BERJAYA SOMPO INSURANCE



Policy

CIMB Travel Insurance (Annual)

The benefits payable under eligible policy are protected by PIDM up to limits.
Please refer to PIDM's TIPS Brochure or contact Berjaya Sompo Insurance Berhad or PIDM (visit www.pidm.gov.my).

Berjaya Sompo Insurance Berhad
Registration No. 198001008821 (62605-U)
Level 36, Menara Bangkok Bank,
105, Jalan Ampang, 50450 Kuala Lumpur.
Toll Free: 1-800-889-933
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(STA1126)

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IMPORTANT NOTICE

This is **Your CIMB Travel Insurance (Annual) Policy**. **You** should satisfy yourself that this **Policy** will best serve **Your** needs. **You** should read and understand the **Policy** terms, conditions and warranties and discuss with **Your** insurance advisor, agent, broker and/or with **Us** directly for more information and/or to clarify any doubts **You** may have when **You** purchase this **Policy**. If there is any error or misdescription, or if the cover is not in accordance with **Your** wishes, please return the Policy to **Us** immediately for amendment.

You must fully observe and fulfill this **Policy**'s terms, conditions and warranties to enjoy the coverage provided. If **You** have any questions after reading these documents, please contact **Us** for further clarification. If there is any change in **Your** declarations that may affect the insurance provided, please notify **Us** immediately, otherwise **You** may not receive the benefits of this **Policy**.

To help preserve the environment, **We** will send a printed copy of this **Policy** Wording once only. Please keep this **Policy** wording safely. In case of renewal and/or amendment of **Your Policy**, **We** will send **You** the **Policy Schedule** and/or **Endorsement** only. If at any time **You** require a copy of the **Policy** Wording, please download a copy from www.berjayasompo.com.my.

If **You** have any complaints relating to this **Policy**, please contact:

COMPLAINTS UNIT – CUSTOMER SERVICE CENTRE
Berjaya Sompo Insurance Berhad
Registration No. 198001008821 (62605-U)
Level 36, Menara Bangkok Bank
105 Jalan Ampang
50450 Kuala Lumpur

Tel.	: 03-2170 7300
Toll Free	: 1-800-889-933
Fax	: 03-2170 4800
E-mail	: customer@bsompo.com.my

If **You** are not happy with **Our** response, **You** may opt to contact either:

FINANCIAL MARKETS OMBUDSMAN SERVICE
Level 14, Main Block
Menara Takaful Malaysia
4, Jalan Sultan Sulaiman
50000 Kuala Lumpur

Tel	: 03-2272 2811
Websie	: www.fmos.org.my

BNMLINK
4th Floor, Podium Bangunan AICB
No. 10, Jalan Dato' Onn
50480 Kuala Lumpur

Tel	: 1-300-88-5465
Overseas	: +603 2174 1717
BNMLINK Webpage	: bnm.gov.my/BNMLINK

OUR AGREEMENT

This Policy, the **Policy Schedule** and any **Endorsements** must be read together as they form **Your** insurance contract with **Us**. These documents reflect the terms and conditions of the insurance contract as agreed between **You** and **Us** and are issued in consideration of the payment of premium specified in the **Policy Schedule** and pursuant to the answers given when **You** applied for this Policy and any other disclosures made by **You** between the time **You** applied for this Policy and the time this insurance contract is entered into.

DUTY OF DISCLOSURE

You have a duty to take reasonable care not to make any misrepresentation i.e. **You** should answer all questions fully and accurately. Failure to take reasonable care in answering the questions may result in avoidance of **Your** insurance contract, refusal or reduction of **Your** claim(s), change of terms or termination of **Your** insurance contract. In the event of any pre-contractual misrepresentations by **You** in relation to **Your** answers and disclosures, only remedies in Schedule 9 of the Financial Services Act 2013 will apply.

You have a duty to tell **Us** immediately if at any time after **Your** insurance contract has been entered into, varied or renewed with **Us**, any of the information given when **You** applied for this insurance is inaccurate or has changed.

At the point of purchasing this Policy and at any point during the validity of this insurance contract, **You** must immediately inform **Us** of any other insurance **You** have bought which provides like or similar type of coverage to the items insured under this insurance contract.

DEFINITIONS

Some words and expressions in this Policy have been printed in **bold** because they have been given specific meaning as follows:

Accident
A sudden, unintentional, unexpected, unusual and specific event that occurs at an identifiable time and place which shall, independently of any other cause, be the sole cause of **Injury**.

COVID-19 Diagnostic Test

Antigen Rapid Test Kit (RTK-Ag)
Professionally administered test for COVID-19 and is a rapid diagnostic test that analyzes **Your** upper respiratory specimen, looking for specific protein from the virus that directly detects the presence or absence of an antigen of the SARS-CoV-2 virus that causes COVID-19. A positive test means that **You** likely have COVID-19 whilst a negative test means **You** probably did not have COVID-19 at the time of the test.

Polymerase Chain Reaction (PCR)
Professionally administered test for COVID-19 and is a molecular test that analyzes **Your** upper respiratory specimen, looking for genetic material (ribonucleic acid or RNA) of the SARSCoV- 2, virus that causes COVID-19. A positive test means **You** likely have COVID-19. A negative test means **You** probably did not have COVID-19 at the time of the test.

COVID-19
An infectious disease resulting in severe acute respiratory syndrome caused by the (SARS-CoV-2) virus.

Child/ Children
Your legal unemployed and unmarried child aged between 30 days and 18 years (both ages inclusive) or up to 23 years if studying full time at any educational or learning institution.

Designated Facility
A facility that the local government has authorised to provide quarantine services to those diagnosed with COVID-19.

Domestic Travel
Travel undertaken by **You** during the **Period of Insurance** for the purpose of leisure and/or business travel:
a) within Malaysia;
b) beyond 50 kilometres from **Your** home; and
c) excludes any daily commute to and from **Your** place of work.

Endorsement
A written alteration to the information, terms, conditions and warranties of this Policy.

