duration and reason for delay/cancellation

Travel Delay / Baggage Delay
- Official documentation from the airline/Public Conveyance including victim’s name, date, time, duration and reason of delay/cancellation
- Original bill/ receipt issued by hotel/airline/Public Conveyance
- Original boarding pass/ticket, bearing the scheduled departure and/or arrival time and the scheduled route and destination, issued by the operator of the Public Conveyance
Personal Liability

- Statement on the nature and circumstances of the incident or event (No admission of liability or settlement can be made or agreed upon without written consent of The Company)
- All associated documentation received in connection with the incident or event (including copies of summons, all court documents, solicitors’ and other legal correspondence)

These are some of the required documents for claims. The Company reserves the right to request the Insured Person to provide any other information or documents which are not specified above, if necessary.
Part VIII – Personal Information Collection Statement

The Company ("We/Us") want to ensure that Our Insured Persons ("You") are confident that any personal data collected by Us is treated with the appropriate degree of confidentiality and privacy.

This Personal Information Collection Statement sets out the purposes for which We collect and use personally identifiable information provided by You ("Personal Data"), the circumstances when Personal Data may be disclosed and information regarding Your rights to request access to and correction of Personal Data.

(a) Purposes of Collection of Personal Data

We will collect and use Personal Data for the purposes of providing competitive insurance products and services to You, including considering Your application(s) for any new insurance policies and administering policies to be taken out with Us, arranging the cover and administering and managing Your and Our rights and obligations in relation to such cover. We also collect the Personal Data to be able to develop and identify products and services that may interest You, to conduct market or customer satisfaction research, and to develop, establish and administer alliances and other arrangements with other organisations in relation to the promotion, administration and use of Our respective products and services. We may also use your Personal Data in other ways with Your consent.

(b) Direct marketing

Only with Your consent, We may also use your contact, demographic, policy and payment details to contact You with marketing information regarding our insurance products by mail, email, phone or SMS. Tick the box below if You do not consent to receive such marketing information from Us.

(c) Transfer of Personal Data

Personal Data will be kept confidential and We will not sell Your Personal Data to any third party. We limit the disclosure of Your Personal Data but, subject to the provisions of any applicable law, Your Personal Data may be disclosed to:

(i) third parties who assist Us to achieve the purposes set out in paragraphs a and b above. For example, We provide it to Our relevant staff and contractors, agents and others involved in the above purposes such as data processors, professional advisers, loss adjudicators and claims investigators, doctors and other medical service providers, emergency assistance providers, insurance reference bureaus or credit reference bureaus, government agencies, reinsurers and reinsurance brokers (which may include third parties located outside Hong Kong);

(ii) Our parent and affiliated companies, or any company within Chubb local and outside Hong Kong;

(iii) the insurance intermediary through which You accessed the system;

(iv) provided to others for the purposes of public safety and law enforcement; and

(v) other third parties with Your consent.

With regard to the above transfers of Personal Data, where applicable, You consent to the transfer of Your Personal Data outside of Hong Kong.

(d) Access and correction of Personal Data

Under the Personal Data (Privacy) Ordinance ("PDPO"), You have the right to request access to and correction of Personal Data held by Us about You and We will grant You access to and correct Your Personal Data as requested by You unless there is an applicable exemption under the PDPO under which We may refuse to do so. You may also request Us to inform You of the type of Personal Data held by Us about You.

Requests for access or correction of Personal Data should be addressed in writing to:

Chubb Data Privacy Officer
39/F, One Taikoo Place, 979 King’s Road, Quarry Bay, Hong Kong
O +852 2391 6222
F +852 2519 3233
E Privacy.HK@chubb.com

Your request to obtain access or correction will be considered within forty (40) days of Our receipt of Your request. We will not charge You for lodging a request for access to Your Personal Data and if We levy any charges for providing information, such charges will not be excessive. No fee is charged for data correction requests.
根據向本公司所支付保費，並按照本保單所載的條文及條款，本公司同意按照本保單所載的方式及範圍提供保障。

請詳閱本保單

如本保單所載資料有任何不正確之處，請立即將本保單交回本公司以作修正。

第一部分 — 保障計劃（來回程計劃—標準）

<table>
<thead>
<tr>
<th>保障</th>
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<td>A. 個人身意外</td>
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<td>C. Chubb Assistance — 24 小時環球支援服務</td>
<td>(a)</td>
<td>緊急醫療運送及或運返</td>
</tr>
<tr>
<td></td>
<td>(b)</td>
<td>遺體運返</td>
</tr>
<tr>
<td></td>
<td>(c)</td>
<td>親友探望</td>
</tr>
<tr>
<td></td>
<td>(d)</td>
<td>小童護送</td>
</tr>
<tr>
<td></td>
<td>(e)</td>
<td>入院保證金</td>
</tr>
<tr>
<td></td>
<td>(f)</td>
<td>Chubb Assistance — 二十四(24)小時電話熱線及轉介服務</td>
</tr>
<tr>
<td>D. 住院現金</td>
<td>(a)</td>
<td>住院現金最高限額</td>
</tr>
<tr>
<td></td>
<td>(b)</td>
<td>住院現金每日最高限額</td>
</tr>
<tr>
<td>E. 燒傷保障</td>
<td>保額 100,000</td>
<td></td>
</tr>
<tr>
<td>F. 傳染病引致的醫院住院或強制隔離現金津貼</td>
<td>(a)</td>
<td>最高限額</td>
</tr>
<tr>
<td></td>
<td>(b)</td>
<td>每日最高限額</td>
</tr>
<tr>
<td>G. 個人財物</td>
<td>(a)</td>
<td>最高限額</td>
</tr>
<tr>
<td></td>
<td>(b)</td>
<td>每件／套／對物件的最高限額</td>
</tr>
<tr>
<td></td>
<td>(c)</td>
<td>所有相機及攝錄機及其有關配件及裝備限額</td>
</tr>
<tr>
<td>H. 遺失證件</td>
<td>保額 3,000</td>
<td></td>
</tr>
<tr>
<td>I. 取消旅程</td>
<td>保額 5,000</td>
<td></td>
</tr>
<tr>
<td>J. 縮短旅程</td>
<td>保額 5,000</td>
<td></td>
</tr>
<tr>
<td>K. 旅程延誤</td>
<td>(a)</td>
<td>最高限額</td>
</tr>
<tr>
<td></td>
<td>(b)</td>
<td>延誤現金賠償</td>
</tr>
<tr>
<td>L. 行李延誤</td>
<td>保額 600</td>
<td></td>
</tr>
<tr>
<td>M. 個人責任</td>
<td>保額 2,000,000</td>
<td></td>
</tr>
<tr>
<td>N. 身故恩恤金</td>
<td>保額 3,000</td>
<td></td>
</tr>
</tbody>
</table>

客戶服務熱線: (852) 3191 6638
24-小時環球支援熱線: (852) 3723 3030

HK Express 旅遊保險（來回程計劃）保單條款，香港特別行政區，2022 年 6 月編印。
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第二部分—詞彙釋義

