This Policy is issued / insured by American Home Assurance Company

Melbourne: 549 St. Kilda Road, VIC 3004 (03) 9522 4000
Sydney: 220 George Street, NSW 2000 (02) 9240 1711
Brisbane: 10 Eagle Street, QLD 4000 (07) 3220 0700
Perth: 77 St. George’s Terrace, WA 6000 (08) 9202 1366

This document contains your Insurance Policy terms, Provisos, Exclusions and Conditions. It is important that you read and understand it and retain it in a safe place.
How is your insurance arranged?

This insurance is issued by:

American Home Assurance Company (‘AHAC’)
ABN 67 007 483 267
AFSL: 230903
549 St. Kilda Road
Melbourne Victoria 3004.
Phone: 03 9522 4000

American Home Assurance Company issues / insures this product pursuant to an Australian Financial Services Licence (‘AFSL’) granted to us by the Australian Securities and Investments Commission.

American Home Assurance Company prepares this Product Disclosure Statement (‘PDS’).

Retail Clients

Under our AFSL we are required to provide ‘Retail Clients’ with a Product Disclosure Statement.

A Retail Client means an individual or small business.

‘Small business’ means a business employing less than
(a) if the business is or includes the manufacture of goods - 100 people; or
(b) otherwise 20 people.

Code of Practice, Dispute Resolution and Cooling Off provisions under this insurance will generally apply only to Retail Clients.

Date Prepared: 19 May 2004
S/O PDS 128
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Product Disclosure Statement (‘PDS’)

This PDS contains information about key benefits and significant features of this travel policy. Its purpose is to assist both your decision to purchase insurance and ability to compare products. You should read the PDS before deciding whether to acquire this product.

This booklet also contains important information about your rights and obligations including the duty of disclosure and cooling off for Retail Clients.

Details about the product issuer can be found under ‘How is your insurance arranged’.

The terms and conditions of your insurance are contained in the Policy Wording which commences on page 9 of this booklet.

Key Benefits of your Policy.

This policy provides cover against a range of risks that may arise during Travel undertaken during the policy period. A summary of key benefits that are available to you to choose from is outlined below.

Further details about benefits and when these are available can be found in the ‘Table of Events’ and throughout the Policy Wording.

Medical and Medical Evacuation Expenses

Provides varying levels of cover for overseas Medical Expenses, Ongoing Medical Expenses in Australia (as defined) and emergency transportation expenses incurred whilst Travelling.

Refer to Section 1A, 1B, and 1C of the Policy Wording for details of cover and conditions and exclusions that may apply.

Loss of Deposits and Additional Expenses

Cover for cancellation charges and additional extra expenses arising from unforeseen events such as natural disaster, Injury or Sickness (as defined), false arrest or wrongful detention or being hijacked.

Refer to Section 3 of the Policy Wording for details of cover and exclusions that may apply.

Luggage, Personal Effects, Travel Documents, Money and Credit Cards

Covers accidental loss of or damage to your accompanied luggage, personal belongings including travel documents, portable business equipment /business property, unauthorised use of credit cards and replacement of keys and locks where an Insured Person loses identification and keys at the same time.

Limits apply to any one item.

Refer to Section 4 of the Policy Wording for details of cover and conditions and exclusions that may apply.

Personal Injury

Cover payable as a percentage of the Capital Sum Insured for an Injury (as defined) that results in death or another Event included in the Table of Events in Section 5 of the Policy.

Refer to Section 5 of the Policy Wording for details of cover and special provisions and exclusions that may apply.

Additional cover may be provided in some circumstances under Section 5 by way of Endorsement. Where applicable, any such Endorsement outlining the details of cover will be provided to you at the time of quotation.

Alternative Employee or Resumption of Assignment Expenses

Reimbursement of costs incurred for the resumption of an assignment by the Insured Person who has been repatriated following a specified event, or for the need to send a substitute employee to complete the original business commitments of an Insured Person who is unable to do so due to death, Injury or Sickness.

Refer to Section 6 of the Policy Wording for details of cover and exclusions that may apply.
**Political Risk and Natural Disaster Evacuation Expenses**

Cover for the cost of returning an Insured Person to their Country of residence or the nearest place of safety following the need to leave the country they are in due to a natural disaster, being expelled or officials recommending that certain categories of persons leave the country.

Refer to Section 7 of the Policy Wording for details of cover and exclusions that may apply.

**Missed Transport Connection**

Cover for reasonable extra expenses incurred to enable an Insured Person to use alternative public transport services to arrive at a business meeting or conference on time if they miss their transport connection due to unforeseeable circumstances outside of their control.

Refer to Section 8 of the Policy Wording for details of cover and exclusions that may apply.

**Rental Vehicle Excess Cover**

We will reimburse You or the Insured Person for any excess or deductible which You or the Insured Person become legally liable to pay in respect of loss or damage to a Rental Vehicle during the rental period.

Please note Rental Vehicle means a rented sedan and/or station wagon, rented or hired from a licensed motor vehicle rental company and shall not include any other style of vehicle.

Refer to Section 9 of the Policy Wording for cover and conditions and exclusions that may apply.

**Kidnap and Ransom and Extortion**

Cover for expenses and costs incurred as a result of the kidnapping or alleged kidnapping of an Insured Person, or extortion threats to an Insured Person during the Travel.

Refer to Section 10 of the Policy Wording for details of cover and conditions and exclusions that may apply.

**Personal Liability**

Cover for legal liability for bodily injury or damage to property of others as a result of the Insured Person’s negligence during the Travel.

Refer to Section 11 of the Policy Wording for details of cover and conditions and exclusions that may apply.

**Extra Territorial Workers Compensation**

Indemnity against liability arising during the Travel to pay compensation payable under any Workers Compensation Legislation and damages at Common Law for death, personal injury or occupational disease suffered by an Insured Person as a result of an accident or occurrence during the Travel.

Refer to Section 12 of the Policy Wording for details of cover and conditions and exclusions that may apply.

**Corporate Travellers Family Care**

An accidental death benefit in the event that the Spouse of an insured Person dies as a result of an Injury (as defined) whilst the Insured Person is Travelling and an Education Fund Supplement for each dependant child in the event that the Insured Person dies when Travelling.

Refer to Section 13 of the Policy Wording for details of cover and exclusions that may apply.

**Important Information.**

A range of benefits are available under this Policy. Please note the following:

1. The insurance Policy Wording contains a Definitions section on Page 9, Important Policy Matters on Page 9 and General Exclusions on page 10 and General Conditions that apply to all sections of this insurance commencing at Page 11.

2. Specific definitions and conditions and exclusions may also apply under each Section of the Policy Wording.

3. Limits and sub limits and aggregate limits of liability apply to certain benefits under the plan. These are contained within the Policy Wording that commences on Page 9 of this booklet.

You should read this document carefully and familiarise yourself with all relevant terms, conditions and obligations that may be applicable to this Policy.
4. This booklet also contains important information about the rights and obligations of insured persons including:

- Duty of disclosure—refer page 9
- Code of practice—refer page 7
- Privacy—refer page 8

Age limits

This Policy does not cover any event which happens to an Insured Person unless he or she at the date of such event is under 80 years of age (or is under 65 years of age in respect of Section 5 - Personal Injury Event 2. Permanent Total Disablement, Event 21. Temporary Total Disablement and Event 22. Temporary Partial Disablement).

Emergency and Medical Assistance – AIG Assist

The overseas assistance service in this Section is provided by AIG Assist in conjunction with Your Policy.

1. In the event of an emergency whilst You are outside Australia, AIG Assist is only a telephone call away anywhere in the world - 24 hours a day.

2. AIG Assist is a worldwide team of highly skilled doctors and medical professionals who are available by telephone - 24 hours a day for advice and assistance in the event of a medical emergency and any associated problems for travellers outside Australia.

3. AIG Assist provides the following services in conjunction with the Terms and Conditions of Your Policy:

- Access to a Registered Medical Practitioner for emergency assistance and advice.
- Emergency transportation to the nearest suitable Hospital.
- Emergency evacuation back home if necessary.
- The family back home will be advised of Your medical condition and be kept informed of the situation.
- Payment guarantees to Hospitals and Insurance verification.
- Second opinions on surgery.
- Hospital case management.
- Legal referral service.
- Urgent message service and emergency travel planning.
- Assistance in replacing travel documents, passports and credit cards.

In the event of an emergency overseas, simply call (reverse charge) AIG Assist any time from any place in the world: AUSTRALIA 61 (2) 9251 4298 (The number underlined is the country code and the number in brackets is the area code.)

Costs

Some key factors that we take into consideration when calculating your premium include:

- the estimated number of journeys per annum to both overseas and domestic locations, and
- the trip destinations and modes of transport used; and
- the average duration per trip (total travel days); and
- number of Insured Persons per trip; and
- the benefits and level of cover you select under the policy; and
- any Endorsements applied that provide additional cover.

The Premium will be detailed on the Certificate of Insurance. Applicable Commonwealth and State taxes and/or charges, including the Goods and Services Tax and Stamp Duty, will be shown separately.

Throughout the course of a year additional premiums may be collected if for example, the sums insured are varied at the request of the insured. Also at the end of each annual renewal period, premiums may be increased or decreased depending on the actual number of travel days taken.

Deductible or Excess

Excess amounts may apply to certain sections of this policy, in which case you will have to pay the first amount of each claim under those sections. Any excess amount to apply will be detailed in the Schedule of Compensation.