Extreme Sports and Activities
Any activity that may be highly dangerous (i.e. involves a high level of expertise, extreme physical activity, highly specialized gear or stunts) including but not limited to:
a) Any speed contest or racing other than on foot. Foot racing is only covered for events up to a maximum distance of 42.2km;
b) Mountaineering (reasonably requiring the use of ropes and guides), rock climbing, indoor climbing, abseiling or caving;
c) Hiking or trekking in remote areas unless with licensed guides;
d) Any activity involving **You** being airborne (whether suspended or not) including but not limited to parachuting, hot air balloon rides, hang gliding, sky diving or high diving, or flying except as a fare paying passenger in a **Scheduled Carrier**;
e) Any underwater activities involving the use of underwater breathing apparatus or water-ski jumping;
f) Soccer, rugby or American football; or
g) Motocross, Freestyle motocross or any forms of off-road motorcycling.

Family
Your legal husband/wife and any number of **Child/Children** named as **Person(s) Insured** in the **Policy Schedule**.

Fully Vaccinated
The administration of complete doses of the **COVID-19** vaccine(s) as recommended, prescribed and approved by the Ministry of Health, Malaysia (MOH) or World Health Organisation (WHO) on the date **You** purchase this Policy.

Geographical Areas
a) Area 1 - Australia, Brunei, Cambodia, China (excluding Tibet and Outer Mongolia), Hong Kong, India, Indonesia, Japan, South Korea, Laos, Macau, Maldives, Myanmar, New Zealand, Pakistan, Philippines, Singapore, Sri Lanka, Taiwan, Thailand, and Vietnam.
b) Area 2 -Worldwide excluding USA, Canada and Malaysia.
c) Area 3 -Worldwide excluding Malaysia.

Hijack/ Hijacking
Unlawful seizure and control of a **Scheduled Carrier** by violent or threat of violent means.

Illness
A physical condition marked by a pathological deviation from the normal healthy state.

Immediate Family Member
Your legal spouse at the commencement of the Policy, child/children, son-in-law, daughter-in-law, parent, parent-in-law, grandparent, grandparent- in-law, grandchild, brother-in-law, sister-in-law or sibling who are residing in Malaysia.

Infectious Disease
A disease that can be transmitted easily as stipulated by the applicable health authority in the geographical area of loss.

Injury
A bodily injury caused solely by **Accident**.

Medical Practitioner
A medical practitioner qualified, registered and licensed to practice western medicine, by the appropriate health authority/medical council/professional body and who, in rendering such treatment, is practicing within the area and scope of his licensing and training of medical practice, provided that the **Medical Practitioner** is not **You,** and/or **Your Immediate Family Member**.

Mountain Sickness
Acute Mountain Sickness (AMS), altitude illness, hypobaropathy or soroche, caused by rapid exposure to low amounts of oxygen at high elevation.

Overseas Travel
Travel for leisure or business purposes to any destination outside of Malaysia.

Period of Insurance
Duration of cover as stated in the **Policy Schedule**.

Policy Schedule
A document where **Your** personal information, **Period of Insurance,** coverage type, Plan, Date of Issue, benefits, premium and sum insured are specified.

Public Transport
Transport services such as a licensed bus, taxi, or other legal, licensed and scheduled ride-hailing services available to fare-paying passengers at recognized public stops/stations, and which services are not obtained on a private arrangement basis, including without limitation, transportation that are privately arranged, chartered or arranged as part of a tour, even if the services are scheduled.

Pre-Existing Illness
Any physical or mental defect or infirmity, disease or **Illness** arising out of a single or continuous series of causes existing 12 months before the **Period of Insurance** of which **You** were aware or had reasonable knowledge of. Reasonable knowledge of a pre-existing illness is deemed if: -

a) **You** received or are still receiving treatment;
b) medical advice, diagnosis, care or treatment has been recommended and/or received;
c) clear and distinct symptoms are or were evident; or
d) its existence would have been apparent to a reasonable person in the circumstances.

Quarantine
Compulsory detention in isolation to stop the spread of an **Infectious Disease**.

Scheduled Carrier
Any form of air, land or water transportation provided and operated by a licensed carrier duly authorised to provide transportation services to fare-paying passengers, operating only on fixed and established routes as part of a scheduled regular transportation service, and includes aircrafts operated by an Airline and excludes any **Public Transport**.

Serious Injury/ Serious Illness
An **Injury** or **Illness** which is certified by a **Medical Practitioner** as serious and requires treatment in a hospital, resulting in **You** being certified as unfit to continue with **Your Trip**. When applied to **Your Immediate Family Member**, it shall mean **Injury** or **Illness** certified by a **Medical Practitioner** as serious and requiring treatment in a hospital**,** resulting in the discontinuation or cancellation of **Your Trip**.

Travel Agent
A person or corporation with a valid license and registered in Malaysia with relevant authorities.

Travelling Companion
A person who has reservation or confirmation of travel to accompany **You** on the same **Trip**.

Trip
The return journey (including any transit within Malaysia which is not more than twenty-four (24) hours before the scheduled departure time from Malaysia) commencing from the time **You** leave **Your** home or place of work or any other elected destination in Malaysia (whichever is later) until the time **You** return, and ceases on whichever of the following occurs first:

a) The end of the **Period of Insurance** specified in the **Policy Schedule**;
b) **Your** arrival at **Your** home or place of work (whichever is the earlier) in Malaysia; or
c) 24 hours after **Your** arrival in Malaysia (not applicable for **Domestic Travel**).

The duration for each **Trip** shall not exceed 120 consecutive days from the commencement date of the **Trip**. For one-way travel, cover will cease 72 hours from the scheduled time of arrival at the final destination and stop overs shall not exceed 30 days.

Valuables
Personal items of high value including but not limited to antiques, works of art, items made of precious metals or precious stones, including precious and semi-precious gems, jewellery, watches or furs.

We/Our/Us
Berjaya Sompo Insurance Berhad.