在本保單內，下列詞彙應具有以下涵義：

1. 三級程度燒傷指因燒傷導致的身體損傷及經醫生診斷為皮膚已完全受損或破壊且傷及皮下組織的情況。
2. 意外或意外的指偶然發生的突發，不可預見及意料之外的事件。
3. 生化媒體指任何致病性製成疾病生物及/或生物學上產生毒素（包括基因演變生物及化學上合成毒素），並會導致人類、動物或植物疾病及/或死亡。
4. 身體損傷指於受保期間純粹及完全由意外造成的身體損傷。
5. 意外或意外的指偶然發生的突發，不可預見及意料之外的事件。
6. 生化媒體指任何致病性製成疾病生物及/或生物學上產生毒素（包括基因演變生物及化學上合成毒素），並會導致人類、動物或植物疾病及/或死亡。
7. 搭機指下列情況：於受保人於旅程中攜帶或取得的個人物品或配件：機箱機身、攝影鏡頭、閃光燈、顯示屏、鏡片、腳架。任何有電話通訊功能的器材或配件在本保單內都不被界定為「相機」。
8. 相機指下列情況：於受保人於旅程中攜帶或取得的個人物品或配件: 機箱機身、攝影鏡頭、閃光燈、腳架。任何有電話通訊功能的器材或配件在本保單內都不被界定為「相機」。
9. 化學媒體指任何化合物，會於適當時散播，人類、動物、植物或實物會失去能力、引致損害或有致命影響。
10. 強制隔離指受保人必須入住醫院內之隔離病房或政府指定之隔離地點最少一整日，並連續逗留於該隔離地點直至可以離開隔離區為止。
11. 住院指須以住院病人形式持續入住醫院，且醫院亦收取病房及膳食費用。
12. 醫院指按照其國家法律營運的合法機構，並符合以下所有要求：
   (a) 营運的主要目的是以住院病人形式為患病、抱恙或受傷人士提供接待、醫療護理及治療; 及
   (b) 在一名或多名駐診醫生的監督下接納以住院病人形式入院，而其中一位醫生必須隨時當值診症; 及
   (c) 設有由合資格護士人員提供及監督之全日制護理服務; 及
   (d)「醫院」一詞之釋義不包括以下：
      • 精神病院，主要提供精神科或包括弱智等心理病治療之機構，以及醫院之精神科病院;
      • 老人院、療養院、戒毒中心或戒酒中心;
      • 水療或自然療法診所、療養或復康中心，醫院內主要為吸毒者或酗酒者提供地方或作為護理、復康、接種治療、延續護理設施或療養院的特別單位。
13. 香港指中華人民共和國香港特別行政區。
14. 香港快運指香港快運航空有限公司。
15. 直系家庭成員指受保人的配偶、父母、配偶之父母、祖父母、子女、兄弟姐妹、孫子女或法定監護人。
16. 傳染病指世界衛生組織發出大流行警戒的任何種類傳染病。
17. 受保人指名列保單承保表或後續批註（如有）內的一名或多名人。
18. 旅程指本保單承保表所述的香港以外旅程。
19. 無效指任何外科手術或其他治療均告無效並導致受保人完全失聰。此等情況須維持連續十二個月，並須經醫生證實於受保人的餘生屬於完全、持續及永久傷殘。
20. 無效指任何外科手術或其他治療均告無效並導致受保人完全失聴。此等情況須維持連續十二個月，並須經醫生證實於受保人的餘生屬於完全，持續及永久傷殘。
21. 無效指任何外科手術或其他治療均告無效並導致受保人完全失聴。此等情況須維持連續十二個月，並須經醫生證實於受保人的餘生屬於完全，持續及永久傷殘。
22. 無效指任何外科手術或其他治療均告無效並導致受保人完全失聴。此等情況須維持連續十二個月，並須經醫生證實於受保人的餘生屬於完全，持續及永久傷殘。
23. 有效指任何外科手術或其他治療均告無效並導致受保人完全失聴。此等情況須維持連續十二個月，並須經醫生證實於受保人的餘生屬於完全，持續及永久傷殘。
24. 有效指任何外科手術或其他治療均告無效並導致受保人完全失聴。此等情況須維持連續十二個月，並須經醫生證實於受保人的餘生屬於完全，持續及永久傷殘。
25. 受保期間指限於本保單保單承保表上所述之相關計劃下的受保時段，詳情如下：
   (a) 保單承保表所述之香港以外旅程。
   (b) 保單承保表所述之香港以外旅程。
   (c) 保單承保表所述之香港以外旅程。
   (d) 保單承保表所述之香港以外旅程。
   (e) 保單承保表所述之香港以外旅程。
   (f) 保單承保表所述之香港以外旅程。
(b) 就任何其他類型喪失而言，由意外發生之日起計連續十二(12)個月結束時，仍無改善希望或無法透過手術或其他治療治癒。

27. 永久完全傷殘指純粹、直接及不受其他因素影響下由身體損傷導致的傷殘，其相關身體損傷須於意外後的一百八十(180)日內發生出現，而該傷殘由意外發生之日期起計，須連繹及無間斷持續十二(12)個月；及須在所有的可能性下，將完全妨礙受保人於餘生從事任何類型有報酬的工作及永無改善希望。

28. 個人財物指屬於受保人的及在旅程中攜帶或取得的個人物品。個人財物不包括：(1) 於遺失或損毀時受保人並未佩戴或攜帶的珠寶（包括但不只限於例如水晶、耳飾、項鍊、戒指或領針）、(2) 任何形式的金錢、(3) 任何種類的文件、(4) 任何種類的食物或飲料、(5) 古董、(6) 合約、(7) 債券、(8) 證券、(9) 動物、(10) 軟件、(11) 流動電訊設備及配件及包括(12)運輸工具及配件(包括但不只限於例如汽車、電單車、單車、船、電動車、滑步車等。

29. 醫生指合資格執業的醫師，在提供治療予他人時，所處司法管轄區的主管醫療當局已發出牌照予他/她，他/她於提供治療時已領有合資格執業的醫師牌照並提供其接受培訓的範圍內的醫療服務，惟有關人士不包括受保人及直系家庭成員。

30. 保單承保表指列載有(i) 受保人之姓名，(ii) 受保旅程之目的地，及(iii) 選定受保計劃（「來回程計劃 – 標準」或「來回程計劃 – 灵活飛」）之一份或多份文件。

31. 受保前已存在之傷病指於受保期間首日前連續六(6)個月內，受保人、直系家庭成員或同行伙伴出現跡象或症狀，或於同一期間，受保人、直系家庭成員或同行伙伴已尋求或接受(或理應經已尋求或接受) 醫生給予醫療、會診、處方藥物、診症或診斷的任何患病或傷害。

32. 主要住所指受保人於香港的一個主要居住地點。

33. 公共交通工具指由持有效牌照可以出租方式運載乘客的公司或個人營運並以機械推動的任何運載工具。

34. 住院病人指因身體損傷或患病必須作為住院病人住院接受醫療、診斷及治療的受保人(而非僅僅是任何形式的護理、療養、康復、休養或延展看護)。

35. 暴亂指人群參與擾亂公共治安的行為（不論是否與罷工或停工有關），及任何依法成立的政府機關為鎮壓或試圖鎮壓任何上述擾亂行為或將上述擾亂行為的影響降至最低而採取的行動。

36. 保障計劃指本保單第一部分所載的保障計劃表。

37. 患病指於受保期間遇上身體不適或罹患疾病。

38. 罷工指任何罷工工人或停工工人為推動罷工或抵制停工而蓄意作出的行為；或任何依法成立的機關為阻止或試圖阻止任何上述行為或將任何上述行為的影響降至最低而採取的行動。

39. 保額指，就受保人根據本保單可享用的各項保障而言，在保障計劃或該保障的任何相應批註中所列最高金額。

40. 本公司指安達保險香港有限公司。

41. 同行伙伴指在整個旅程中陪伴受保人的人士，惟該人士不屬受保人的直系家庭成員。

42. 正常、合理及慣常的醫療費用指在醫療方面用於治療受保人的病症所需的治療、物品或醫療服務的費用，且該費用不高於產生有關費用地區的類似治療、物品或醫療服務費用的正常水平。此釋義並不包括假如並無保險則不會產生的費用。

第三部分 — 項目說明

章節 A — 個人意外

若受保人於受保期間遭受身體損傷，而直接及無可避免地於連續十二(12)個月內蒙受本章節 A — 個人意外的損傷表所列的任何類別的損失，本公司將按照本章節 A — 個人意外損傷表上所列損失類別的百分比，支付保障計劃第 A(a)項所列保額。

章節 A — 損傷表:

<table>
<thead>
<tr>
<th>損失類別</th>
<th>保額百分比</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. 意外死亡</td>
<td>100%</td>
</tr>
<tr>
<td>2. 永久完全傷殘</td>
<td>100%</td>
</tr>
<tr>
<td>3. 傷肢 - 所有肢體</td>
<td>100%</td>
</tr>
<tr>
<td>4. 傷視力 - 雙眼</td>
<td>100%</td>
</tr>
<tr>
<td>5. 傷視力 - 一眼</td>
<td>100%</td>
</tr>
<tr>
<td>6. 傷肢 - 兩肢</td>
<td>100%</td>
</tr>
<tr>
<td>7. 傷肢 - 一肢</td>
<td>100%</td>
</tr>
<tr>
<td>8. 傷說話能力及傷聆聽能力</td>
<td>100%</td>
</tr>
<tr>
<td>9. 傷聆聽能力 - 雙耳</td>
<td>75%</td>
</tr>
<tr>
<td>10. 傷聆聽能力 - 單耳</td>
<td>15%</td>
</tr>
</tbody>
</table>

HK Express 旅遊保險（來回程計劃）保單條款，香港特別行政區，2022年6月編印。
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章節 A 的特別條款:
1. 假若受保人在同一事件中遭遇超過一個章節A — 個人意外的損傷表所列的損失，本公司於本章節A — 個人意外的責任僅限於支付一種損失類別，即根據所指實際遭遇的損失類別中，在本章節A — 個人意外的損傷表所列百分比為最高的損失類別，而本公司只會支付保障計劃第 A — 個人意外項所列相關保額。
2. 本公司根據本章節A — 個人意外就涉及同一受保人於受保期間內發生的所有意外而承擔的總責任不會超出相關保額。
3. 假若受保人的肢體或器官於意外發生前在運用上或感覺上已部分受損，則本公司可按其酌情決定及經考慮由本公司委任的醫療顧問所作的醫療評估後，按醫療顧問的意見認為純粹及單獨導致的任何身體損傷程度，支付其認為合理的相關保額。本公司不會就意外發生前完全不能運用的肢體或器官支付費用。
4. 風險：假若受保人於受保期間因遭遇意外而不可避免地導致於連續十二(12)個月內遭遇本章節A — 個人意外的損傷表內的其中一項損傷，本公司將假定該身體損傷發生於意外當天。
5. 失蹤：假若受保人的遺失就受保人所使用的交通工具失蹤、沉沒，或報失，當日計起一(1)內未能尋回：
   (a) 則假設受保人已於上述失蹤、沉沒或報失時因身體損傷而導致意外死亡；及
   (b) 在收到由已故受保人的法定代表署名的承諾書後（假若受保人因身體損傷而導致意外死亡的假設其後被證實有誤，則本公司根據本章節A — 個人意外支付的任何款項將即時退回本公司）。本公司將遵照本章節A — 個人意外的損傷表就意外死亡所列百分比，向已故受保人的法定代表支付保障計劃第 A — 個人意外項所列相關保額。

章節 A 的不受保事項:
本章節A — 個人意外並不辦理：
1. 患病、疾病或細菌感染。

章節 B — 醫療費用

(a) 醫療費用：
假若受保人於該受保期間內因身體損傷或患病而引致醫療費用，本公司將向受保人補償有關醫療費用，惟金額上限為保障計劃第 B(a)項所列保額。

(b) 覆診醫療費用：
假若受保人於該旅程內因身體損傷或患病而在香港以外引致醫療費用，返回香港後，受保人仍須就同一身體損傷或患病在香港求診，而醫生及/或中醫師給予治療或處方藥物，則本公司將繼續向受保人補償因此所引致：
   (i) 因於香港接受中醫診治而引致的合理醫療費用，而該費用由中醫師收取；或
   (ii) 在上一章節 B(b)(i) — 醫療費用以外的任何在香港引致的醫療費用；直至受保人返回香港後九十(90)天或保障計劃第 B(b)項所列保額耗盡為止（以較早達致者為準）。

章節 B 的特別條款:
1. 於受保期間在香港以外作業或預備作為住院病人，須立即通知授權支援服務供應商。如未能按照此項先決條件規定而發出通知，本公司恕不承擔本項申請下有關醫療費用的任何責任。
2. 本公司根據本章節B(a) — 醫療費用對於在該受保期間內引致的所有醫療費用的總責任，不可超過保障計劃第 B(a)項所列保額。
3. 本公司根據本章節 B(b) — 醫療費用內引致的各項費用的責任，不可超過保障計劃第 B(b)項所列金額。
4. 本公司根據本章節 B(b)(i) — 醫療費用對於中醫師收取的所有費用的責任，不可超過保障計劃第 B(b)(i)項所列金額。由中醫師收取的每日最高金額應為保障計劃第 B(b)(i)項所列金額。
5. 本公司根據本章節在香港引致的醫療費用責任（包括中醫師收取的所有費用）不會超過保障計劃第 B(b)項所列金額。
6. 本公司根據本章節 B — 醫療費用對所有醫療費用及由中醫師收取的費用的總責任，不可超過保障計劃第 B(a)項所列保額。

章節 B 的不受保事項:
本章節 B — 醫療費用並不辦理：
1. 於支付旅程費用當時已包括或預期的任何費用。
2. 按照診治受保人的醫生認為，可合理地延遲至受保人返回香港後才接受的手術或醫治。
3. 受保人未於合適時間內遵循醫生的意見，返回香港繼續治療於香港以外遭受的身體損傷或患病，因而在其後引致的任何費用。
4. 受保人在旅程出發前，經醫生診斷認為不適宜旅行時，他/她在旅程內引致的任何費用。
5. 引致首次費用之日期起計十二(12)個月後根據章節 B(a) — 醫療費用索償的所有費用。
6. 受保人返回香港九十(90)日後，根據章節 B(b) — 醫療費用索償任何覆診費用。
7. 健康檢查或任何並非與診斷、身體損傷或患病直接有關的檢驗，或並非醫療上必需的任何治療或檢驗。
8. 拐杖、步行架、矯形/矯正器和矯形/矯正支架、假手、假腳及假牙及其他醫療設備或眼科治療的費用。

HK Express 旅遊保險（來回程計劃）保障條款，香港特別行政區，2022年 6 月編印。
© 2022 安達。保障由一間或多間附屬公司所承保。並非所有保障可於所有司法管轄區提供。Chubb®及其相關標誌，以及 Chubb Insured.™ 乃安達的註冊商標。
章節 C — Chubb Assistance — 24 小時環球支援服務

(a) 緊急醫療運送及 / 或運返:
若授權支援服務供應商指定的醫生證實受保人的身體損傷或患病令其不適宜旅行或繼續其旅程或危及其生命或健康，以及在受保人蒙受身體損傷或患病後受保人已經被送往最近的醫院或近處接受治療，而該處並無所須之治療，本公司可在醫生認為在醫療上適宜運送受保人的情況下，全權決定將受保人運送至其他地點接受所需治療。

授權支援服務供應商將於合理時間內安排運送，以及按照受保人的健康狀況，以最佳方式運送受保人，包括但不限於空中救護車、陸上救護車、定期航班、鐵路或其他合適交通工具。運送的工具及最終目的地將由授權支援服務供應商決定，並完全以醫療必要性決定。授權支援服務供應商會在適當情況下，將受保人送返香港。

本公司將直接向授權支援服務供應商支付受保人的緊急醫療運送及 / 或運返、相關醫療服務及醫療物品的實際費用。

(b) 遺體運返:
於受保人因身體損傷或患病而直接及不可避免地導致其身故時，本公司將支付把受保人的遺體由死亡地點運返香港或經由授權支援服務供應商批准在死亡地點當地安葬的費用。

(c) 親友探望:
若在旅程中醫生證實受保人的身體損傷或患病而須於香港境外之醫院住院連續三天以上，或受保人身故，本公司將支付(i)一張來回經濟客位機票的費用予一位人士前往探望於香港以外的受保人，及(ii)於任何海外酒店內的一間普通客房最多連續五 (5) 晚的合理住宿費用（但不包括飲料、膳食及其他房間服務的費用）金額上限為保障計劃第 C (c)(i) 項所列保額。