Elimination Period

An Elimination Period is the initial period of disablement for which no benefit is payable under Section 5 B of this policy (Weekly Injury Benefit). The Elimination Periods to apply will be detailed in the Policy Schedule.
**Cooling Off Period**

If this insurance is purchased by a Retail Client, a cooling off period applies.

This means it may be returned to us, or your insurance intermediary, within 14 days of the date of purchase provided that no claim has arisen nor the journey commenced. In these circumstances we will cancel the policy and provide you with a full refund of premiums collected.

**Code Of Practice**

American Home Assurance Company is a signatory to the General Insurance Code of Practice. This aims to raise the standards of practice and service in the insurance industry, and it includes the following:

- When you lodge a claim we will tell you in plain language what information we need and how you should go about making your claim.
- We will respond promptly to any requests you make for assistance with your claim and it will be considered and assessed promptly.

**Dispute Resolution**

We are committed to handling any complaints about our products or services efficiently and fairly.

If you have a complaint:

1. Contact your insurance intermediary and they may raise it with us.
   
2. If your complaint is not satisfactorily resolved you may request that your matter be reviewed by management by writing to:

   The Compliance Manager
   American Home Assurance Company
   549 St Kilda Road, Melbourne
   VICTORIA 3004

3. If you are still unhappy, you may request that the matter be reviewed by Our Internal Dispute Resolution Committee ("Committee"). We will respond to you with the Committee’s findings within 15 working days.

4. If you are not satisfied with the finding of the Committee, you may be able to take your matter to an independent dispute resolution body, Insurance Enquiries and Complaints Limited (IEC). This external dispute resolution body can make decisions with which AHAC are obliged to comply.

   Contact details are:

   Insurance Enquiries and Complaints Limited
   Phone: 1300 780 808 (local call fee applies)
   
   PO Box 561, Collins St West Post Office,
   Melbourne, VIC 8007
   or
   3/56 Pitt Street, Sydney 2000

**How to Make a Claim.**

Written notice of a claim must be given to Us within 30 days after the happening of any circumstances giving rise to a claim or as soon as possible thereafter. Notice may be provided by completing a claim form available at any of Our Offices, or advising us by telephone on 1800331013 or by submitting a claim over the internet at [www.aig.com.au](http://www.aig.com.au). We will advise if additional information is required and you may provide this to Us in a reasonable time.

Claims need to be supported by original supporting reports and documentation such as police reports, doctor's reports, transport provider's reports, receipts, valuations or proof of ownership to the address shown above. In the event of a claim under some policy sections an excess will apply. Please refer to the **Policy Wording**.
American Home Assurance Company ("AHAC") is a wholly owned subsidiary of the American International Group ("AIG"). AHAC has adopted the General Insurance Information Privacy Code ("the Code"). The Code applies to any personal information collected by AHAC.

PURPOSE OF COLLECTION

AHAC collects information necessary to underwrite and administer your insurance cover, to maintain and to improve customer service and to advise you of other products which we, our agents or business partners distribute. You have a duty under the Insurance Contracts Act to disclose certain information. Failure to comply with your duty of disclosure or to provide certain information may result in AHAC either declining cover, cancelling your insurance cover or reducing the level of cover.

In the course of administering your policy we may disclose your information to:

(i) another member of the AIG group of companies either in Australia or overseas.
(ii) contractors or third party providers providing services related to the administration of your policy.
(iii) banks and financial institutions for the purpose of processing your application and obtaining policy payments.
(iv) In the event of a claim, assessors, third party administrators, emergency providers, retailers, medical providers, travel carriers

We will only disclose your personal information to these parties for the primary purpose for which it was collected. In some circumstances AHAC is entitled to disclose your personal information to third parties without your authorisation such as law enforcement agencies or government authorities.

In the case of Group Travel Policies and Expat Policies we may also disclose claims information to the Insured however we will not divulge any sensitive information without your consent.

ACCESS TO YOUR INFORMATION

You may gain access to your personal information by a written request to AHAC.

In some circumstances, AHAC may not permit access to your personal information.

Circumstances where access may be denied include where it would compromise the privacy of other individuals, or where it would be unlawful.

AHAC has also established an internal dispute resolution process for handling customer complaints and an access and correction procedure. Both procedures are generally free of charge however we reserve the right to charge for access requests in limited circumstances.

If you feel you have a complaint about AHAC’s Information Privacy Principles, require assistance in lodging a privacy complaint, or you wish to gain access to the information, you may write to The Privacy Manager, American Home Assurance Company, 549 St Kilda Road, Melbourne, or e-mail australia.privacy.manager@aig.com. Your complaint will be reviewed and you will be provided with a written response. If it cannot be resolved, your complaint will be referred to AHAC’s Internal Disputes Resolution Committee who will respond within 15 working days. In either case the matter will be reviewed by a person or persons with appropriate authority to deal with the complaint.

Should your complaint not be resolved by AHAC’s internal dispute resolution process, you may take your complaint to the Insurance Enquiries and Complaints Privacy Compliance Committee. This service is free of charge to you and the Committee has the power to investigate complaints and recommend appropriate action to AHAC to remedy your complaint. The Privacy Compliance Committee may refer a complaint to the Privacy Commissioner or another code adjudicator where it is more appropriate to do so. A person aggrieved by a determination made by the Privacy Compliance Committee may apply to the Privacy Commissioner for review of the determination.
IMPORTANT POLICY MATTERS

This Policy consists of Sections and provides the Insured Person with insurance cover under those Sections selected by You in Your application for this insurance and shown in the Policy Schedule.

All cover is subject to You paying or agreeing to pay the required premium, and is subject to all the Terms, Provisos, Conditions and Exclusions of the Policy including the Policy Schedules.

This Policy shall only apply to events that occur during the Policy Period as set out in the Policy Schedule or Renewal Notice.

This Policy does not apply to events that occur after 180 consecutive days of an Insured Person’s Travel, unless We have agreed in writing to extend cover beyond this period.

You or the Insured Person must follow Our or AIG Assist advice or instruction otherwise We may decline to pay part or all of Your claim.

YOUR DUTY OF DISCLOSURE

What You must tell Us
When answering Our questions, You must be honest and You have a duty under law to tell Us anything known to You, and which a reasonable person in the circumstances, would include in answer to the question. We will use the answers in deciding whether to insure You and anyone else to be insured under the Policy, and on what terms.

Who needs to tell Us
It is important that You understand You are answering Our questions in this way for Yourself and anyone else whom You want to be covered by the Policy.

If You do not tell Us
If You do not answer Our questions in this way We may reduce or refuse to pay a claim, or cancel a Policy. If you answer Our questions fraudulently, We may refuse to pay a claim and treat the Policy as never having worked.

DEFINITIONS

In this Policy the following definitions apply:

Country of Residence means:
(a) the country the Insured Person is a citizen or permanent resident of (i.e. holder of a multiple entry visa or permit which gives the Insured Person resident health care rights in such country); or
(b) the country in which the Insured Person is residing on an overseas expatriate assignment.

It also means the country You, the Insured Person or the Insured Person’s representative would like Us to return the Insured Person to when repatriation is necessary.

Dependant Children means the Insured Person’s unmarried Dependant Children who are under 19 years of age and living with the Insured Person, or under 25 years of age and are full-time students at an accredited institution of higher learning and primarily Dependant upon the Insured Person for maintenance and support. This includes step or legally adopted children.

Excess means first amount of each and every loss payable by You or the Insured Person as shown in the Schedule of Compensation.

Injury means a bodily injury to an Insured Person resulting from an accident caused by violent, external and visible means and occurring solely and directly and independently of any other cause including any sickness, disease, pre-existing physical or congenital condition (except sickness directly resulting from medical or surgical treatment rendered necessary by such Injury), provided the Injury:
(a) occurs on or after the Insured Person’s cover commencement date as described under the Period of Individual Cover in the Policy Schedule; and
(b) results in any of the events specified in the Policy.

Insured Person(s) means any person(s) who come within the description of the Insured Persons appearing in the Policy Schedule, who are nominated by You from time to time for insurance under this Policy and with respect to whom premium has been paid or agreed to be paid.
Policy Period means the period shown in the Policy Schedule or subsequent Renewal Notice issued by Us.

Professional Sports means any sport for which You receive any fee or monetary reward as a result of your participation.

Relative means the Spouse, parent, parent-in-law, grandparent, step-parent, child, step-child, grandchild, brother, brother-in-law, sister, sister-in-law, daughter-in-law, son-in-law, fiancée, fiancé, half-brother, half-sister, aunt, uncle, niece or nephew of the Insured Person, provided such person(s) are under 80 years of age and reside in the Insured Person’s Country of Residence.

Serious Injury or Serious Sickness means a serious injury or sickness for which the attending medical practitioner certifies that the attendance of the Insured Person is necessary given the immediate threat to the injured or sick person’s life. It does not mean a terminal condition diagnosed prior to the commencement of Travel or any chronic or other medical condition (other than mild and controlled asthma or hypertension) for which the person on whom the claim depends:

(a) has received daily medical treatment or medication in the 30 days immediately prior to the commencement of Travel; or
(b) required hospitalisation or surgery (or was on a waiting list for hospitalisation or surgery) in the 6 months immediately prior to the commencement of Travel.

Sickness means sickness or disease of the Insured Person occurring during the Travel, but does not include a terminal condition of the Insured Person diagnosed prior to the commencement date of the Travel.