You/Your/Person Insured
Each person named in the **Policy Schedule**, who is between 30 days and below 80 years of age during the **Trip** and a Malaysian citizen, permanent resident, or a holder of a valid work permit or employment pass (of which **Your** place of employment must be in Malaysia during the **Period of Insurance**), dependent pass, student pass or long term social visit pass not including travel visa (that is issued by the relevant governmental authority in Malaysia) with full rights to enter into and return to Malaysia.

WHAT WE WILL COVER

We will pay **You** for any loss and/or damage up to the amount stated in the **Policy Schedule** while on a **Trip** subject to the conditions, exclusions and limitations of this Policy.

Payment of benefits for **Family** plan will be subject to the **Family** limit specified in the Schedule of Benefits.

It is a fundamental and absolute condition of this Policy that the premium due must be paid and received by **Us** before the cover commences.

Schedule of Benefits:

BENEFITS	LIMIT PER PERSON/ PER EVENT	SUM INSURED (RM)		
		ELITE A	ELITE B	ELITE C
MEDICAL & OTHER EXPENSES				
Medical, Hospital & Other Expenses	Up to 65 years Above 65 years	500,000 150,000	300,000 100,000	150,000 75,000
Alternative Medicine*	Per Individual	1,000	1,000	N/A
Compassionate Visitation Care (due to Your hospitalisation) *	Per Individual	7,500	7,500	5,000
Compassionate Visitation Benefit (due to Your death) *	Per Individual	7,500	7,500	5,000
Medical Treatment in Malaysia * *Follow-up treatment within 60 days upon return to Malaysia.*	Up to 65 years Above 65 years	10,000 5,000	10,000 5,000	10,000 5,000
Child Care Benefit*	Per Individual	5,000	5,000	N/A
Hospital Allowance*	Per Day Per Individual	250 10,000	250 10,000	N/A
Overseas Quarantine Allowance Due to COVID-19* *Quarantine at a Designated Facility overseas.*	Per Individual	2,000	2,000	1,000
***Subject to maximum limit payable for item 1.1				
PERSONAL ACCIDENT				
Personal Accident				
a) Accidental Death	Up to 65 years Above 65 years	250,000 125,000	200,000 100,000	100,000 50,000
b) Permanent Total Disablement	Up to 65 years Above 65 years	250,000 125,000	200,000 100,000	100,000 50,000
c) Loss of sight of one or both eyes and/or loss of one or more limbs	Up to 65 years Above 65 years	250,000 125,000	200,000 100,000	100,000 50,000
EMERGENCY MEDICAL EVACUATION & REPATRIATION				
Emergency Medical Evacuation/ Repatriation	Per Individual	Unlimited	Unlimited	Unlimited
Repatriation of Mortal Remains	Per Individual	Unlimited	Unlimited	Unlimited
Maximum limit payable for item 3.1 and 3.2	Above 65 years	150,000	150,000	150,000
TRAVEL INCONVENIENCE & OTHER TRAVEL RELATED BENEFITS				
Loss of Baggage and Personal Effects	Per Individual	5,000	5,000	N/A
Baggage Delay *RM200.00 for every 6 full consecutive hours delay*	Per Individual	800	800	N/A
Personal Money & Documents	Per Individual	5,000	5,000	N/A
Travel Delay *RM200.00 for every 6 full consecutive hours delay*	Per Individual	3,000	3,000	N/A
Travel Re-Route	Per Individual	200	200	N/A
Loss of Deposit or Cancellation	Per Individual	15,000	15,000	N/A

Travel Curtailment	Per Individual	15,000	15,000	N/A
Travel Overbooked *RM200.00 for every 6 full consecutive hours for overbooked common air carrier and no alternative transportation is made available.*	Per Individual	1,000	1,000	N/A
Travel Misconnection *RM200.00 if no alternative transportation available within 4 hours of the actual arrival time.*	Per Individual	200	200	N/A
Hijacking Inconvenience *RM1,000.00 for every 24 full consecutive hours of hijack.*	Per Individual	8,000	8,000	N/A
Missed Departure	Per Individual	1,000	1,000	N/A
Loss of Deposit or Full Payment due to Insolvency of Airlines	Per Individual	5,000	5,000	N/A
Personal Liability	Per Individual	1,000,000	1,000,000	N/A

Automatic Extension of Coverage

In the event of delay beyond **Your** control during **Your Trip** on a **Scheduled Carrier** as a result of **Your Serious Injury/ Serious Illness** or unavoidable delay of the **Scheduled Carrier** and the return journey cannot be completed within the **Period of Insurance**, cover shall be automatically extended for up to 30 days without additional premium or such other period as is reasonably necessary for completion of the journey, provided that either event is admissible in the first instance and **You** have evidence explaining the delay.

BENEFIT 1 - MEDICAL & OTHER EXPENSES

For **Overseas Travel**

We will reimburse **You** for the necessary expenses incurred as a direct result of **Injury** or **Illness** (including **COVID-19**) sustained by **You** during the **Period of Insurance**.

For **Domestic Travel**,

We will reimburse **You** for the necessary expenses incurred as a direct result of **Injury** or **COVID-19** sustained by **You** during the **Period of Insurance**.

Benefit 1.1 - Medical, Hospital & Other Expenses

We will reimburse for necessary and reasonable fees, charges or expenses for:

a) Medical, surgical, hospital, nursing home or nursing services and emergency ambulance services.
b) Emergency dental treatment for the alleviation of sudden pain or treatment for damage to sound and natural teeth provided such damage is caused solely by Injury (excluding replacement of dentures and crowns).

Benefit 1.2 - Alternative Medicine

If **You** suffer from an **Injury** as a result of an **Accident** during the **Trip** and seek alternative medicine, **We** will reimburse the expenses incurred for such treatment. Alternative medicine shall mean treatment from a registered traditional medicine practitioner, osteopath, physiotherapist and/or a chiropractor provided treatment is sought from a **Medical Practitioner** in the first instance.