(d) 小童護送:
在旅程中發生以下情況時:
(i) 當受保人因身體損傷或患病而直接及不可避免地需住院，並獲醫生證明受保人不適宜旅行或繼續其旅程或危及其生命或健康或在旅程中身故，及
(ii) 該受保人同行之小童 (該小童必須為受保人) 於該旅程首日年齡十七 (17) 歲或以下；及
(iii) 該小童因受保人的住院連續三天以上或受保人身故而面對無人照顧的風險。
本公司將安排及支付一張單程經濟客位機票，護送該名小童返回香港，惟金額上限為保障計劃第 C (d) 項所列保額。

(e) 入院保證金:
授權支援服務供應商將為每名受保人提供因住院而需繳付的住院保證金，惟金額上限為保障計劃第 C (e) 項所列保額。此入院保證金一律由受保人自付及全數歸還授權支援服務供應商，除非其費用可包含於保障計劃第 B 項 - 醫療費用內。

(f) Chubb Assistance — 二十四 (24) 小時電話熱線及轉介服務:
下列服務僅以轉介及安排的方式提供，且所有費用須由受保人支付：
• 預防注射及簽證規定的資訊服務
• 領事館轉介
• 傳譯員轉介
• 遺失行李支援
• 遺失旅遊證件支援
• 電話醫療諮詢
• 醫療服務供應商轉介
• 住院時醫療狀況監察
• 預約醫生安排
• 醫院入住安排
有關於本服務之詳情，請致電電話熱線查詢或參閱由 Chubb Assistance 提供的轉介服務資料。若您對本服務有任一問題，可致電電話熱線 (852) 3723 3030 向 Chubb Assistance 查詢。

章節 C 的特別條款:
1. 本章節 C — Chubb Assistance — 24 小時環球支援服務由權力支援服務供應商提供。假若發生根據本章節 C (a) 至 (e) — Chubb Assistance — 24 小時環球支援服務可能導致潛在索償的任何事件，必須立即通知本公司或授權支援服務供應商。如未能發出本特別條款規定的通知，本公司恕不承擔於保單章節 C — Chubb Assistance — 24 小時環球支援服務下的任何責任。運送的安排、方式及最終目的地將由授權支援服務供應商決定，並完全以醫療必要性決定。本公司根據本章節 C — Chubb Assistance — 24 小時環球支援服務付款項後，本公司有權收取來自原有回程機票的任何應退還項。
章節 C的不受保事項:
本章節 C—Chubb Assistance—24 小時環球支援服務並不保障任何:
1. 於支付旅程費用時已包括或預期的費用。
2. 受保人在旅程出發前，經醫生診斷認為不適宜旅行後，他/她在旅程內引致的費用。
3. 由其他人士提供服務而產生的費用，該等費用受保人並不應負責的。
4. 不是由授權支援服務供應商批准及安排的服務而產生的費用。
5. 非由醫生給予或處方的治療。
6. 可合理地延遲至受保人返回香港後才接受治療而產生的費用。

章節 D—住院現金
於受保人因身體損傷或患病而直接及不可避免地在香港以外住院時，本公司將按照保障計劃第 D(b)項所列金額，就每日住院向受保人支付每日保障，惟上限為保障計劃第 D(a)項所列保額。

章節 D的特別條款:
1. 於本章節 D—住院現金的保障僅在住院結紮方會支作。
2. 於本章節 D—住院現金的保障與章節 B—醫療費用項下應付的保障為累加保障。

章節 D的不受保事項:
本章節 D—住院現金並不保障:
1. 已根據章節 F—傳染病引致的醫院住院或強制隔離現金津貼就同一事件提出索償的損失。

章節 E—燒傷保障
若受保人遭遇包括三級程度燒傷在內的身體損傷，本公司將按照本章節 E的燒傷表就燒傷程度所列百分比，支付保障計劃第 E—燒傷保障項所列相關保額。

<table>
<thead>
<tr>
<th>燒傷表</th>
<th>賠償百分比</th>
</tr>
</thead>
<tbody>
<tr>
<td>三級程度燒傷</td>
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<td>頭部:</td>
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<tr>
<td>等於或超過 12%</td>
<td>100%</td>
</tr>
<tr>
<td>等於或超過 8%但少於 12%</td>
<td>75%</td>
</tr>
<tr>
<td>等於或超過 5%但少於 8%</td>
<td>50%</td>
</tr>
<tr>
<td>等於或超過 2%但少於 5%</td>
<td>25%</td>
</tr>
<tr>
<td>身體:</td>
<td></td>
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<tr>
<td>等於或超過 20%</td>
<td>100%</td>
</tr>
<tr>
<td>等於或超過 15%但少於 20%</td>
<td>75%</td>
</tr>
<tr>
<td>等於或超過 10%但少於 15%</td>
<td>50%</td>
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</tbody>
</table>

章節 E的特別條款:
1. 若受保人在同一事故中遭遇超過一類在本章節 E—燒傷保障的燒傷表上所列的燒傷，本公司於本章節 E—燒傷保障的責任僅限於支付一項燒傷類別，即根據所有實際遭遇的燒傷類別中，在本章節 E—燒傷保障的燒傷表所列百分比為最高的一項燒傷類別，而本公司只會支付保障計劃第 E項所列相關保額。
2. 於本章節 E—燒傷保障的保障與章節 A—個人意外項下應付的保障為累加保障。

章節 F—傳染病引致的醫院住院或強制隔離現金津貼
如受保人於受保期間內因傳染病不可避免地在香港以外住院時，本公司將按照保障計劃第 F(b)項所列金額，就每日住院向受保人支付每日保障，惟上限為保障計劃第 F(a)項所列保額。

如受保人於受保期間內因被懷疑或確診感染傳染病而被當地政府強制隔離，或於旅程完結後返回香港三日內被香港政府強制隔離，本公司將按照保障計劃第 F(b)項所列金額，就每日被強制隔離向受保人支付每日保障，惟上限為保障計劃第 F(a)項所列保額。
章節 F 的特別條款:
1. 不論因傳染病引致的住院或強制隔離之合共日數為多少，本公司根據本章節 F 就涉及的總責任不會超逾保障計劃第 F(a)項所列保額。

章節 F 的不受保事項:
本章節 F 不受保事項所列的保單購買日期當日或之前，有關之行程目的地已被宣佈為疫埠。
1. 如已根據章節 D 住院現金peaterf提出索償的損失。

章節 G - 個人財物
就實際損耗、折舊及陳舊進行扣減或撥備後，本公司將按其絕對酌情權對在該旅程內遺失或被盜或損毀的個人財物進行修復、修理或更換，惟上限為保障計劃第 G(a)項所列保額。