Spouse means the husband or wife or any de facto partner with whom the Insured Person has continuously lived during the 3 months immediately prior to the commencement date of the Travel.

Travel/Travelling means the Period of Individual Cover as described in the Policy Schedule.

We/Our/Us/ Insurer means American Home Assurance Company ABN 67 007 483 267.

You/Your means the Insured named in the Policy Schedule.

War means war, whether declared or not, or any warlike activities, including use of military force by any sovereign nation to achieve economic, geographic, nationalist, political, racial, religious or other ends.

Terrorist Act means any actual or threatened use of force or violence directed at or causing damage, injury, harm or disruption, or committing of an act dangerous to human life or property, against any individual, property or government, with the stated or unstated objective of pursuing economic, ethnic, nationalist, political, racial or religious interests, whether such interests are declared or not. Robberies or other criminal acts, primarily committed for personal gain and acts arising primarily from prior personal relationships between perpetrator(s) and victim(s) shall not be considered Terrorist Acts.

Terrorism shall also include any act which is verified or recognized by the (relevant) Government as an act of terrorism.

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

Words in the singular include the plural and vice versa.

GENERAL EXCLUSIONS APPLYING TO ALL SECTIONS

We will not pay under any Section of this Policy for claims arising directly or indirectly out of:

1. War, civil war, invasion, insurrection, revolution, use of military power or usurpation of government or military power.
2. Air travel except as a passenger in a properly licensed aircraft.
3. Intentional self-inflicted injury or suicide.
4. Pregnancy or childbirth (except for an unexpected medical complication or emergency occurring during the first 30 weeks of the pregnancy).
5. Sexually transmitted disease or Acquired Immune Deficiency Syndrome (A.I.D.S.) or Human Immunodeficiency Virus (H.I.V.) infection.
6. Training for or participating in Professional Sports of any kind.
7. Radioactive contamination or radioactivity in any form whatsoever whether occurring naturally or otherwise.

8. Any criminal or intentional illegal act of You or the Insured Person.

9. The refusal, failure or inability of any person, company or organisation, including but not limited to any airline, other transportation provider, hotel, car rental agency, tour or cruise operator, travel wholesaler, booking agent or other provider of travel or tourism related services, facilities or accommodation, to provide services, facilities or accommodation, by reason of their own Financial Default or the Financial Default of any person, company or organisation with whom or with which they deal.

AGE LIMITS

This Policy does not cover any event which happens to an Insured Person unless he or she at the date of such event is under 80 years of age (or is under 65 years of age in respect of Section 5 - Personal Injury Event 2. Permanent Total Disablement, Event 21. Temporary Total Disablement and Event 22. Temporary Partial Disablement).

GENERAL CONDITIONS APPLYING TO ALL SECTIONS

1. Notice of Claim
   Written notice of claim must be given to Us within 30 days after the happening of any circumstances giving rise to a claim or as soon as possible thereafter.

2. Proof of Loss and Physical Examination
   After We receive notice of a claim We will provide You with Our usual claim forms for completion. The claim forms must be properly completed and all evidence required by Us shall be furnished in a timely manner at the expense of You or the Insured Person and be in such form and of such nature as We may require. We may at Our own expense conduct any medical examination or arrange for an autopsy to be carried out unless it is illegal to do so.

3. Compliance
   You or the Insured Person must follow Our or AIG Assist’s advice or instruction otherwise We may decline to pay part or all of Your claim.

4. Subrogation
   We have the right to commence or take over legal proceedings in Your and/or the Insured Person's name for the defence or settlement of any claim, or to sue or prosecute any other party to recover any monies payable by them at law. You and the Insured Person must co-operate with Us and do nothing to hinder Our rights.

5. Cancellation
   (a) This Policy may be cancelled by You at any time by giving Us written notice, in which case We will retain the proportion of the premium calculated at Our usual short term rates for the period the Policy was in force.

   (b) This Policy may be cancelled by Us if You or the Insured Person have been in breach of any of its Terms or Conditions or in accordance with Sections 59 and 60 of the Insurance Contracts Act 1984, in which case We will refund the proportion of the premium for the unexpired Policy Period.

6. Currency
   All amounts shown are in Australian dollars. If expenses are incurred in a foreign currency, then the rate of currency exchange used to calculate the amount payable will be the rate at the time of incurring the expense or suffering a loss.

7. Aggregate Limits of Liability
   (Applicable to Sections 3, 4, 5, 6, 7, 8, and 9)
   (a) Except as provided in 7.(b), 7.(c) and 7.(d), Our total liability for all claims under one or more of the above Sections which arise out of any one event or series of related events, shall not exceed the amount specified in the Policy Schedule.

   (b) Our total liability for all claims directly arising out of air travel in aircraft whose flights are not conducted in accordance with fixed schedules to and from fixed terminals over specific routes, shall not exceed the amount specified in the Policy Schedule.

   (Applicable to Section 10)
   (c) Our total liability for all claims arising under Section 10 (Kidnap and Ransom and Extortion) which arise out of any one event or series of related events, shall not exceed the amount specified in the Policy Schedule.

   (Applicable to Section 11)
   (d) Our total liability for all claims arising under Section 11 (Personal Liability) which arise out of any one event or series of related events, shall not exceed the amount specified in the Policy Schedule.

8. Australian Law
   This Policy is governed by the Laws of the Australian State or Territory it was issued in and any dispute or action in connection therewith shall be conducted and determined in Australia.
9. **Automatic Extensions**  
We will automatically extend the Insured Person’s cover for up to 3 calendar months from the date of the Insured Person’s expected return to his or her Country of Residence if such return is put back due to delay of transport or the Insured Person’s inability to Travel due to an Injury or Sickness for which a claim is payable under this Policy.

10. **Renewal**  
This Policy may be renewed with Our consent from term to term, providing the Insured pays or agrees to pay the required renewal premium.

11. **Fraudulent Claims**  
If any claim is in any respect fraudulent or if any fraudulent means or devices are used by You or the Insured Person or anyone acting on Your or the Insured Person’s behalf to obtain any benefit under this Policy then any amount payable in respect of such claim shall be forfeited.

12. **Claim Offset**  
Except for Section 5. Personal Injury, Events 1-19 inclusive, there is no cover under this Policy for any loss or event or liability which is covered under any other insurance policy, health or medical scheme or Act of Parliament or is payable by any other source. We will however pay the difference between what is payable under the other insurance policy, health or medical scheme or Act of Parliament or such other source and what You or the Insured would be otherwise entitled to recover under this Policy, where permissible under Law.

13. **Tax or Imposts**  
Where the Company is, or believes it will become, liable for any tax or other imposts levied by any Commonwealth or State government, authority or body in connection with this Policy, the Company may reduce, vary or otherwise adjust any amounts (including but not limited to premiums, charges and benefits), under this Policy in the manner and to the extent the Company determines to be appropriate to take account of the tax or impost.
SECTION 1 - MEDICAL AND MEDICAL EVACUATION EXPENSES

SECTION 1A - OVERSEAS MEDICAL EXPENSES

DESCRIPTION OF COVER
If an Insured Person whilst Travelling incurs Medical Expenses, We will pay You or the Insured Person for those expenses provided that they are incurred outside of the Insured Person's Country of Residence.

DEFINITIONS - SECTION 1A
Medical Expenses means all reasonable costs necessarily incurred outside the Insured Person's Country of Residence for:

1. Injury or Sickness resulting in hospital, surgical or other diagnostic or remedial treatment given or prescribed by a registered and legally qualified medical practitioner.
2. Emergency Optical treatment provided by a registered and legally qualified medical practitioner or optician. No cover is provided for routine optical treatments.
3. Emergency Dental treatment provided by a registered and legally qualified dentist for the relief or management of dental pain. No cover is provided for normal maintenance of dental health, or lack thereof.

SECTION 1B - ONGOING MEDICAL EXPENSES IN AUSTRALIA

DESCRIPTION OF COVER
If an Insured Person during a Policy Period incurs Ongoing Medical Expenses in Australia for an:

1. Injury or Sickness; or
2. Dental or optical condition arising out of an Injury;

which was first treated outside the Insured Person's Country of Residence during a period of Travel, We will pay You or the Insured Person for those expenses.

DEFINITIONS - SECTION 1B
Ongoing Medical Expenses in Australia means all reasonable costs necessarily incurred for Injury or Sickness, or Injury related dental or optical condition, resulting in hospital, surgical or other diagnostic or remedial treatment given or prescribed by a qualified medical practitioner, dentist or optician. Ongoing Medical Expenses in Australia does not include those expenses We are prohibited by law from paying and will only be paid to the extent permissible under the agreement existing between American Home Assurance Company and Government Employees Health Fund Limited (A.C.N. 003 683 298) or other Registered Health fund. A copy of the compensation schedule can be requested from any American Home Assurance Company branch in Australia.

SECTION 1C - OVERSEAS MEDICAL EVACUATION EXPENSES

DESCRIPTION OF COVER

1. Emergency Transportation Services
   If during Travel an Insured Person suffers Injury or Sickness covered under Section 1A (Overseas Medical Expenses) that necessitates emergency air, land or water transportation:
   (a) to another location to obtain necessary medical treatment; or
   (b) repatriation to Country of Residence; then

   We will pay for the cost of the required service including any necessary accompanying medical staff.

   We will also pay for the cost of returning the Insured Person to the location from where they were evacuated unless We had returned them to Country of Residence (refer Section 6. - Resumption of Assignment).