Benefit 1.3 - Compassionate Visitation Care (due to Your hospitalisation)

We will reimburse for reasonable additional accommodation and travelling expenses (limited to a round trip economy class air ticket) incurred by a relative or friend required to care for **You** on the medical advice of the treating **Medical Practitioner**.

Benefit 1.4 - Compassionate Visitation Benefit (due to Your death)

We will reimburse **Your** legal representative for reasonable travel and hotel accommodation expenses incurred by a relative or friend to assist in the burial or cremation arrangements in the locality of **Your** death due to an **Accident** or **Illness** whilst on the **Trip** and no adult member of **Your** family was with **You**.

***IMPORTANT**: Only Benefit 1.3 or 1.4 is payable for any one event.*

Benefit 1.5 - Medical Treatment in Malaysia

We will reimburse for **Follow-Up Treatment** expenses incurred for a maximum period of 60 days following **Your** return to Malaysia from **Your Trip**.

"Follow-Up Treatment" shall mean any continuing medical treatment, check-ups or physical exams in Malaysia which are medically necessary for full recovery, after being discharged from hospital or after the main treatment of any **Injury** or **Illness** which occurred during **Overseas Travel.**

Benefit 1.6 - Child Care Benefit
We will reimburse for reasonable additional accommodation, communication, round trip economy class air ticket, meals and travel expenses incurred at the place of loss by one **Immediate Family Member** to take care of **Your** children aged below 18 years as a result of **Your** hospitalisation and/or to accompany **Your** said children back to Malaysia.

Benefit 1.7 – Hospital Allowance
We will pay **You** for each full day of **Your** confinement to hospital as an in-patient during the **Trip**, in addition to the fees, charges or expenses payable under Benefit 1.

Benefit 1.8 – Overseas Quarantine Allowance Due to COVID-19
We will pay **You** if **You** are diagnosed and tested positive with **COVID-19** whilst on **Overseas Travel** and are required to observe mandatory **Quarantine** by any government or relevant health authorities. This benefit is only payable once per **Trip**.

Exclusion applicable to Benefit 1.8
***We** will not pay for Benefit 1.8:*
1. *If the **Quarantine** period is not within the **Period of Insurance**.*
2. *If **Quarantine** orders are mandated by the government for all travellers arriving into the destination country and **You** are not tested positive for **COVID-19**.*
3. *If **You** are tested positive for **COVID-19** other than via a **PCR / RTK-Ag** test.*
4. *If **Quarantine** is not at a **Designated Facility**.*
5. *If **Your PCR/ RTK-Ag** test was not done by a **Medical Practitioner** or lab technician.*

***IMPORTANT**: Only Benefit 1.7 or 1.8 is payable for any one event.*

*For **Domestic Travel**, Benefits 1.1, 1.2 and 1.7 due to **COVID-19** is only applicable for **Trip** by scheduled air carrier.*

Exclusion applicable to Benefit 1
We** will not pay for any **Illness:
1. *Sustained during **Domestic Travel** except due to **COVID-19**.*
2. *due to **Infectious Disease** excluding **COVID-19**, which is declared or notified as an epidemic by the applicable health authority in the covered destination or a pandemic by the WHO until such declaration or notification is lifted by the WHO or applicable health authority in the covered destination.*
3. *due to **COVID-19** if **You** are not **Fully Vaccinated.***
4. *due to **Your** failure to fulfil all the requirements which have been set by the government of Malaysia and the destination country before and during the **Trip.***
5. *If **Your PCR/ RTK-Ag** test was not done by a **Medical Practitioner** or lab technician.*

BENEFIT 2 - PERSONAL ACCIDENT

We will pay **You** or **Your** legal representative upon **Your** death or **Injury** caused solely and directly by **Accident.**

Benefit 2.1 - Personal Accident
a) Death;
b) Total and permanent loss of sight in one or both eyes;
c) Total loss by physical severance or total and permanent loss of use of one or both limbs; or
d) Permanent and total inability to engage in any lawful occupation.

Scale of Compensation	Principal Sum Insured (%)
Death	100
Permanent and Total Inability to engage in any lawful occupation	100
Loss of sight of one or both eyes and/or Loss of one or more limbs a) Loss of sight shall mean total and irrecoverable loss of sight. b) Loss of limb shall mean loss by physical severance of a hand at or above the wrist or of a foot at or above the ankle.	100

The maximum amount payable for Benefit 2.1 for death or, one or more **Injury** shall not exceed 100%.

BENEFIT 3 - EMERGENCY MEDICAL EVACUATION & REPATRIATION

Benefit 3.1 - Emergency Medical Evacuation/ Repatriation
We will pay for air or surface transportation, medical care during such transportation, communications and all usual ancillary charges incurred in moving **You** with **Serious Injury/Serious Illness** causing life threatening medical emergencies such as **Your** death or serious impairment to **Your** health, requiring **Your** immediate evacuation to obtain urgent medical treatment in the nearest hospital where appropriate medical care is available, not necessarily to Malaysia, as advised and approved by **Our** authorised service provider.

In the event **You** are hospitalised while **Overseas Travel** and it is medically necessary to bring **You** back to Malaysia to continue treatment, **Our** authorised service provider will provide the emergency medical repatriation services based on the advice of the treating **Medical Practitioner**. **We** will pay the reasonable and necessary repatriation costs including the reasonable transportation cost for 1 qualified medical attendant accompanying **You**.

You must contact **Our** CIMB Trave Insurance Hotline at 603-7628 3860 as soon as possible to obtain approval in advance of any evacuation and to make the necessary transportation arrangements or **Your** claim for such costs will be rejected.

Our authorised service provider will provide emergency medical evacuation and/or repatriation to **You**.

Benefit 3.2 - Repatriation of Mortal Remains
We will pay for the necessary cost of transporting **Your** mortal remains to Malaysia in the event of **Your** death due to **Accident** or **Illness** during the **Trip**.