章節 G 的特別條款:
1. 假若發生任何個人財物遺失、被盜或因第三方的蓄意行為而損毀的情況可能導致本章節 G 個人財物的索償事件，須在發生有關事件的二十四(24)小時內通知當地警方或相應的當地執法人員。如未能發出此項先決條件規定的通知，本公司恕不承擔本章節 G 個人財物的任何責任。
2. 假若遺失、被盜或損毀在運送時發生，須於發現遺失或損毁起計二十四(24)小時內通知當地警方或相應的當地執法人員，並附上顯示已向警方或相應的當地執法人員報告損失的書面證明。如未能提供此項先決條件規定的書面證明，本公司恕不承擔本章節 G 個人財物的任何責任。
3. 假若遺失、被盜或損毀在運送時發生，須於發現遺失或損毁起計二十四(24)小時內通知當地警方或相應的當地執法人員，並附上顯示已向警方或相應的當地執法人員報告損失的書面證明。如未能提供此項先決條件规定的書面證明，本公司恕不承擔本章節 G 個人財物的任何責任。
4. 假若任何一件遺失、被盜或損毀的個人財物為一對或一套物品的一部分，本公司對該件及該對或該套物品的最大責任，將以保障計劃第 G(c)項所列金額為限。
5. 假若遺失、被盜或損毀的個人財物為一對或一套物品的一部分，本公司對該件及該對或該套物品的最大責任，將以保障計劃第 G(b)項所列金額為限。
6. 假若發生任何個人財物遺失、被盜或因第三方的蓄意行為而損毀的情況可能導致本章節 G 個人財物的索償事件，須在發生有關事件的二十四(24)小時內通知當地警方或相應的當地執法人員，並附上顯示已向警方或相應的當地執法人員報告損失的書面證明。如未能提供此項先決條件規定的書面證明，本公司恕不承擔本章節 G 個人財物的任何責任。
7. 假若遺失、被盜或損毀在運送時發生，須於發現遺失或損毁起計二十四(24)小時內通知當地警方或相應的當地執法人員，並附上顯示已向警方或相應的當地執法人員報告損失的書面證明。如未能提供此項先決條件規定的書面證明，本公司恕不承擔本章節 G 個人財物的任何責任。
8. 假若遺失、被盜或損毀在運送時發生，須於發現遺失或損毁起計二十四(24)小時內通知當地警方或相應的當地執法人員，並附上顯示已向警方或相應的當地執法人員報告損失的書面證明。如未能提供此項先決條件規定的書面證明，本公司恕不承擔本章節 G 個人財物的任何責任。
9. 假若遺失、被盜或損毀在運送時發生，須於發現遺失或損毁起計二十四(24)小時內通知當地警方或相應的當地執法人員，並附上顯示已向警方或相應的當地執法人員報告損失的書面證明。如未能提供此項先決條件規定的書面證明，本公司恕不承擔本章節 G 個人財物的任何責任。
10. 假若遺失、被盜或損毀在運送時發生，須於發現遺失或損毁起計二十四(24)小時內通知當地警方或相應的當地執法人員，並附上顯示已向警方或相應的當地執法人員報告損失的書面證明。如未能提供此項先決條件規定的書面證明，本公司恕不承擔本章節 G 個人財物的任何責任。

章節 H - 遺失證件
本公司於受保人補領之前，擔保其交易、通訊及使用保障計劃第 H 項所列保額。
章節 II 的特別條款:

1. 假若發生任何可能導致本章節 H - 遺失證件的索償事件，須在發生有關事件的二十四(24)小時內通知當地警方或相應的當地執法人員。如未能發出此項先決條件規定的通知，本公司恕不承擔本章節 H - 遺失證件的任何責任。

2. 根據本章節 H - 遺失證件提取的任何索償須附上顯示已向警方或相應的當地執法人員報告損失的書面證明。如未能提供此項先決條件規定的書面證明，本公司恕不承擔本章節 H - 遺失證件的任何責任。

3. 本公司根據本章節 H - 遺失證件對於在受保期間內所有損失的總責任，不可超逾保障計劃第 II 項所列保額。

章節 II 的不受保事項:

本章節 II 遺失證件並不保障：

1. 因受保人疏忽所致的損失，當中包括但不限於將出入境檢查所需的旅遊證件及/或車船機票置於無人看管狀態。

章節 I - 取消旅程

於購買本保單後，假若：

(a) 受保人、直系家庭成員或擬定同行伙伴在旅程計劃開始日期前九十(90)天內突然身故；或

(b) 受保人或擬定同行伙伴在旅程計劃開始日期前九十(90)天內因意料之外遭受身體損傷或患病；或

(c) 直系家庭成員在旅程計劃開始日期前九十(90)天內因意料之外遭受身體損傷或患病；或

(d) 受保人在購買本保單後及旅程計劃開始日期前九十(90)天內，在未能預計地，受保人或受保人收到出任證人傳票；或

(e) 受保人在購買本保單後及旅程計劃開始日期前九十(90)天內，受保人須持續地出任陪審員；或

(f) 受保人的主要住所在香港特別行政區在購買本保單後及旅程計劃開始日期前九十(90)天內，受保人或受保人的主要住所遭受火災、水災或盜竊而嚴重損毀，且受保人於旅程計劃開始日期身在香港，受保人所蒙受之損失須為受保人因預付及被沒收的香港快運機票費用所致。

而導致旅程必須取消，本公司將補償受保人因預付及被沒收的香港快運機票的實際費用，惟上限為保障計劃第 I 項所列保額。

章節 I 的特別條款:

1. 假若旅程取消是由於受保人或擬定同行伙伴的身體損傷或患病，該身體損傷或患病須得到醫生證明該身體損傷或患病令受保人不適宜旅行或危及其生命或健康。

2. 若旅程取消是由於直系家庭成員的身體損傷或患病，該身體損傷或患病須得到醫生證明該身體損傷或患病危及上述人士之生命。

3. 如未能提供此項先決條件規定的證明，本公司恕不承擔在章節 I - 取消旅程受保人所蒙受之損失的責任。

4. 假若受保人的損失同屬於多於一個章節 I - 取消旅程的保障範圍，本公司於本章節 I 的責任僅限於賠償當中最高的一項損失。

5. 本公司根據本章節 I - 取消旅程對於在受保期間內所有損失的總責任，不會超逾保障計劃第 I 項所列保額。

章節 I 的不受保事項:

本章節 I - 取消旅程並不保障下列項目：

1. 受保人可從任何其他來源獲得彌償或賠償退款或收回款項。

2. 受保人在法律上沒有責任支付的有關款項。

3. 由於任何國家、地區或地方政府頒發禁令或規例而直接或間接取消。

4. 由於接受旅程預訂的旅行代理的疏忽、行為失當或周轉不靈而取消。

5. 由於人數不足導致旅遊經營商或批發商無法令旅行團成行而取消。

6. 由於受保人的財務困難；或受保人的情況或所承擔的合約責任改變；或受保人不願繼續旅程而直接或間接取消。

7. 由於受保人未於旅程計劃開始日期前一(1)週內於中國香港、台灣或澳門登記或呈報已患有或曾受過下列疾病、受傷或接受過治療、或在旅程期間會引致死亡或永久傷殘。

8. 受保人未於旅程計劃開始日期前一(1)週內持有效的已登記的旅遊證件。

章節 J - 縮短旅程

若受保人因下列原因而須縮短旅程並須直接返回香港：

(i) 受保人身故、蒙受身體損傷或患病；或

(ii) 直系家庭成員、同行伙伴突然身故、蒙受身體損傷或患病。

本公司將補償受保人未使用的香港快運機票費用，惟最大金額上限為保障計劃第 J 項所列保額。

章節 J 的特別條款:

1. 假若旅程縮短是因為受保人或同行伙伴的身體損傷或患病，須得到醫生證明該身體損傷或患病令受保人或同行伙伴不適宜旅行或危及其生命或健康。

2. 若旅程縮短是因為直系家庭成員的身體損傷或患病，須得到醫生證明該身體損傷或患病危及上述人士之生命。

3. 如未能提供此項先決條件規定的證明，本公司恕不承擔在章節 J - 縮短旅程受保人所蒙受之損失的責任。

HK Express 旅遊保險（來回程計劃）保單條款，香港特別行政區，2022 年 6 月編印。
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章節 J 的不受保事項:

1. **受保人** 可從任何其他來源獲得彌償或賠償退款或收回款項。
2. 由於任何國家、地區或地方政府頒發禁令或規例而直接或間接引致。
3. 由於接受**旅程**或航空公司預訂的旅行代理的疏忽、行為失當或周轉不靈而引致。
4. 由於人數不足導致旅遊經辦商或批發商無法令旅行團成行而引致。
5. 由於**受保人**出現財務困難;或**受保人**的情況或合約附加責任改變;或**受保人**不願繼續**旅程**而直接或間接引致。
6. 已根據章節 K – 旅程延誤就同一事件提出索償的損失。
7. 因違反醫生意見導致的。
8. 由在預訂**旅程**時或於開始第一日**旅程**時，已存在或於當時可合理預計可能會導致**旅程**被阻礙的事件或情況所致的損失。