CONDITIONS

- If You or the Insured Person want Us to pay for the emergency transportation service then AIG Assist must be contacted and their prior written agreement obtained. (This requirement does not include in-country emergency
ambulance transfers from place of Injury or Sickness to a hospital, which will be paid by Us providing such service was medically necessary or was authorised by a local authority (e.g. police or medical officer)).

- We will decide where and how to move the Injured or Sick Insured Person depending on the medical advice received.
- We will use the Insured Person’s return ticket towards Our costs if the Insured Person is returned to his or her Country of Residence.
- This Benefit does not apply in Your or the Insured Person’s Country of Residence.

2. Repatriation of Mortal Remains/Burial Expenses
In the event of the death of the Insured Person, We will pay the reasonable cost of returning his or her remains to Country of Residence or the reasonable funeral and related costs if the body is buried or cremated at the place of death.

3. Accompanying Family Member
If the Insured Person suffers Injury, Sickness or dies during the Travel We will pay the reasonable extra travel and accommodation expenses, incurred upon medical advice and with Our prior written agreement, for one person to travel to, remain with or accompany the Insured Person back to his or her Country of Residence.

The maximum amount We will pay is limited by the specified Sum Insured in the Schedule of Compensation.

EXCLUSIONS - In addition to the General Exclusions applying to all Sections
We will not pay for:

1. Any expenses recoverable by You or the Insured Person from any other source.
2. Medical Expenses incurred within Country of Residence except if such Country is Australia and then only in accordance with Section 1B (Ongoing Medical Expenses in Australia).
3. Any expenses We are prohibited by law from paying (including those outlined under the National Health Act 1953 and the Australian Health Insurance Act 1973, amendments thereto and any other subsequent legislation which is enacted).
4. Expenses incurred when the Insured Person is Travelling against medical advice or to seek medical attention or advice or with a terminal condition which was diagnosed prior to Travel or when he or she is unfit to do so.
5. Expenses incurred for continuing treatment, including any medication commenced prior to the commencement date of the Travel, which the Insured Person has been advised to continue whilst Travelling.
6. Any expenses incurred more than 12 calendar months after the date of Injury, or in the case of Sickness, after the date on which the Medical Expenses were first incurred.

SECTION 2 - AIG ASSIST
DESCRIPTION OF COVER
An Insured Person is entitled to the worldwide services of AIG Assist.

In the event of a medical or other emergency overseas, the Insured Person should simply call - reverse charge - the AIG Assist telephone number shown on the Emergency Travel card which has been supplied to You and which should be carried by all Insured Persons travelling outside their Country of Residence.

AIG Assist is a worldwide team of doctors, medical professionals and insurance specialists who are available 24 hours a day for advice and assistance for medical emergencies and any associated problems for Insured Persons outside his or her Country of Residence.

If the Insured Person needs advice while overseas regarding the terms and conditions of this Policy, or advice regarding the replacement of lost or stolen luggage, credit cards or any similar problems - AIG Assist is a free telephone call away.

AIG Assist arranges access to the following services free of charge, but subject to the Terms and Conditions of Your Policy and applicable law(s):

- Pre-departure health information.
- Access to a registered medical practitioner for emergency assistance and advice.
- You will be kept informed of Insured Person’s condition and progress.
- Location of Australian Embassies and Consulates.
Emergency transportation to the nearest suitable hospital.

Payment guarantees to hospitals and insurance verification.

Second opinions on surgery.

Hospital case management.

Emergency evacuation to the Insured Person's home if necessary.

Advice to the family at home of the Insured Person's medical condition and progress.

Legal referral service.

Assistance in replacing travel documents and passports.

Assistance in cancelling and replacing lost or stolen credit cards and Insured Persons cheques.

Assistance and advice regarding the replacement of lost or stolen luggage.

Urgent message service and emergency travel planning.

SECTION 3 - LOSS OF DEPOSITS AND ADDITIONAL EXPENSES

DESCRIPTION OF COVER

1. Loss of Deposits

We will reimburse You or the Insured Person:

The non-refundable unused portion of travel or accommodation arrangements paid for in advance by You or the Insured Person following necessary cancellation, alteration or incompletion of the Insured Person's Travel due to:

(a) the Insured Person’s unexpected death, Injury or Sickness; or

(b) the unexpected death or Serious Injury or Serious Sickness happening after the commencement date of the Travel of an Insured Person’s Relative, close business associate or travelling companion, provided that this person is under 80 years of age; or

(c) any other unforeseen circumstances occurring during Travel and outside the control of You or the Insured Person, other than those circumstances described in (a) or (b) above or specifically described elsewhere in this Policy.

2. Additional Cancellation / Curtailment / Interruption Expenses

We may choose to reimburse You or the Insured Person or pay direct to the provider, the expenses reasonably and necessarily incurred in addition to those already budgeted for or likely to be incurred but less any refund on unused prepaid travel and accommodation arrangements, as a result of:

(a) the Insured Person suffering an Injury or Sickness during the Travel; or

(b) the Insured Person having to return to his or her Country of Residence or place of departure within his or her Country of Residence during the Travel due to the unexpected death or Serious Injury or Serious Sickness of a Relative, close business associate or travelling companion, provided that this person is under 80 years of age; or

(c) any other unforeseen circumstances occurring during Travel and outside the control of You or of the Insured Person, other than those circumstances described in (a) or (b) above or specifically described elsewhere in this Policy.

Note: If the Insured Person needs to return home early for any reason AIG Assist must be contacted beforehand to confirm cover. AIG Assist will also help with the travel arrangements.

3. Frequent Flyer Points

Where an airline ticket was purchased using frequent flyer or similar air points, We will pay the Insured Person for the frequent flyer or similar air points lost following cancellation of the Insured Person’s airline ticket. The amount payable will be calculated as follows:

(a) the cost of the equivalent class airline ticket, based on the quoted retail price at the time the ticket was issued, less Your or the Insured Person’s financial contribution towards the airline ticket;

multiplied by

(b) the total value of points lost divided by the total value of points used to obtain the airline ticket.

For this Benefit to become payable:
(a) the reason for cancellation must be an insured event under this Section of the Policy, and
(b) the loss of such points cannot be recovered from any other source.

4. Other Expenses

We will pay:

(a) In Hospital Cash Benefit
   $200 for each completed 24 hour period an Insured Person is hospitalised overseas as an in-patient due to
   Injury or Sickness, up to a maximum of 25 days (i.e. $5,000).

(b) Legal Expenses
   The reasonable legal costs actually and necessarily incurred as a result of the false arrest or wrongful
   detention of the Insured Person during Travel by any internationally recognised foreign Government, up to a
   maximum of $50,000.

(c) Hijack
   $1,000 for each 24 hour period that an Insured Person is illegally detained during Travel as a result of the
   public transport on which he or she is travelling being hijacked, up to a maximum of 15 days (i.e. $15,000).

The maximum amount We will pay is limited by the specified Sum Insured in the Schedule of Compensation.

EXCLUSIONS - In addition to the General Exclusions applying to all Sections

We will not pay for any expenses arising directly or indirectly out of:

(a) Cancellation, curtailment or diversion of scheduled public transport services, including by reason of strikes or other
    industrial action, if there had been media warning before the date the particular Travel was booked that such events
    were likely to occur.

(b) Carrier caused delays where the cost of the expenses are recoverable from the carrier.

(c) Any business or employment commitment or financial or contractual obligation of You, the Insured Person or any
    other person on whom the Travel depends.

(d) Any change of plans, or disinclination on the part of the Insured Person or of any other person to Travel.

(e) The inability of any tour operator or wholesaler to complete arrangements for any tour due to a deficiency in the
    required number of persons to commence any tour or Travel.

(f) A terminal condition of the Insured Person diagnosed prior to commencement of the Travel, or the Insured Person
    Travelling against medical advice or to seek medical attention or advice or when he or she is unfit do so.

SECTION 4 - LUGGAGE, PERSONAL EFFECTS, TRAVEL DOCUMENTS, MONEY AND CREDIT CARDS

DESCRIPTION OF COVER

1. Property
   We will pay for accidental loss of or damage to the Insured Person’s accompanied luggage, personal effects, portable
   business equipment (including computers and mobile phones) and business property (including business papers,
   specifications, manuscripts, and stationery for the cost of reproducing such documents but excluding research and
   development costs), that occurred during Travel.

2. Mislaid Luggage
   We will pay the reasonable expenses incurred during Travel for the emergency replacement of essential items if
   during the Travel the Insured Person’s luggage is delayed, misdirected or temporarily misplaced by any carrier for
   more than 8 consecutive hours. The maximum amount We will pay is $3,000. Claims must be supported by written
   confirmation from the carrier responsible and receipts for the replacement items the Insured Person needed to
   purchase.

3. Travel Documents
   We will pay the non-recoverable cost of replacing the Insured Person’s travel documents, credit cards or traveller’s
   cheques should they be lost or damaged during Travel.
4. **Credit Card Fraud**
We will pay Your or the Insured Person's legal liability for payment arising out of unauthorised use of Your or the Insured Person's Travel documents, credit cards or traveller’s cheques following theft during Travel by any person other than the Insured Person's Relative or travelling companion. The maximum amount We will pay is $3,000.

5. **Money**
We will pay for accidental loss of the Insured Person’s cash, bank or currency notes, cheques, postal or money orders or other negotiable instruments, that occurred during Travel.