Exclusion applicable to Benefit 3
***We** will not pay for Benefit 3 arising directly or indirectly from:*
1) ***Mountain Sickness**;*
2) ***Infectious Disease** excluding **COVID-19**, which is declared or notified as an epidemic by the applicable health authority in the covered destination or a pandemic by the WHO until such declaration or notification is lifted by the WHO or applicable health authority in the covered destination.*
3) *Any circumstances regarding **COVID-19** if **You** are not **Fully Vaccinated***
4) ***Your** failure to fulfil all the requirements which have been set by the government of Malaysia and the destination country before and during the **Trip.***
5) *If **Your PCR/ RTK-Ag test** was not done by a **Medical Practitioner** or lab technician.*

BENEFIT 4 - TRAVEL INCONVENIENCES & OTHER TRAVEL RELATED BENEFITS

Benefit 4.1 - Loss of Baggage and Personal Effects
We will reimburse **You** for the loss or damage of or costs of repair to **Your** baggage and personal effects while on a **Trip** due to theft, attempted theft, robbery, attempted robbery, or negligence of the **Scheduled Carrier.**

The baggage and personal effect must be:-
1. brought and owned by **You**;
2. purchased by **You** during the **Trip** (including clothing and personal effects worn or carried by **You**); or
3. with **You** on the **Trip**.

For loss or damage caused by theft during the **Trip**, a report must be made within 24 hours of the theft at the nearest police station or relevant authorities within the jurisdiction where the theft took place and a copy of the said report must be submitted to **Us** to support a claim.

For loss or damage of items, proof of **Your** purchase such as, but not limited to, receipts, bank statements or credit card statements, must be submitted to **Us** to support a claim. If no such proof is submitted, **We** may at **Our** sole discretion decline a claim or accept it at a reduced value or less any compensation paid either by the **Scheduled Carrier** or other sources.

Exclusions applicable to Section 4.1
***We** will not pay for claims in respect of the following:*
1. Loss or damage exceeding:
a) RM500.00 in respect of every single article, pair or set of articles other than notebook computer;
b) the proportionate part of the value of an article belonging to a pair or set;
c) RM1,000.00 in respect of notebook computer;
*d) RM2,000.00 in total for **Valuables**.*

2. *Loss of or damage to:*
a) *animals;*
b) *live or ornamental plants, seeds of the plants or any of its derivatives;*
c) *bonds, stamps, identity documents, credit and payment cards, travel document, cash, stocks, negotiable instruments and securities or documents of any kind;*
d) *contact or corneal lenses, glasses, china marble, earthenware, tortoise shells, bulbs or valves, hearing aids, prosthetic limbs, artificial teeth or dental bridges or dentures;*
e) *cosmetics of any kind;*
f) *accessories of any kind including fashion accessory;*
g) *information or data stored in tapes, cards, discs, or other storage medium;*
h) *traditional herbs, perishable and consumable goods or bottles or any subsequent damages caused as a result thereof;*
i) *pedal cycles, wheelchairs, prams, pushchairs or baby buggies other than while they are being conveyed by public transport services and carrier;*
j) *property more specifically insured elsewhere;*
k) ***Valuables** unless at all times they are attended by **You** or deposited in a hotel safe or hotel safety box;*
l) *fragile articles, musical instruments, sculptures and household goods;*
m) *handphones, pagers, portable computer equipment (other than notebook computer); including personal digital assistant and its accessories;*
n) *any item that is loaned, rented or hired;*
o) *baggage that is sent in advance, mailed or shipped separately;*
p) *contraband or illegal goods.*

3. *Loss or damage due to atmospheric or climatic conditions, wear and tear or depreciation, moth or vermin, gradual deterioration, mechanical or electrical breakdown or derangement, inherent vice;*
4. *Loss or damage to luggage not kept in **Your** travel accommodation unless it is at all times attended by **You**;*
5. *Loss or theft of **Your** personal effects left unattended in a public place or unattended vehicle unless stored completely out of view in the trunk of the vehicle, the vehicle is fully locked with all windows shut at the time of the incident and there is visible proof of forced entry;*
6. *Loss or damage due to **Your** negligence;*
7. *Unexplained and mysterious disappearance;*
8. *Losses not reported to the authorities within 24 hours of discovery.*

Benefit 4.2 - Baggage Delay
We will pay **You** RM200.00 for every 6 complete hours that **Your** checked-in baggage is delayed, misdirected or temporarily misplaced by the **Scheduled Carrier.**

The period of delay shall be calculated from the time of **Your** arrival at the scheduled destination until the time **You** received **Your** baggage**.**

Exclusions applicable to Section 4.2
We will not pay for claims in respect of:
1. *Baggage delay not reported immediately upon discovery to the **Scheduled Carrier**;*
2. *Baggage legally delayed, held or confiscated by customs or other officials;*
3. *Baggage delay on **Your** return journey;*
4. ***Your** failure to obtain a written confirmation from the operator of **Scheduled Carrier** on the baggage delivery time.*

***IMPORTANT**: Only Benefit 4.1 or 4.2 is payable for any one event.*

Benefit 4.3 - Personal Money and Documents
We will reimburse for:
1. The loss of:
   a) Travel documents and
   b) Money (cash, travellers cheques or banknotes) belonging to **You** of up to RM800.00. Money must be kept with **You** or in a hotel safe;

   which are in **Your** possession or kept in a hotel safe, arising out of robbery, burglary or theft whilst on the **Trip**. Such losses detailing the circumstances and list of items stolen must be reported to the local police at the place of loss within 24 hours after the incident.
2. Any additional travel and accommodation expenses incurred to obtain replacement passports, travel tickets and/or other relevant travel documents.