章節 K – 旅程延誤

1. 延誤時數將只參照以下兩者其一的延誤差異作計算：
   - 受保人旅程的原定旅程表計劃離開的當地時間，與受保人實際離開同一目的地的當地時間之差異。
   - 受保人旅程的原定旅程表最後目的地的原定計劃抵達的當地時間與實際抵達同一目的地的當地時間之差異。
2. 根據章節 L – 行李延誤提出的任何索償，須附上由合法**公共交通工具**經營商發出之旅行證書，以証明相關已托運的行李延誤、誤送或暫時丟失超過連續八(8)個小時。
3. 本公司根据章節 L – 行李延誤於**受保期間**內發生的所有損失而承擔的總責任不會超逾保障計劃第 L(a)項所列之保額。

章節 J 的不受保事項:

1. **受保人**可從任何其他來源獲得彌償或賠償退款或收回款項。
2. 由於任何國家、地區或地方政府頒發禁令或規例而直接或間接引致。
3. 由於接受**旅程**或航空公司預訂的旅行代理的疏忽、行為失當或周轉不靈而引致。
4. 由於人數不足導致旅遊經辦商或批發商無法令旅行團成行而引致。
5. 由於**受保人**出現財務困難;或**受保人**的情況或合約附加責任改變;或**受保人**不願繼續**旅程**而直接或間接引致。
6. 已根據章節 K – 旅程延誤就同一事件提出索償的損失。
7. 因違反醫生意見導致的。
8. 由在預訂**旅程**時或於開始第一日**旅程**時，已存在或於當時可合理預計可能會導致**旅程**被阻礙的事件或情況所致的損失。

章節 K – 旅程延誤

1. 延誤時數將只參照以下兩者其一的延誤差異作計算：
   - 受保人旅程的原定旅程表計劃離開的當地時間，與受保人實際離開同一目的地的當地時間之差異。
   - 受保人旅程的原定旅程表最後目的地的原定計劃抵達的當地時間與實際抵達同一目的地的當地時間之差異。
2. 根據章節 L – 行李延誤提出的任何索償，須附上由合法**公共交通工具**經營商發出之旅行證書，以証明相關已托運的行李延誤、誤送或暫時丟失超過連續八(8)個小時。
3. 本公司根据章節 L – 行李延誤於**受保期間**內發生的所有損失而承擔的總責任不會超逾保障計劃第 L(a)項所列之保額。

章節 K 的特別條款:

1. **受保人**需採取合理措施縮短任何延誤時間。如未能按照此項先決條款的規定採取合理措施縮短任何延誤時間，本公司恕不承擔本章節 K – 旅程延誤的任何責任。
2. 任何根據本章節 K – 旅程延誤提出的索償，須附上由合法**公共交通工具**經營商發出之旅行證書，以証明相關已托運的行李延誤、誤送或暫時丟失超過連續八(8)個小時。如未能提供此項先決條款規定的確認書，本公司恕不承擔本章節 K – 旅程延誤的任何責任。
3. 根據章節 L – 行李延誤提出的任何索償，須附上由合法**公共交通工具**經營商發出之旅行證書，以証明相關已托運的行李延誤、誤送或暫時丟失超過連續八(8)個小時。如未能提供此項先決條款規定的確認書，本公司恕不承擔本章節 L – 行李延誤的任何責任。

章節 L – 行李延誤

於**受保期間**內，假若已托運的行李在**受保人**抵達**受保人旅程**原定旅程表所列目的地的口岸後，因**公共交通工具**營運商延誤、誤送或暫時丟失該行李超過連續八(8)個小時，本公司將向**受保人**發放一筆行李延誤津貼，惟上限為保障計劃第 L(a)項所列之保額。
章節 L 的不受保事項:
本章節 L – 行李延誤並不保障:
1. 任何行李的延誤、誤送或暫時丟失因於原因不明或因海關或任何其他機關扣押或扣留而導致。
2. 於有關旅途所運載之或單獨運寄以作公共交通工具（同時運載受保人的公共交通工具除外）運送的任何行李。
3. 任何由直接或間接引因暴動、反叛、革命、內戰、篡權、恐怖活動或因政府或有關公共機構意圖阻礙、反對或防禦此等動亂所引起的損失；基於海關條例或檢疫而遭扣留或破壞；政府扣之違禁品或非法攜帶或交易的物品。
4. 已根據章節 G - 個人財物提出索償且因同一原因或事件所致。

章節 M - 個人責任

假若受保人於受保期間內發生對任何其他人士造成身體損傷或損毀他人財物的意外，因而須承擔作出賠償的法律責任，本公司將代表受保人支付該賠償，惟上限為保障計劃第 M 項所列保額。

章節 M 的不受保事項:
本章節 M – 個人責任並不保障符合下列各項的賠償:
1. 直系家庭成員或受到受保人監護或控制的人士遭受身體損傷所引致的。
2. 屬於受保人或直系家庭成員或同行伴侶或受到受保人監護或控制的人士的財物損毀引起。
3. 屬於違反根據合約須承擔的任何責任的賠償。
4. 因擁有、租賃、租用任何運輸工具、飛機、火器或動物所產生的責任。
5. 因進行任何交易或專業所產生的責任。
6. 因(a)來自任何核子燃料或任何燃燒核子燃料而產生的任何核廢料的離子化輻射或輻射污染，或(b)任何因爆炸性核子裝置設施或該裝置設施的核子成分所產生的輻射、毒性、爆炸性或其他危險特性，而直接或間接導致的任何索償（不論任何性質）。

章節 N - 身故恩恤金

假若受保人遭受身體損傷或患病，並因此致死於受保期間中身故，本公司將向已故受保人的法定代表，支付保障計劃第 N 項所列保額。

第四部分 - 一般不受保事項

適用於所有章節的一般不受保事項:
本保單並不保障因下列各項所致的損失或後繼損失或責任:
1. 任何受保前已存在之傷病、先天性或遺傳狀況。
2. 違反醫生意見而外出旅遊，或為了獲取醫治或醫療服務而外出旅遊。
3. 自殺、企圖自殺或故意引致自身的身體損傷。
4. 因懷孕、墮胎、分娩、流產、不育而引致的任何情況及其所致的其他併發症，整容手術或性病。
5. 牙醫護理（意外前為天然及健全的牙齒但因意外身體損傷所引致除外）。
6. 精神或神經失常、精神錯亂、精神狀況或任何行為失常。
7. 戰爭（不論宣戰與否）、侵略、外敵行動、內戰、革命、叛亂、暴動、敵對行為（不論宣戰與否）。
8. 直接參與罷工/暴亂/內亂，或因受保人履行身為軍隊、武裝部隊或紀律部隊（包括但不限於警員、海關職員、消防員、入境處職員/督察及懲教處職員/督察等）成員或身為戰爭或減罪行動志願者的職責。
9. 參與
   (a) 任何極限的運動或體育活動，其性質存有高度的危險性（包括但不限于跳懸崖、馬術障礙賽、超級馬拉松、特技表演、衝巨浪及獨木舟等），除非該項活動是由當地合資格的旅遊活動經營者主辦，而且是項活動是開放給一般大眾及遊客參與，而對參與者並無特殊限制的運動活動（除身高或一般健康狀況警告外）。在參與活動時，受保人必須跟從按照合資格的導師及/或旅遊經營商的指導員之指導和監督。
   (b) 職業體育賽事或運動，而受保人可透過從事該運動而取得報酬、贊助或任何形式的財務報酬、任何特技活動、偏離滑雪道之滑雪活動。
   (c) 遊賽（除上述的競賽外，但不包括超過十公里的跑步，冬季兩項競賽及三項全能運動），
   (d) 第四(4)級程度之私人水域橡皮艇滑漂流。
   (e) 任何一般需利用專業裝備的攀石或攀山活動，裝備包括但不限於鉤、鉬錘、鉬、繩索或嚮導等工具。
   (f) 潛水活動，除非受保人持 PADI 註書（或同類認可的資格），或在合資格的導師指導下陪同之下進行潛水。深度限制不能超過受保人的 PADI 註書（或同類認可的資格）所注明的深度，惟在任何情況下都不得超過三十(30)米深及不得單獨進行潛水。
10. 任何政府的禁令或規例，或海關或任何其他機關扣押或破壞。
11. 受保人的非法、蓄意或惡意行為或魯莽行為或疏忽。
12. **受保人** 因服用超額法定水平之酒精或藥物引起的有關損失。
13. 乘搭任何飛機，但作為飛機搭客除外。
14. 任何不誠實或犯罪活動。
15. **受保人** 未有減輕損失或本保單之索償。
16. 在 **保單承保條款** 所列保單購買日期當天或以前已存在、已宣佈或公眾所知的任何事件/情況。
17. 感染病或感染病相關綜合症，任何於人體免疫力衰減症或相關疾病的陽性測試當時或其後開始的任何 **身體損傷** 或 **患病**，或任何其他經性接觸傳染之疾病。
18. **受保人** 從事體力勞動或非文職或危険工作，當中包括但不限於離岸鑽探、礦物提煉、處理爆炸品、地盤作業、特技工作及空中攝影。
19. 任何與古巴有關之損失或費用。
20. 核子、化學及生化恐怖活動。