In respect of money secured for the purpose of Travel, cover shall commence at the time of collection from the bank or 72 hours prior to the start of the Travel whichever occurs last and shall continue for 72 hours after termination of the Travel or until deposited at the bank, whichever occurs first.

6. **Keys and Locks**
We will reimburse up to $1,000 of the costs actually incurred for the replacement of keys and locks where an Insured Person loses identification and keys at the same time.

**SUM INSURED**

Except as provided for under 2. Mislaid Luggage, the maximum amount We will pay for any one item, set or pair of items is 25% of the Sum Insured for this Section or $2,000, whichever is the greater, unless otherwise specified in the Schedule of Compensation.

The maximum amount We will pay is limited by the specified Sum Insured in the Schedule of Compensation.

**BASIS OF SETTLEMENT**

The basis of settlement under this Section will be the replacement value of items and at Our discretion We may choose to replace, repair, or pay for the loss in cash.

**CONDITIONS**

1. It is a condition of payment under this Section that all loss or damage attributable to theft, vandalism or loss or damage by carriers be reported to the local police or appropriate authority as soon as possible after the discovery of the loss, and a written acknowledgement of the report obtained.

2. Any loss of credit cards, traveller’s cheques or travel documents must be reported as soon as possible to the issuing authority and the appropriate cancellation measures taken.

3. The Insured Person shall take all reasonable precautions for the safety and supervision of any insured luggage, personal effects, travel documents, money and credit cards.

**EXCLUSIONS - In addition to the General Exclusions applying to all Sections**

We will not pay for:

1. Damage or loss arising from electrical or mechanical breakdown of any item.

2. Damage to or replacement of any electronic data or software.

3. Scratching or breakage of fragile or brittle items. This Exclusion does not apply to photographic or video equipment, binoculars, spectacles or contact lenses.

4. Damage or loss arising from wear and tear, deterioration, atmospheric or climatic conditions, mould or fungus, insects, rodents, vermin, or any process of cleaning, ironing, pressing, repairing, restoring or alteration.

5. Luggage, personal effects, business property, travel documents or money shipped under any freight agreement, or items sent by postal or courier services or given to someone else other than a travelling companion.

6. Losses due to depreciation or devaluation of currency.

7. Loss or damage arising from confiscation or destruction by Customs or any other authorities.

8. Losses recoverable from any other source, e.g. airlines, or other insurance including automatic credit card travel insurance.

9. Personal computers, mobile phones or any electronic equipment;

   (a) where theft or attempted theft occurs while such equipment is unattended other than when securely locked inside a building or securely locked out of sight inside a motor vehicle, however this Exclusion 9(a) shall not
apply in circumstances where the Insured Person leaves such property temporarily unattended whilst on any conveyance and takes all reasonable precaution to safeguard the property and has no option other than to leave the property temporarily unattended; or

(b) whilst carried in or on any conveyance unless they accompany an Insured Person as personal cabin luggage.

10. Contractual obligations in relation to a mobile phone purchase.

11. Any goods intended for sale or trade in excess of $1,000 in total.

12. Household furniture and household appliances unless acquired during the Travel for personal use in the Insured Person's country of Residence and non-portable business property, computer or electronic equipment.

SECTION 5 - PERSONAL INJURY

DESCRIPTION OF COVER

If an Insured Person during a Period of Individual Cover suffers an Injury which results within 12 consecutive months in any Event described in the Table of Events, We will pay You the Compensation stated in the Table.

EXPOSURE

If an Insured Person suffers an Event as a direct result of exposure to the elements, We will pay the Compensation shown for that Event.

DISAPPEARANCE

If an Insured Person disappears and after 12 calendar months it is reasonable for Us to believe they have died due to an insured Injury, We will pay the Compensation shown for Event 1. (Death) subject to receipt of a signed undertaking by You that any such Compensation shall be refunded if it is later demonstrated that the Insured Person did not die as a result of an Injury.

TABLE OF EVENTS

SECTION A - CAPITAL BENEFITS

Cover under this Section is included only for the Events specified in the Policy Schedule. The Compensation for each Event is payable as a percentage of the Capital Sum Insured shown in the Policy Schedule.

THE EVENTS THE COMPENSATION

Injury as defined, resulting in:

1. Death 100%

2. Permanent Total Disablement 100%

3. Permanent Paraplegia or Quadriplegia 100%

4. Permanent Total Loss of sight of both eyes 100%

5. Permanent Total Loss of sight of one eye 100%

6. Permanent Total Loss of use of two limbs 100%

7. Permanent Total Loss of use of one limb 100%

8. Permanent Total Loss of the lens of both eyes 100%

9. Permanent Total Loss of the lens of one eye 50%

10. Permanent Total Loss of hearing in

   (a) both ears 75%

   (b) one ear 15%

11. Third degree burns and/or resultant disfigurement received from fire or chemical reaction which extend to cover more than 40% of the entire external body 50%

12. Permanent Total Loss of use of four fingers and thumb of either hand 70%

13. Permanent Total Loss of use of four fingers of either hand 40%

14. Permanent Total Loss of use of one thumb of either hand

   (a) both joints 30%

   (b) one joint 15%

15. Permanent Total Loss of use of fingers of either hand
(a) three joints 10%
(b) two joints 7%
(c) one joint 5%

16. Permanent Total Loss of use of toes of either foot
   (a) all – one foot 15%
   (b) great – both joints 5%
   (c) great – one joint 3%
   (d) other than great each toe 1%

17. Loss of at least 50% of all sound and natural teeth, including Per tooth 1% (to $10,000 in
capped or crowned teeth, but excluding first teeth and dentures total for all teeth)
18. Shortening of leg by at least 5cm 7%

19. Permanent Partial Disablement not otherwise Such percentage of the Capital Sum
   provided for under Events 9 to 18 inclusive Insured as We in Our absolute discretion
   shall determine and being in Our opinion not inconsistent with the Compensation provided under Events 9 to 18 inclusive. The maximum amount payable under
   Event 19 is 75% of the Capital Sum Insured shown in the Schedule of
   Compensation.

ADDITIONAL BENEFITS

20. Broken Bone Benefits – Injury resulting in:
   (a) neck or spine (full break) $5,000
   (b) hip, pelvis $2,500
   (c) skull, shoulder blade $1,000
   (d) collar bone, upper leg $1,000
   (e) upper arm, kneecap, forearm, elbow $750
   (f) lower leg, jaw, wrist, cheek, ankle, hand, foot $500
   (g) ribs (per rib) $200
   (h) finger, thumb, toe (per finger, thumb, toe) $150
   Maximum Compensation any one accident $5,000

SECTION B - WEEKLY INJURY BENEFIT

Cover under this Section is included only if specified in the Policy Schedule.

THE EVENTS

Injury as defined, resulting in:

21. Temporary Total Disablement 21. During such Disablement the amount per week specified in the Policy Schedule or
   Income as defined, whichever is the lesser.

22. Temporary Partial Disablement 22. During such Disablement:
   (a) if the Insured Person returns to work in a reduced capacity, the Compensation payable shall be the difference between
   the Compensation for Event 21 per week and the weekly Income earned from personal exertion per week; or
   (b) if the Insured Person does not return to work, the Compensation shall be 25% of the Compensation for Event 21 per week.

DEFINITIONS

1. Temporary Total Disablement means that as a result of Injury the Insured Person is wholly and continuously
   prevented from engaging in his or her usual occupation in Australia, and is under the regular care of and acting in
   accordance with the instructions or professional advice of a registered and legally qualified medical practitioner
   who is not the Insured Person or a family member.
2. **Temporary Partial Disablement** means that as a result of Injury the Insured Person is wholly and continuously prevented from engaging in more than 50% of the duties of his or her usual occupation in Australia, and is under the regular care of and acting in accordance with the instructions or professional advice of a registered and legally qualified medical practitioner who is not the Insured Person or a family member.

3. **Permanent** means lasting 12 consecutive months and at the end of that period being beyond hope of improvement.

4. **Permanent Total Disablement** means total disablement which continues for 12 consecutive months and at that time is certified by a registered and legally qualified medical practitioner (who is not the Insured Person or a family member) as being beyond hope of improvement and entirely preventing the Insured Person forever from engaging in any business, profession, occupation or employment for which he or she is reasonably qualified by training, education or experience.

5. **Paraplegia** means Permanent and entire paralysis of both legs and part or whole of the lower half of the body.

6. **Quadruplegia** means Permanent and entire paralysis of both legs and both arms.

7. **Total Loss** means the Permanent and total physical loss of the body part referenced in the Table of Events. Where that body part is a limb, hand, foot, finger or toe Total Loss means the total Permanent physical loss or loss of use of that body part referenced in the Table of Events, or for an eye entire and irrecoverable loss of sight in that eye or for an ear entire and irrecoverable loss of hearing in that ear or speech entire and irrecoverable loss of speech.

8. **Limb** means the entire limb between the shoulder and the wrist or between the hip and the ankle.

9. **Hand** means the entire hand below the wrist.

10. **Foot** means the entire foot below the ankle.

11. **Fingers, Thumbs or Toes** means the digits of a hand or foot.