Exclusions applicable to Section 4.3
We *will not pay for claims in respect of loss, damage or theft:*

1. *arising from delay, confiscation or detention by customs, police or other officials;*
2. *whilst in the custody of the* ***Scheduled Carrier*** *unless reported immediately on discovery and in the case of an airline, a Property Irregularity Report is obtained from the said airline. A claim must be made against the* ***Scheduled Carriers*** *or other relevant authorities;*
3. *not reported to the police within 24 hours at the place of loss;*
4. *of* ***Your*** *money and documents left unattended in a public place or unattended vehicle or as a result of* ***Your*** *failure to take due care for the safety and security of such money and documents;*
5. *to* ***Your*** *money and documents otherwise reimbursed by a common carrier or a hotel.*

Benefit 4.4 - Travel Delay

1. If the departure time of the **Scheduled Carrier** is different from the time specified in the itinerary supplied to **You**, **We** will pay **You** RM200.00 for each consecutive 6 hours of delay.
2. If any part of the **Trip** is cancelled due to the delay, but **You** continue with the rest of the **Trip**, **We** will reimburse **You** for irrecoverable deposits or charges paid in advance or contracted to be paid for the cancelled part of the **Trip**.
   The number of hours delayed must be verified in writing by the **Scheduled Carrier** or their handling agent(s). If **You** are entitled to a refund from the **Scheduled Carrier**, **We** will only be liable for the losses not recovered.

Exclusions applicable to Section 4.4
We *will not pay for claims arising directly or indirectly from:*

1. ***Your*** *failure to check- in according to the itinerary supplied to* ***You****;*
2. ***Your*** *failure to obtain a written confirmation from the* ***Scheduled Carrier*** *or their handling agents on the number of hours of delay;*
3. *Strike, riot or industrial action publicly known to be existing on the date* ***You*** *purchased this Policy;*
4. ***Your*** *late arrival at the* ***Scheduled Carrier's*** *gate/point of departure (except for the late arrival of the* ***Scheduled Carrier*** *due to strike or industry action);*
5. *Rescheduled or cancelled flights by the* ***Scheduled Carrier*** *which was notified to* ***You*** *at least 24 hours before the* ***Trip****;*
6. *Additional expenses incurred, if any part of* ***Your*** *planned* ***Trip*** *is cancelled, deferred or postponed.*

Benefit 4.5 - Travel Re-Route

We will pay **You** RM200.00 if the **Scheduled Carrier** departed on time but arrival at destination is delayed by at least 6 hours from the time specified in the itinerary supplied to **You**, due to strike or industrial action, adverse weather conditions or mechanical breakdown.

Exclusions applicable to Section 4.5
We *will not pay for claims arising directly or indirectly from:*

1. *The* ***Scheduled Carrier*** *which* ***You*** *have arranged to travel is cancelled or delayed in departure and causing the delay in arrival to your scheduled destination;*
2. ***Your*** *failure to obtain a written confirmation from the* ***Scheduled Carrier*** *or their handling agents on the number of hours of delay and the reason for such delay;*
3. *Strike or industrial action publicly known to be existing on the date* ***You*** *purchased this Policy.*

Benefit 4.6 - Loss of Deposit or Cancellation

1. Cancellation

We will reimburse for loss of irrecoverable deposits or charges paid in advance or contracted to be paid for **Your Trip** in the event of necessary and unavoidable cancellation as a result of:

a) **Your** death, **Serious Injury/Serious Illness** or the death, **Serious Injury/Serious Illness** of **Your Immediate Family Member** within 60 days of **Your Trip**. The death certificate or written medical advice from the **Medical Practitioner** treating **You** or **Your Immediate Family Member** to cancel the **Trip** due to **Serious Injury/Serious Illness** must be obtained.
b) natural disasters at **Your** scheduled destination.
c) unexpected strike, riot or civil commotion at the planned destination.
d) summons to attend legal proceedings which were not made known to **You** prior to **Your** purchase of this Policy.
e) damage to **Your** residence due to fire, flood or similar natural disasters occurring within 1 week of the **Trip** requiring **Your** presence on the departure date of the **Trip**.
f) **You** or **Your Immediate Family Member** staying in the same household, or **Your Travelling Companion,** is diagnosed and tested positive for **COVID-19** within 30 days prior to **Your** scheduled departure date.

2. Deferments or Postponement

If **Your Trip** is postponed or deferred due to any of the causes in 1.a) to 1.f) above, **We** will reimburse **You** for additional charges incurred to amend **Your** travel dates.

Benefit 4.6 is effective from the date the **Policy Schedule** is issued and terminates on the commencement of the **Trip.**

Exclusions applicable to Benefit 4.6
We *will not pay for any loss:*

a) if this Policy is purchased less than 14 days before commencement of ***Your Trip****.*
b) Due to a positive ***COVID-19*** *diagnosis within 14 days prior to the date of purchase of* ***Your*** *Policy.*
c) If ***You*** *postpone* ***Your Trip*** *solely due to epidemic or pandemic-related travel advisories, including but not limited to border closures,* ***Quarantine*** *orders, government orders issued by governments or the World Health Organization for the destination country or home country.*

IMPORTANT*:* Only Benefit 4.6.1 or 4.6.2 is payable for any one event.

Benefit 4.7 - Travel Curtailment

We will reimburse for the proportional return of the irrecoverable prepaid costs of **Your Trip** as shown on the booking invoice, calculated on a pro rata basis from the date of **Your** early return to Malaysia to the scheduled return date of the **Trip** or **Period of Insurance** whichever is earlier, necessarily and unavoidably incurred, resulting in Curtailment (as defined) due to:

1) **Your Serious Injury/ Serious Illness.**
2) death, **Serious Injury**/ **Serious Illness** of **Your Immediate Family Member** or **Your Travelling Companion**.
3) **Hijacking** of the aircraft in which **You** are travelling
4) natural disasters at **Your** scheduled destination.
5) damage to **Your** principal residence from fire, flood, or similar natural disasters, requiring **Your** presence on the premises.
6) unexpected strike, riot or civil commotion at the planned destination that risks danger to **Your** life.
7) **You** or **Your Traveling Companion** being diagnosed with **COVID-19** whilst on **Overseas Travel** or **Your Immediate Family Member** is diagnosed with **COVID-19** and **You** need to cut short **Your Trip** to return to Malaysia.