第五部分 — 延期條款

1. 旅行延期（只適用於未回程計劃）：若 **旅程** 期間因在 **受保人** 控制以外的任何原因而超過 **受保期限**，**受保期限** 將自動免費延長最多十（10）個曆日，或直至 **受保人** 返回 **香港** 時為止（以較早者為準）。

第六部分 — 一般條款

1. **保單有效期**：本保單只適用於指明或公幹（只限行政性質、文職及非體力勞動）的 **旅程**，而不適用於探險跋涉或類似旅程。**受保人** 必須是適宜旅行人士。
2. 完整合約：本保單，連同其批註、附件（如有）、**受保人** 填妥的任何申請表格及於申請時所提出及相關文件，組成及構成完整的 **保單**。除經 **本公司** 授權代表簽署的書面修訂外，本保單不得改動。
3. 每一章節的保額 **受保人** 根根據本保單任何章節可獲賠償的 **保額** 一經訂定， **保額** 將不會重設，且 **本公司** 亦將根據該章節對該 **受保人** 承擔進一步責任。
4. 保額支付：根據本保單受支付的各項賠償將會減少 **受保人** 可受支付的相關 **保額**，而相關 **保額** 只有在再次可支付時可適用於支付該 **受保人** 可能會向 **本公司** 另提出的任何未支付賠償 **保額**。 **本公司** 根據本保單所提章節對涉及 **意外** 的 **受保人** 的總責任，將不超逾相關 **保額**。
5. 重覆保額：每一 **受保人** 同意，若他們同時受保多於一份由 **本公司** 簽發的「HK Express 旅遊保險計劃（來回程計劃）」保單或其他由 **本公司** 簽發的旅遊保險保單。
6. 索償通知及充份程度：索償的書面通知必須在合理的情況下盡早送交 **本公司**。在任何情況下，須於導致根據本保單提出索償的保單事件發生之日起計三十（30）天內送交 **本公司**。由 **受保人** 或其代表或索償人送交 **本公司** 且載有足以證明 **受保人** 身份的，相應時為已有效送交 **本公司**。 **本公司** 將於接獲索償通知後，將向 **受保人** 提供 **本公司** 為備存索償證明而通常提供的該等表格。 **受保人** 或索償人須根據本保單在該等表格內填寫有關任何索償的規定，以自費方式就此向 **本公司** 提供所有相關證明書、資料及資料。所有索償的證明必須於導致索償的保單事件發生之日起計一百八十（180）天內送交 **本公司**。
7. 索償調查：於出現索償時， **本公司** 可能作出其視為必要的任何調查， **受保人** 應全面配合該調查。倘 **受保人** 未能配合 **本公司** 的調查，可能導致索償遭拒。
8. 檢查賬冊及記錄： **本公司** 可能於 **受保期限** 期間任何時間及本保單期滿後三（3）年，或直至根據本保單提出的所有索償獲得最終調整及解決前，將會檢查於本保單有關的 **受保人** 賬冊及記錄。
9. 體格檢查及屍體剖驗：在 **索償處理** 時期， **本公司** 有權自費於合理的情況下要求 **受保人** 接受檢查，除非法律禁止，否則亦可能要求進行屍體剖驗。
10. 其他保障（適用於章節 B、G、H、I、J、M）：倘若根據本保單保單的損失為任何其他有效保單的保障範圍（不論該份其它保障是屬於主要、分擔、附加、待定或其他性質的保障）或已在其它途徑得到賠償， **保單** 仍將根據本保單條文及條款，保障該份其它保障或其他保單所支付的金額以外的實際損失金額，惟以有關損失金額為限。在任何情況下， **受保人** 應向 **受保人** 提出及披露所有由其他途徑得到或將會得到的賠償。
11. 法律訴訟： **受保人** 在 **受保期限** 發出書面損失證明後六十（60）天內，方可展開法律訴訟追討本保單的賠償。 **受保人** 於損失日期起三（3）個月後不得提出有關訴訟。
12. 委託權： **受保人** 可以將 **受保人** 或其代理人（包括 **授權支援服務供應商**）代 **受保人** 作出索償支付及/或支付，則 **本公司** 保留權利向 **受保人** 支付已支付或 **本公司** 未收的 **受保人** 的 **醫院** 支付的全部金額，惟將扣除 **本公司** 根據本保單條款所需支付的金額。
13. 代位權： **本公司** 有權以 **受保人** 名義追訴其他相關人事之索償或債款及有權以自費方式，以 **受保人** 的名義對導致根據本保單提出索償的事件可能負有責任的第三方提出訴訟。 **受保人** 必須合作及盡一切能力保護此權利。
14. 轉讓：本保單的任何權益轉讓對 **本公司** 並無約束。
15. 強制的支付對象：身故賠償將支付予已故受保人的法定代表。根據章節 C – Chubb Assistance – 24 小時環球支援服務應付的款項乃支付予授權支援服務供應商或向受保人提供服務的其他服務提供商，除上述規定外，所有其他保障項乃支付予受保人。

16. 地域限制及施行時間：地域限制及施行時間適用於香港、往返及於保單承保表所列之「旅程」地域內的一日二十四(24)小時，惟章節 C (a) 至 (e) – Chubb Assistance – 24 小時環球支援服務除外，就該項而言，除非經本公司批註，否則章節 C 適用於香港以外在世界各地的一日二十四(24)小時。

17. 購幣：本保單所有列於保障計劃內的保額、保障及限額等均以港幣計算。儘管本保單之賠償及/或保障將調整為港幣計算及付款，本公司亦可選擇以當地貨幣償付。而相關之貨幣匯率則以當天列於網址 www.oanda.com 的匯率中位數換算。

18. 免責條款：章節 C – Chubb Assistance – 24 小時環球支援服務由授權支援服務供應商安排。授權支援服務供應商全面負責此24小時環球支援服務。授權支援服務供應商並非安達保險香港有限公司之聯營或附屬機構及安達保險香港有限公司概不負責有關或由授權支援服務供應商作出之任何行為或疏忽而引致之任何損失或損傷。

19. 僱員：除非保費已支付，本公司在本保單內並無責任。保費於保險購買日期已被視為完全賺取。當保單繕發後，保費將不獲退還。

20. 仲裁：凡出現因本保單產生或與本保單有關的任何爭議或歧異，均須首先提交香港國際仲裁中心，並按現有之仲裁條例。若因本保單產生或與本保單有關的任何爭議或歧異而引致之任何損失或損傷，則按照本公司之合理酌情權，調解員或仲裁員可以為註冊醫療人員或顧問或專科醫生、外科醫生或醫生。倘若本公司拒付根據本保單提出的任何索償，而因拒付產生的任何爭議或歧異並未於拒付日期起計十二(12)個月內提交仲裁，則因該爭議或歧異所引致而針對本公司的任何索償將不獲受理。