12. **Income** means
   - (a) as regards to a salaried Insured Person, the average gross weekly Income earned from personal exertion before personal deductions and income tax, but excluding bonuses, commissions, overtime payments and other allowances; or
   - (b) as regards to a T.E.C. (i.e. total employee cost) or salary package Insured Person, the average gross weekly value of the income package earned from personal exertion (including, but not limited to wages, and/or salary, motor vehicle and/or travelling allowances, club subscriptions and fees, housing loan or rental subsidy, clothing or meal allowances), before personal deductions and income tax, but excluding bonuses, commissions, overtime payments and other allowances; or
   - (c) as regards to a self-employed Insured Person, the average gross weekly Income earned from personal exertion after the deduction of all business expenses necessarily incurred in earning that income;

   all derived during the 12 calendar months period immediately preceding the Injury giving rise to the claim under this Policy.

13. **Elimination Period** means the period, commencing with the first day of Temporary Total or Partial Disablement for which medical treatment was sought, during which no Compensation is payable.

**SPECIAL PROVISIONS**

1. Compensation payable under Event 1. (Death) is payable to You, any other Compensation is payable to the Insured Person.

2. In respect to Section A Capital Benefits:
   - (a) In the event of multiple Injuries sustained in the same accident and more than one Event can be claimed, only one Event will be compensated.
   - (b) If an Insured Person suffers an Injury resulting in any one of the Events 2 to 8 We will not be liable under this Policy for any subsequent Injury to that Insured Person.

3. Compensation is not payable:
   - (a) For more than one of the Events under Section B (Weekly Benefits) in respect of the same period of time.
   - (b) For longer than the Aggregate Period shown in the Schedule of Compensation in respect of the Events in Section B (Weekly Benefits) as regards any one Injury.
(c) Under Section B, beyond the time that You or the Insured Person becomes entitled to Compensation under Event 2. Permanent Total Disablement.

(d) Unless as soon as possible after the happening of any Injury giving or likely to give rise to a claim, the Insured Person obtains and follows proper medical advice from a registered and legally qualified medical practitioner who is not the Insured Person or a family member.

4. Weekly Benefits Limitation

For each Insured Person the Compensation payable under Section B (Weekly Benefits) is limited to the amount stated in the Schedule of Compensation or the Insured Person’s weekly Income, whichever is the lesser.

If the Insured Person is entitled to receive:

(a) weekly or periodical disability benefits under any other policy of insurance; and/or

(b) weekly or periodical disability benefits under any Workcover or Workers Compensation Act or other Statutory body having a similar effect, or under the Wrongs Act, or under any Compulsory Third Party or Motor Vehicle Act, or Transcover or Transport Accident Act or other Statutory body having similar effect; and/or

(c) earned income from any other occupation;

then Compensation payable under Section B (Weekly Benefits) will be reduced by the amount necessary to limit the total of all payments and/or Compensation to his or her Income or the limit stated in the Schedule of Compensation, whichever is the lesser.

5. Recurrence of Temporary Total Disablement or Temporary Partial Disablement (Weekly Benefits)

If an Insured Person receives Compensation under Section B (Weekly Benefits) and while this Policy is in force suffers a recurrence of Temporary Total or Temporary Partial Disablement from the same or related causes within 6 consecutive months of his or her return to his or her occupation on a full time basis, We will consider such Disablement to be a continuation of the prior claim period.

The period of recurring Disablement will be aggregated with the prior claim period and will not be subject to a new Elimination Period.

6. Dependant Children and Insured Persons Under 18 Years

Benefits payable to Dependant Children and Insured Persons under 18 years of age for Event 1 (Death) will be 10% of the Compensation stated in the Schedule of Compensation or $20,000, whichever is the lesser.

SPECIAL PROVISIONS - ADDITIONAL BENEFITS

1. Rehabilitation Expenses

We will pay after the happening of an Event listed under Section B (Weekly Benefits) of this Policy expenses incurred for tuition or advice from a licensed vocational school, provided such tuition or advice is undertaken with Our prior written agreement and the agreement of the Insured Person’s attending physician.

Compensation under this provision will be limited to the actual costs incurred not exceeding $500 per month and will be payable for a maximum of six months.

2. Escalation Of Claim Benefit

After payment of the Compensation under Section B (Weekly Benefits) continuously for 12 months, and again after each subsequent period of 12 months during which Compensation is paid, We will increase the Compensation by 5 percent compound per annum.

EXCLUSIONS - In addition to the General Exclusions applying to all Sections

We will not pay for any claim which directly or indirectly arises from or is caused by:

1. Any type of illness, disease, infection or contagion, even if contracted through an Injury, except that this Exclusion shall not apply to medically acquired infections or blood poisoning.
SECTION 6 - ALTERNATIVE EMPLOYEE OR RESUMPTION OF ASSIGNMENT EXPENSES

DESCRIPTION OF COVER

We will reimburse You for reasonable and necessary Expenses incurred during a Policy Period to either:

(Alternative Employee)
(a) send a substitute person to complete the original business commitments and objectives of an Insured Person who is unable to do so due to his or her unexpected death, Injury or Sickness, or who has to return early to his or her Country of Residence or place of departure following the unexpected death of a Relative during the Travel; or

(Resumption of Assignment)
(b) return the original Insured Person whom We have repatriated back to Country of Residence following an event covered under Section 1 or Section 3, within 90 days of such repatriation, to complete his or her original business commitments and objectives.

The maximum amount We will pay is limited to the Sum Insured in the Schedule of Compensation.

DEFINITIONS

Expenses mean:
(a) an economy return air flight for Interstate and Intrastate air trips within Australia;
(b) a business class return air flight for International air trips (or economy class if the original Insured Person travelled economy class at the Insured’s instruction); and
(c) other essential expenses incurred in transportation of the substitute person or returning the Insured Person.

EXCLUSIONS - In addition to the General Exclusions applying to all Sections

We will not pay for any expenses:
1. Incurred when the Insured Person is Travelling against medical advice or to seek medical attention or advice or with a terminal condition which was diagnosed prior to Travel or when he or she is unfit to do so.
2. Necessarily incurred as part of the original Travel budget.

SECTION 7 - POLITICAL RISK AND NATURAL DISASTER EVACUATION EXPENSES

DESCRIPTION OF COVER

If whilst an Insured Person is Travelling outside his or her Country of Residence and:

1. officials in the country the Insured Person is in recommend that certain categories of persons, which categories include the Insured Person, should leave that country; or
2. the Insured Person is expelled from or declared persona non grata in the country he or she is in; or
3. a major natural disaster has occurred in the country the Insured Person is in necessitating his or her immediate evacuation in order to avoid risk of personal Injury or Sickness to him or herself.

We will pay:
4. (a) up to the cost of a customary economy class air fare to return the Insured Person to his or her Country of Residence; or
   (b) up to the cost of a customary economy class air fare to return the Insured Person to the nearest place of safety; and
5. where the Insured Person is unable to return to their Country of Residence, the reasonable costs of accommodation, up to a maximum of two hundred and fifty dollars ($250) per day for each Insured Person for a maximum period of 14 days. This benefit is not payable in the Insured Person’s Country of Residence.
Note: If an Insured Person needs to leave the country he or she is in, AIG Assist must be contacted beforehand to confirm cover. Where possible AIG Assist will make the travel arrangements and in all cases We will decide where to send the Insured Person.

The maximum amount We will pay is limited by the specified Sum Insured in the Schedule of Compensation.

EXCLUSIONS - In addition to the General Exclusions applying to all Sections

We will not pay for losses arising from or attributable to:

1. The Insured Person violating the laws or regulations of the country from which he or she is to be evacuated.
2. The Insured Person failing to produce or maintain immigration, work, residence or similar visas, permits or other similar documentation.
3. Any debt, insolvency, commercial failure, the repossesson of any property by a titleholder or any other financial cause.
4. Your or the Insured Person’s failure to honour any contractual obligations or bond or to obey any conditions in a licence.
5. The Insured Person being a national of the country from which he or she is to be evacuated.
6. The political unrest or natural disaster that resulted in the Insured Person’s evacuation being in existence prior to the Insured Person entering the country or its occurrence being foreseeable to a reasonable person before the Insured Person entered the country.

We will not pay:

7. In respect of the costs of accommodation for a period in excess of fourteen (14) days for any one event.
8. Expenses necessarily incurred as part of the original Travel budget.

SECTION 8 - MISSED TRANSPORT CONNECTION

DESCRIPTION OF COVER

Cover under this Section only applies where the Insured Person is officially scheduled to attend a business meeting or conference during Travel which cannot be delayed because of his or her late arrival.

We will pay the reasonable extra expenses actually and necessarily incurred, net of any recoveries which You or the Insured Person may be entitled to receive from a carrier, to enable the Insured Person to use alternative scheduled public transport services to arrive at his or her destination on time, if due to any unforeseen circumstances outside Your or the Insured Person’s control, he or she misses a scheduled transport connection and is unable to arrive at his or her destination at the original scheduled time.

The maximum amount We will pay is limited by the specified Sum Insured in the Schedule of Compensation.

EXCLUSIONS - In addition to the General Exclusions applying to all Sections

We will not pay for:

1. Any missed transport connection arising from a personal, business or employment commitment, or a financial or contractual obligation of You or the Insured Person or of any other person on whom the Travel depends.
2. Claims arising from the inability of any tour operator or wholesaler to complete arrangements for any tour due to a deficiency in the number of people required to commence any tour or Travel.

SECTION 9 - RENTAL VEHICLE EXCESS COVER

DESCRIPTION OF COVER

We will reimburse You or the Insured Person for any excess or deductible which You or the Insured Person become legally liable to pay in respect of loss or damage to a Rental Vehicle during the rental period.
DEFINITION

Rental Vehicle means a rented sedan and/or station wagon, rented or hired from a licensed motor vehicle rental company and shall not include any other style of vehicle.