If the prepaid costs are confined to air tickets, **We** will reimburse **You** for the unused sector of the air tickets.

A medical certificate must be obtained from the **Medical Practitioner** treating **You, Your Immediate Family Member** or the person with whom **You** are travelling**,** confirming the advisability to return to Malaysia due to **Serious Injury/ Serious Illness**.

For **Hijacking** or death, proportional return of the irrecoverable prepaid cost shall be calculated from the date of occurrence to the expiry of the **Trip** or **Period of Insurance,** whichever is earlier.

This coverage is effective only if the Policy is purchased before **You** became aware of any circumstances which could lead to **Curtailment**.

"Curtailment" shall mean abandonment of the **Trip** by return to Malaysia after arrival at the scheduled destination in the booking invoice.

Exclusions applicable to Benefit 4.6 and 4.7
We *will not pay for claims arising directly or indirectly from:*

1. *Government regulation or Act, delay or amendment of the booked* ***Trip*** *(including due to error, omission or default) by the provider of any service forming part of the booked* ***Trip****, the* ***Travel Agent*** *or tour operator through whom the Trip was booked;*
2. *Bankruptcy, insolvency, liquidation or default of travel agencies or common carrier;*
3. ***You*** *or* ***Your*** *travelling companion's business, financial or contractual obligations;*
4. ***Your*** *disinclination to travel;*
5. *The unlawful act or criminal proceedings of any person on whom the booked* ***Trip*** *depends, other than for attendance as a witness in Court under a subpoena;*
6. ***Your*** *failure to notify the* ***Travel Agent****/ tour operator, provider of transport or accommodation, immediately upon discovery of any event requiring* ***You*** *to cancel or curtail travel arrangement;*
7. *Any additional expenses incurred if any part of* ***Your Trip*** *is deferred or postponed.*
8. ***Infectious Disease*** *excluding* ***COVID-19****, which is declared or notified as an epidemic by the applicable health authority in the covered destination or a pandemic by the WHO until such declaration or notification is lifted by the WHO or the applicable health authority in the covered destination.*
9. *Any circumstances regarding* ***COVID-19*** *if* ***You*** *are not* ***Fully Vaccinated.***
10. ***COVID-19*** *if the* ***PCR/ RTK-Ag test*** *was not done by a* ***Medical Practitioner*** *or lab technician.*
11. ***COVID-19*** *if* ***You*** *or* ***Your Travelling Companion*** *tested positive for* ***COVID-19*** *other than via a* ***PCR / RTK-Ag test****.*
12. ***Your*** *failure to fulfil all the requirements which have been set by the government of Malaysia and the destination country before and during the* ***Trip.***

IMPORTANT*:* Only Benefit 4.6 or 4.7 is payable for any one event.

Benefit 4.8 - Travel Overbooked

We will pay **You** RM200.00 for every completed 6 hours of delay, if **You** are denied boarding on an air carrier due to over-booking, and no alternative transportation is provided.

You shall submit the overbooked flight details verified by the **Scheduled Carrier** or their handling agent(s).

Benefit 4.9 - Travel Misconnection
We will pay **You** RM200.00 if **Your** confirmed onward connection on an aircraft is missed at the transfer point due to the late arrival of **Your** incoming aircraft, and no alternative onward transportation is available within 4 hours of **Your** arrival at the transfer point.

You shall submit the travel misconnection details verified by the **Scheduled Carrier** or their handling agent(s)

Benefit 4.10 - Hijacking Inconvenience
We will pay **You** RM1,000.00 for each completed 24 hours if the **Scheduled Carrier You** are travelling in for **Your Trip** overseas is **Hijacked**.

Benefit 4.11 - Missed Departure
We will reimburse for additional accommodation and travel expenses necessarily and reasonably incurred in returning to Malaysia as a result of mechanical breakdown of public transport services to get **You** to the departure port, airport or train station as stated in **Your** ticket.

You shall submit the confirmation of the mechanical breakdown verified by the **Scheduled Carrier** or their handling agent(s).

Exclusions applicable to Benefit 4.11
***We** will not pay for any event resulting from **Your** failure to check in or late arrival at the airport, station or port specified in the travel itinerary supplied to **You**;*

Benefit 4.12 - Loss of Deposit or Full Payment due to Insolvency of Airlines
In the event that, the airline from which **You** purchased **Your** air ticket is declared insolvent and **You** are unable to proceed with **Your Trip**, **We** will reimburse **You** for loss of unrecoverable deposits or full payment of **Your** air ticket.

Exclusions applicable to Benefit 4.12
***We** will not pay for any loss for air tickets purchased for non-scheduled airline.*

Benefit 4.13 - Personal Liability
We will indemnify **You** for legal liability as a result of:
1) **Injury** to any third party;
2) Accidental loss of or damage to property of any third party.

We will also indemnify **You** for:
1) Third party's costs and expenses recoverable from **You;** and
2) **Your** costs and expenses incurred with **Our** prior written consent, in relation to **Your** legal liability.

Provided that;
1) No person is entitled to admit liability or to give any representation or other undertaking on **Your** behalf unless with **Our** prior written consent.
2) We have the right to conduct all proceedings arising out of or in connection with the claim in Your name and assigning all rights to take action in **Your** name.

Exclusions applicable to Benefit 4.13
***We** will not pay for claims arising out of:*
*1) Employer's liability, **Your** contractual liability or liability to **Your Immediate Family Member**;*
*2) Property belonging to **You**, or in **Your** care custody or control;*
3) Any wilful, malicious or unlawful act;
4) Pursuit of trade, business or profession;
5) Ownership or occupation of land or buildings (other than occupation only of any temporary residence);
6) Ownership, possession or use of vehicles, aircraft or watercraft or any other conveyance;
7) Any criminal proceedings;
8) The influence of intoxicants, mountaineering, winter sports of any descriptions, contact sports of any description, riding or driving in races or rallies or the use of firearms;
9) Judgements that are not in the first instance delivered by or obtained from a Court of competent jurisdiction within Malaysia.