21. 欺詐或錯誤陳述：由受保人作出或有關任何索償的任何虛假陳述均會導致本公司有權廢除本保單或撤銷根據本保單提出的責任。

22. 司法管轄權：本保單受香港法律約束並據其解釋。依從一般條款第 19 項，本保單的任何爭議均須根據香港法律解決。

23. 第三者權利：任何不是本保單某一方的人士或實體，不能根據《合約〈第三者權利〉條例》（香港法例第 623 章）強制執行本保單任何條款。

24. 文書錯誤：本公司的文書錯誤不應令生效的保單因此失效，亦不應令失效的保單因此生效。

25. 違反條文：若受保人違反任何本保單的條文（包括理賠條件），本公司可在法律容許下的範圍內，拒絕支付賠償。

26. 經濟裁制規定：當經貿制裁規定或其他法規禁止我們提供保險（包括但不限於支付賠償金）時，本保險將不適用。保單中的所有其他條款及細則則維持不變。

安達保險香港有限公司是一間美國公司 - Chubb Limited 的子公司/分公司，Chubb Limited 是紐約證券交易所上市公司，因此除了歐盟 - 聯合國和香港的貿易制裁之外，安達保險香港有限公司遭受某些美國法律和法規的約束，這些限制可能禁止其向某些個人或實體提供保號或支付賠償，或者對某些類型的活動及某些國家/地區例如古巴提供保障。

27. 本保單的詮釋：本保單以中英雙語撰寫；而英文版本為正式版本。如因對本保單內任何地方的詮釋而引起任何爭議，均以英文版本為準。
醫療費用 / 住院現金
- 經醫生證明的診斷及治療，包括病人姓名及診斷日期
- 由醫院簽發的醫院賬單 / 收據正本並列明詳細項目
- 購買醫療用品的收據正本

個人財物 / 個人金錢 / 遺失證件
- 收據正本，包括遺失或損毀物件的購買日期、價格、型號及類別
- 展示損毀物件及其情況的相片
- 如在運送時遺失或損毀，由航空公司 / 公共交通工具發出的遺失通知書副本及其正式確認書
- 警方報告（必須於事發後 24 小時內發出）
- 若屬遺失旅行支票，由簽發機構發出的遺失通知書副本（必須於事發後 24 小時內發出）

取消旅程 / 旅程阻礙 / 縮短旅程
- 所有賬單、收據及票券
- 經醫生證明的診斷及治療，包括病人姓名及診斷日期
- 航空公司 / 公共交通工具所發出的正式文件，包括受害人姓名、日期、時間、延誤期間及延誤原因

旅程延誤 / 行李延誤
- 航空公司 / 公共交通工具所發出的正式文件，包括受害人姓名、日期、時間、延誤 / 取消期間及原因
- 酒店 / 航空公司 / 公共交通工具所發出的正式賬單 / 收據
- 由公共交通工具營運商發出之（列明其原定路線及目的地和計劃抵達及 / 或離開時間的）登機證正本

個人責任
- 意外或事件的性質及情況聲明（未經本公司書面同意，不得承認責任或達成和解）
- 就意外或事件接收的所有有關文件（包括法院傳票副本、所有法院文件、律師函件及其他法律書信）

上述文件為提出索償時需要提供的部份文件。本公司保留權利，於有必要時，要求受保人提供上文並未註明的任何其他資料或文件。
第八部分 – 個人資料收集聲明

本公司（「我們」）竭力確保受保人（「閣下」）對我們在收集個人資料方面的信心，我們於處理任何已收集的個人資料均會採取適當的保密程度及以處理私隱手法採用資料。

本個人資料收集聲明陳述我們收集及利用由閣下提供以識別閣下個人的資料（「個人資料」）的目的、個人資料可能被公開的情況及閣下有權要求查閱及更改個人資料的詳情。

(a) 收集個人資料的目的

我們收集及使用閣下個人資料的目的，是為了向閣下提供具優勢的保險產品及服務，包括用作考慮閣下投保任何新的保險產品，及管理由我們提供的保單，安排保費及執行及管理閣下及我們在該等保單下的權利及責任。同時，我們亦會收集及使用閣下個人資料以設計及識別能吸引閣下和服務，進行市場或客戶滿意度調查，及發展、建立及管理與其他機構就宣傳推廣、行政及使用我們相應的產品及服務的聯盟及其他計劃。在閣下的同意下我們亦可能使用閣下的個人資料作其他用途。

(b) 直接促銷

只會在得到閣下的同意，我們會使用閣下的聯絡資料、人口統計資料、保單資料及繳費資料透過郵寄、電郵、電話或 SMS 短訊方式聯絡閣下以便提供有關我們的保險產品的宣傳推廣。如閣下不希望接收到我們的宣傳推廣，請於下列方格內加上「」。

(c) 個人資料的轉讓

個人資料將予以保密，而我們亦絕對不會將閣下個人資料售賣給第三者。我們會對公開閣下個人資料作出限定；但在任何適用的法例條文下，閣下的個人資料可能:

(i) 會被透露予我們相信必須達成以上第 a 及第 b 段所述目的之第三者。例如: 我們會把閣下個人資料提供予我們相關的員工及承辦商、代理及其他涉及以上目的之人士，如處理數據的人士、專業人士、損失評估人員及索償調查員、醫生及其他醫療服務提供者，緊急支援服務提供者，保險局或信貸局、政府機構、分保人及分保紀（當中可能包括在香港以外的第三者）；
(ii) 會給我們的母公司及附屬聯營公司或安達在本地及海外的相關人員使用；
(iii) 會提供予保險中介人，閣下可以透過指定系統查閱有關資料；及
(iv) 會給予有關人士以維持公眾安全及法紀；及
(v) 在閣下同意下提供予其他第三者。

就以上個人資料的轉移，如有適用的地方，則代表閣下亦同意該資料在香港以外地方轉移。

(d) 查閱及更改個人資料

根據個人資料（私隱）條例，閣下有權要求查詢及更改已給予我們的資料。若閣下在個人資料（私隱）條例下有適用的豁免條款賦予閣下可拒絕遵從，否則我們必須按閣下的要求，給閣下查閱及更改本身的個人資料。閣下亦可向我們要求提供持有閣下個人資料的類別。

翻查或更改個人資料的要求，必須透過書面提出及郵寄至:

安達資料私隱主任
香港鰂魚涌英皇道 979 號太古坊一座 39 樓
電話 +852 3191 6222
傳真 +852 2519 3233
電郵 Privacy.HK@chubb.com

在我們收到閣下查閱或更改資料的要求後，會在四十(40)天內予以回覆該項要求，我們一般將不會收取任何費用；但即使我們在提供資料時需徵收費用，它們也會在合理的水平。至於更改資料的要求，則不會收取任何費用。
About Chubb in Hong Kong SAR

Chubb is the world’s largest publicly traded property and casualty insurer. With both general and life insurance operations, Chubb has been present in Hong Kong SAR for more than 90 years via acquisitions by its predecessor companies. Its general insurance operation in Hong Kong SAR (Chubb Insurance Hong Kong Limited) is a niche and specialist general insurer. The company’s product offerings include property, casualty, marine, financial lines and consumer lines designed for large corporates, midsized commercial & small business enterprises as well as retail customers. Over the years, it has established strong client relationships by being consistent and responsive, by offering marketing leading claims services and innovative products, and providing market leadership built on financial strength.

More information can be found at www.chubb.com/hk.

Contact Us

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關於安達香港

安達為全球最大的上市財產及責任保險公司，經營一般保險及人壽保險業務，透過收購其前身公司，已立足香港特別行政區超過90年。安達香港的一般保險業務（安達保險香港有限公司）為大型及中小企業客戶、以及個人客戶設計及提供特定的保險產品，包括財產險、責任險、海上險、金融險和個人保險服務。多年來，安達保險憑著其雄厚財務實力及市場領導地位，開創新的保險產品，提供優質理賠服務，建立長遠穩健的客戶關係，與時並進。

如欲獲取更多資料可瀏覽www.chubb.com/hk。

聯絡我們

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