CONDITIONS

1. The Rental Vehicle must be rented from a licensed rental agency.
2. The Insured Person must comply with all requirements of the rental organisation under the rental agreement and of the insurer under such rental insurance.

The maximum amount We will pay is limited by the specified Sum Insured in the Schedule of Compensation.

EXCLUSIONS - In addition to the General Exclusions applying to all Sections

We will not pay:

1. For loss or damage arising from operation of the Rental Vehicle in violation of the terms of the rental agreement.
2. For wear and tear, gradual deterioration, damage from insects or vermin, inherent vice or damage.

SECTION 10 - KIDNAP AND RANSOM AND EXTORTION

DESCRIPTION OF COVER

We will indemnify You up to the specified Sum Insured in the Schedule of Compensation for Covered Losses should any of the following Events happen to an Insured Person during the Travel:

1. Kidnapping or alleged Kidnapping of an Insured Person; or
2. Personal Extortion threats to an Insured Person.

COVERED LOSSES

We will indemnify You for the following Covered Losses:

1. Ransom Monies
   Ransom Monies paid by You or an Insured Person resulting directly from a Kidnapping or Extortion occurring during the Policy Period.

2. In-Transit/Delivery
   Loss due to destruction, disappearance, confiscation or wrongful appropriation of Ransom Monies while being delivered to person(s) demanding the Ransom Monies by anyone who is authorised by You or an Insured Person to have custody of them, provided, however, that the Kidnapping or Extortion which gave rise to the delivery is covered by this Section.

3. Expenses
   Any reasonable and necessary expenses incurred and paid by You or the Insured Person solely and directly as a result of an Event covered under this Section, including but not limited to:
   
   (a) the amount paid by You or the Insured Person as reward to an Informant for information relevant to any Event;
   
   (b) interest costs for a loan from a financial institution made to You or the Insured Person for the purpose of paying Ransom Monies;
   
   (c) reasonable costs of travel and accommodations as follows:
   
   (i) costs incurred by You or the Insured Person while attempting to negotiate an incident covered under an Event;
   
   (ii) travel costs of a Victim to join their immediate family upon their release, and the travel costs of an employee to replace the Victim;

   (d) salary, which shall mean the following:
(i) the amount of remuneration previously paid by You at an annual rate including but not limited to average bonuses, commissions, cost of living adjustments or foreign tax reimbursements the Insured Person would normally receive, including contributions to pension and benefit programs (at the level in effect on the date of the Kidnapping,) which You continue to pay to or on behalf of the Insured Person for the duration of the Kidnapping. Salary will be paid until the earliest of the following:

1. up to 30 days after the release of the Insured Person, if the Insured Person has not yet returned to work; or

2. discovery of the death of the Insured Person; or

3. 120 days after We receive the last credible evidence that the Insured Person is still alive; or

4. 60 months after the date of the Kidnapping; and

(ii) the amount of remuneration, paid by You at an annual rate, of an individual newly hired to conduct the specific duties of the Insured Person while he/she is absent due to a Kidnapping for so long as the Insured Person’s own salary under (i) above is covered.

(e) personal financial loss suffered by an Insured Person solely and directly as the result of their physical inability to attend to personal financial matters while a Victim of a Kidnapping (or while involved with the handling or the negotiation of the same). Coverage will include but not be limited to loss which results from the Insured Person’s failure to renew insurance contracts, failure to exercise stock options, failure to respond to margin or loan calls by financial institutions and failure to pay off personal loans or a mortgage. Claims will be payable to You where You have indemnified the Insured Person for these Losses;

(f) rest and rehabilitation expenses, including travel, lodging, meals and recreation of the Victim and the Victim's spouse and/or any Dependant Children, up to a maximum of $5,000 in aggregate;

(g) reasonable and necessary fees and expenses of a qualified interpreter assisting You or the Insured Person following an Event;

(h) judgments and settlements and defense costs;

(i) defense costs, judgments, and settlements (with Our written consent) incurred as a result of any claim or suit brought by or on behalf of an Insured Person (or the heirs, estate, or legal representatives of an Insured Person) against You solely and directly as a result of a Kidnapping or Extortion, provided such suit or claim is made within 12 consecutive months of the release or death of the Insured Person or the last credible Extortion threat made during the Policy Period, but in no event longer than 60 months after the commencement of the Kidnapping or Extortion. As additional conditions precedent to Our liability, You will:

1. immediately notify Us of the claim or suit;

2. not admit liability;

3. co-operate with Us in conducting the defense of the claim or suit.

We shall have the right to investigate, negotiate or settle the claim or suit or to take over the conduct of the defence, and You and the Insured Person must co-operate with Us in this regard.

4. Consultants
Reasonable fees and expenses of Clayton Consultants or its subsidiaries, or other independent security consultants, provided that We have given our prior consent to the use of such other independent security consultants.

As part of the Policy coverage and under a special arrangement with Us, Clayton Consultants, an independent specialist crisis management consultant company, is available on a 24 hour priority basis to advise, inform and assist an Insured in the event of an occurrence.

The 24 hour crisis response contact number for Clayton Consultants in the event of an occurrence is

<table>
<thead>
<tr>
<th>Intl. Access Code</th>
<th>Country Code</th>
<th>Area Code</th>
<th>Local Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>0011</td>
<td>1</td>
<td>713</td>
<td>260 5500</td>
</tr>
</tbody>
</table>

This number is a dedicated crisis response contact and should only be used for notification of an occurrence. Callers will speak directly to or receive an immediate call back from an experienced Clayton Consultants consultant. Following notification of an occurrence, a Claytons Consultants consultant is available to be with the Insured as soon as travel time permits from offices in Australia, Hong Kong, London, Paris and the U.S.A.
DEFINITIONS

1. **Extortion** means Personal Extortion as herein defined.

2. **Employee** means any person in Your regular service whom You compensate by salary, wages and/or commissions and has the right to govern in the performance of such service.

3. **Informant** means any person, other than an Insured Person, providing information not otherwise obtainable, solely in return for a reward offered by You.

4. **Kidnapping** means any event or connected series of events of seizing, detaining or carrying away by force or fraud, of one or more Insured Persons (except a minor by his or her parent) for the purpose of demanding Ransom Monies.

5. **Personal Extortion or Extortion** means any threat or connected series of threats communicated to You or to an Insured Person for the purpose of demanding Ransom Monies, to:
   
   (a) kill, physically injure or kidnap an Insured Person; and/or
   
   (b) divulge any confidential, private or secret information unique to the Insured Person in relation to Your business;

   provided that Ransom Monies are not in the possession of the Insured Person at the time of the threat.

6. **Victim** means an Insured Person who is the subject of an Event.

TERRITORY

This cover applies to incidents anywhere in the world except for:

(a) the Insured Person’s Country of Residence;

(b) any country located in Central or South America; or

(c) any country in which United Nations armed forces are present and active.

CONDITIONS

1. As a condition precedent to Our liability under Events, We must have approved the payment of the Ransom Monies.

2. Prior to the payment of Ransom Monies, You must make every reasonable effort to:
   
   (a) determine that Event has actually occurred;
   
   (b) give immediate oral and written notice to Us with periodic and timely updates concurrent with activity occurring during the incident; and
   
   (c) if it appears to be in Your and the Insured Person’s best interests, notify the national or other appropriate law enforcement agency having jurisdiction over the matter.

EXCLUSIONS - In addition to the General Exclusions applying to all Sections

We will not be liable for loss caused by or resulting either directly or indirectly from or involving:

1. The fraudulent, dishonest, or criminal acts of You, any Insured Person, or any person authorised by You to have custody of Ransom Monies. This Exclusion will not apply to the payment of Ransom Monies by You or Insured Person in a situation where local authorities have declared such payment illegal.

2. Monies or property surrendered away from Your Premises in any face to face encounter involving the use or threat of force or violence unless surrendered by a person in possession of such monies at the time of such surrender for the sole purpose of conveying it to pay an Extortion or demand for Ransom Monies previously communicated to You or an Insured Person.

3. Monies or property surrendered on Your Premises unless brought onto the Premises after receipt of an Extortion or demand for Ransom Monies for the purpose of paying that demand.

4. Actual loss of or damage to property of any description, including intellectual property, as a result of an Event or the carrying out of a Personal Extortion threat. This Exclusion does not apply to In-transit / Delivery loss of Ransom and/or Extortion monies as described under Covered Losses 2.
5. Any loss from Kidnap or Extortion if the Insured Person is permanently residing or is staying for more than 180 consecutive days in the country where the Event occurs.

CONDITIONS

1. Confidentiality
   You and the Insured Person(s) will use all reasonable efforts not to disclose the existence of this Section. This condition will also apply to any excess or other insurance.

2. Limits Of Liability
   For each Covered Loss the maximum limit and aggregate limit of Our liability will not exceed the sum Insured(s) stated in the Schedule of Compensation and Policy Schedule by reason of any one Event, except where stated to the contrary. All Covered Losses will be deemed to have been incurred during the Policy Period in which the Event occurred.

3. Due Diligence
   You and the Insured Person(s) will use due diligence and do and concur in doing all things reasonably practicable to avoid or diminish any loss(es) insured under this Section.

4. Other Insurance
   The insurance provided under this Section will be excess over any other valid and collectable bond or insurance.

5. Statement Of Loss
   You will file a detailed, sworn statement of loss with Us as soon as possible after the date of loss.

6. Non-Employee Directors
   In the event that any one of the Insured Persons directors, who is not their employee, is an insured person under any other similar policy or policies issued by Us (or by any other member or affiliated insurance company of the American International Group, Inc.) and a loss involving that director is reported under this Policy and under one or more such other policies, then Our aggregate liability (including that of any of Our other member company(ies)) for each loss will not be cumulative and will not exceed the highest Limits of Liability applicable to each loss under any one of the policies.

7. Non-Assignment
   This Section may not be assigned or transferred.

8. Assistance and Co-operation
   You and the Insured Person(s) will co-operate with Us in all matters relating to this insurance. This may include attending hearings and trials, securing and giving evidence, obtaining the attendance of witnesses, assisting in achieving settlements, and in conducting litigation, arbitration, or other proceedings.

9. Inspection and Audit
   We may examine and audit Your business documents, relating to the subject matter of this insurance, until 3 years after this Policy has expired or has been cancelled. Any premium due for exposures which exist but were not reported will be determined by Our audit.

10. Recoveries
    In the event of any payment under this Section, all recoveries, net of Our actual recovery cost, will be distributed firstly to Us for all amounts paid by Us under this Section and any remainder will be paid to You.

11. Action Against Company
    No suit, action or proceeding for recovery of any loss under this Section will be sustainable in any court of law, equity or other tribunal unless all the requirements of this Section are complied with and it is commenced within 12 consecutive months after You have filed a Statement of Loss with Us.

12. Concealment, Misrepresentation, or Fraud
    This Section is null and void in case of fraud, concealment, or misrepresentation by You or an Insured Person of a material fact concerning:

   (a) this insurance or the procurement of it; or

   (b) an Insured Person; or

   (c) Your interest in an Insured Person; or

   (d) any loss or claim presented to Us.
13. **Changes**

Notice to any of Our representatives or knowledge possessed by any representative or by any person will not create a waiver or a change in any part of this Section or stop Us from asserting any right under the terms of this Section, nor will the terms of this Section be waived or changed unless agreed to in writing by Us.

14. **Notices**

Except as indicated to the contrary, all notices, applications, demands and requests provided for in this Section will be in writing and will be given to or made upon either party at its address shown in the Policy.

**SECTION 11 - PERSONAL LIABILITY**

**DESCRIPTION OF COVER**

We will pay all damages, compensation and legal expenses, up to the specified Sum Insured in the Schedule of Compensation for which You or the Insured Person become legally liable as a result of the Insured Person's negligence during the Travel causing:

1. Bodily injury including death or illness of another person.
2. Loss of or damage to property.

**CONDITIONS**

It is a condition of payment under this Section that neither You nor the Insured Person admit fault or liability to any other person without Our prior written consent.

**EXCLUSIONS - In addition to the General Exclusions applying to all Sections**

We will not pay damages, compensation or legal expenses in respect of any liability directly or indirectly arising out of or in connection with:

1. Bodily injury to the Insured Person or to any member of his or her family ordinarily residing with him or her.
2. Bodily injury to any of Your or the Insured Person's employees arising out of or in the course of employment.
3. Loss of or damage to property owned by or in the control of the Insured Person or any member of his or her family ordinarily residing with him or her.
4. Loss of or damage to property or bodily injury, arising out of Your or the Insured Person's ownership, use or possession of any mechanically propelled vehicle (other than golf buggies and motorised wheelchairs), aircraft or waterborne craft.
5. Loss of or damage to property or bodily injury, arising out of Your or the Insured Person's business or trade, or out of professional advice given by You or by the Insured Person.
6. Any contract unless such liability would have arisen in the absence of that contract.
7. Judgements which are not in the first instance either delivered by or obtained from a court of competent jurisdiction within Australia or the country in which the event occurred giving rise to Your or the Insured Person's liability.
8. Any claim for exemplary, punitive or aggravated damages.

**SECTION 12 - EXTRA TERRITORIAL WORKERS COMPENSATION**

**DESCRIPTION OF COVER**

This Section applies only:

1. With respect to the Insured Person(s) who are employed by You and persons who are deemed by any applicable Workers’ Compensation Legislation to be workers employed by You, who are employed or engaged within Australia in a managerial, clerical, administrative or sales capacity and whose employment or engagement is to be performed substantially within Australia;
2. If You maintain in force during the currency of this Policy within Australia, Workers’ Compensation Insurance as required by the law of any State or Territory which applies to the employment of employees by You or You are licensed under such laws as a self-insurer; and
3. While an Insured Person is working on a temporary basis (but not exceeding in any event one hundred and eighty (180) days, unless otherwise agreed in writing by Us), outside the State or Territory in which the Insured Person’s usual place of employment or employment base is located.
We will indemnify You against:

1. Your liability arising during the Travel to pay compensation benefits payable under any Workers’ Compensation Legislation which provides compensation to injured workers or their dependants for death, personal injury or occupational disease arising out of or in the course of employment;

2. Damages at common law (but not where entitlement arises solely under any statute) arising out of the death, personal injury or occupational disease suffered by an Insured Person as a result of an accident or occurrence happening during the Travel in the circumstances set out above.

LIMIT OF LIABILITY

The indemnity provided under this Section shall be limited as follows:

1. In the case of a claim for compensation benefits, to the difference between the amount so payable and the amount which the Insured Person(s) or their dependants are entitled to claim under any Workers’ Compensation Insurance which You were required to effect as described above, but not to exceed the Sum Insured specified in the Schedule of Compensation for all claims for compensation with respect to any one Insured Person and with respect to all Insured Person(s) during the Policy Period.

2. In the case of a claim for damages at common law, the difference between the damages and law costs payable by You and the amount of indemnity to which You would have been entitled under any Workers’ Compensation Legislation which You were required to effect as described above, but not to exceed the Sum Insured specified in the Schedule of Compensation for this Section for all damages payable with respect to the death, personal injury or occupational disease of any one Insured Person or with respect to the death, personal injury or occupational disease of all Insured Person(s) occurring during the Policy Period.

3. The Limit of Liability is the Compensation shown in the Schedule of Compensation for the following:

   (a) the Limit per week for weekly compensation for each Insured Person;
   (b) the Limit in respect of all compensation, damages, costs and expenses arising out of any one accident whether involving one or more Insured Person(s);
   (c) the aggregate Limit of Liability for all compensation, damages, costs and expenses for all occurrences, events and accidents occurring during any one Policy Period, whether involving one or more Insured Person(s).

4. Any benefits otherwise payable under Sections 1 and 5 of this Policy with respect to any Insured Person shall be reduced by the amount of any Compensation payable under this Section with respect to that Insured Person.

CONDITIONS

1. In the event of any occurrence giving rise to indemnity under this Section, We shall be entitled to exercise any right of recovery against any third party in Your name and for Our own benefit and You shall give us all such assistance as We may reasonably require.

2. You shall, if required by Us, make available to Us such information and documentation with respect to the claim brought by the Insured Person including medical reports, report of Injury forms, claims forms and any other documentation which comes into Your possession, and You shall, if required by Us, authorise Us to have access to the files and information held by any Workers’ Compensation Insurer with whom You have effected insurance.

EXCLUSIONS - In addition to General Policy exclusions applying to all Sections

1. There is no indemnity under this Section with respect to any claim for exemplary, punitive or aggravated damages.
SECTION 13 - CORPORATE TRAVELLER’S FAMILY CARE

SECTION 13A - SPOUSE ACCIDENTAL DEATH BENEFIT

DESCRIPTION OF COVER

We will pay to the Insured Person a $25,000 death benefit should the Insured Person’s Spouse die as a result of an Injury whilst the Insured Person is Travelling.

DEFINITION APPLICABLE TO SECTION 13A

For the purpose of this Benefit only, Injury means physical and bodily injury which happens to the Insured Person’s Spouse in Australia, when the Insured Person is Travelling, as a result of external violence and which results solely and directly and independently of any other cause including any pre-existing physical or congenital condition (except Sickness directly resulting from medical or surgical treatment rendered necessary by such Injury) in the death of the Insured Person’s Spouse.

This Benefit is not payable if the Spouse is accompanying the Insured Person on the Travel at the time the death by Injury occurs.

SECTION 13B - EDUCATION FUND SUPPLEMENT

DESCRIPTION OF COVER

We will pay $5,000 for each Dependant Child ($10,000 in aggregate for all Dependant children in any one family) should the Insured Person die when Travelling as the result of an Injury.

DEFINITION APPLICABLE TO SECTION 13B

For the purpose of this Benefit only, Injury means physical and bodily injury which happens to the Insured Person when they are Travelling as a result of external violence and which results solely and directly and independently of any other cause including any pre-existing physical or congenital condition (except Sickness directly resulting from medical or surgical treatment rendered necessary by such Injury) in the death of the Insured Person.

EXCLUSIONS - In addition to the General Exclusions applying to all Sections

We will not pay for any claim which directly or indirectly arises from or is caused by:
1. Any type of illness, disease, infection or contagion, even if contracted through an Injury, except that this Exclusion shall not apply to medically acquired infections or blood poisoning.

2. A criminal or illegal act committed by the Insured Person’s Spouse.

This Policy has been signed on Our behalf but shall not be binding unless The Schedule is countersigned by Our Authorised Signatory.

FOR AMERICAN HOME ASSURANCE COMPANY

Bruce Watters
Chief Executive Officer Australasia