GENERAL EXCLUSIONS (APPLICABLE TO ALL BENEFITS)

We do not cover/pay for claims:

1. Directly or indirectly caused by or resulting from:
a) **Your Pre-existing Illness**;
b) **Your** suicide or attempted suicide, intentional self-injury, wilful exposure to danger (other than in an attempt to save human

life) or the committing of any criminal acts;

c) **You** being under the effect or influence of alcohol or drugs, unless the drug is taken in accordance with an authorised medical prescription;
d) Acquired Immune Deficiency Syndrome (AIDS) or AIDS Related Complex (ARC) and Human Immunodeficiency Viruses (HIV) related diseases or any sexually transmitted diseases and/or mutant derivatives or variations however caused;
e) **Your** Pregnancy, childbirth (including surgical delivery), abortion, miscarriage and its related complications except miscarriage due to bodily injury as a direct result of an **Accident**;
f) **You** travelling on, or against medical advice, or where the **Trip** is made solely for the purpose of obtaining treatment, non-emergency medical check-up or routine medical check-up;
g) **Your** failure to obtain any mandatory vaccines, inoculations or prescribed medications prior to the **Trip.**
h) **Your** mental illness, psychotic, depression, stress, anxiety or nervous disorders, (including any neuroses and their physiological or psychosomatic manifestations);
i) Any loss, **Injury**, damage or legal liability or any planned or actual travel in, to, or through Afghanistan, Belarus, Cuba, Democratic Republic of Congo, Iran, North Korea, Somalia, South Sudan, Sudan, Syria, Crimea (including Sevastopol), Venezuela, and Zimbabwe;
j) Any event that occurs if this Policy is purchased after the **Trip** has commenced; or
k) Any event that has occurred resulting in **You** not being able to or incapable to travel and such event was made known to **You** or which **You** were aware of at the time **You** took out the Policy or when the **Trip** was booked (whichever is later).

2. Directly or indirectly occasioned by, happening through, or in consequence of:
a) Engaging in sports or games in a professional capacity or where **You** would or could earn income or remuneration from engaging in such sports or games;
b) **Your** participation in **Extreme Sports and Activities**.

3. Arising from:
a) Offshore activities such as diving, mining, oil rigging, aerial photography or handling of explosives;
b) Air travel other than as a fare-paying passenger in a **Scheduled Carrier** or licensed chartered aircraft;
c) **Your** participation in any illegal activities, loss resulting directly or indirectly from action taken by Government Authorities including confiscation, seizure, destruction and restriction;
d) Loss or damage to hired or leased equipment, or testing of any kind of conveyance;
e) Employment on merchant vessels or as a manual labour; naval, military or air force service or operations, regular or temporary, military or police duties; overseas secondment as part of **Your** occupation; manual work in connection with any trade, employment or profession;
f) Survey of offshore installations or facilities under construction including survey from aerial conveyance;
g) War, invasion, act of foreign enemy hostilities (whether war is declared or not), civil war, rebellion, revolution, insurrection, military or usurped power or confiscation or nationalization or requisition or destruction of or damage to property under the order of any government or public or local authority;
h) Any loss or expenses in connection with or is contributed by **You** undertaking any **Trip** following the warning of any outbreak of disease, intended strike, riot or civil commotion, or impending natural disaster through or by general mass media;
i) Ionising radiations or contamination by radioactivity from any irradiated nuclear fuel or from any nuclear waste or from the combustion of nuclear fuel.
j) The radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly, or of its nuclear component;
k) Any terrorism attack using substance of Nuclear, Biological and Chemical;
l) **Your** direct participation in terrorist acts; or
m) Consequential loss or damage of any kind arising from any of the above.

HOW YOUR POLICY MAY BE CANCELLED

You may cancel this Policy at any time by giving **Us** notice in writing. Such notification shall become effective from the date **We** receive the notice, or the date specified in **Your** notice, whichever is later. **We** will refund the pro-rated premium to **You** for the unexpired **Period of Insurance**, provided no claims have been made under the **Policy** and subject to a minimum premium of RM60.

We may cancel this Policy by giving **You** 14 days' notice in writing to **Your** last email address or address known to **Us** and refund the pro-rated premium to **You** for the unexpired **Period of Insurance.**

HOW TO MAKE A CLAIM

Notice and Proof of Claim:

Any occurrence which may result in a claim must be reported to **Us** in writing within 30 days after it occurs and:

1) **You** shall without delay obtain and act upon the advice of a **Medical Practitioner.**
2) All **Certification, Information and Evidence** shall be furnished to **Us**.

3) **We** shall not be liable for any death, loss or **Permanent Disablement** if the claim is not reported to **Us** within 30 days after the **Accident.**

You may submit the claim documents to us via https://www.berjayasompo.com.my/page/claims-service or deliver the same to O**ur** Customer Service Centre at Level 36, Menara Bangkok Bank, 105, Jalan Ampang, 50450 Kuala Lumpur.

ACTIONS / DOCUMENTS REQUIRED IN CLAIM SUBMISSION	
Type of Claim	**What must I do or submit?**
Compulsory for All Types of Claim	a) Duly Completed and signed Claim Form. b) Airlines Ticket or Flight Itinerary.
Additional documents required depending on types of claim:	
Personal Accident	a) Medical report from the attending **Medical Practitioner**. b) Police Report. c) Death Certificate (if applicable). d) Post Mortem Report (if applicable).
Medical, Hospital & Other Expenses Emergency Medical Evacuation & Repatriation	a) Medical report from the overseas attending **Medical Practitioner**. b) Original medical invoices and receipts for all amount claimed (itemised). c) Original receipts for additional expenses claimed for cost of burial or cremation or transporting of mortal remains. d) Original receipts for additional expenses claimed for additional travel and accommodation. e) For Emergency Medical Evacuation & Repatriation, **You** must contact **Our** CIMB Travel Insurance Hotline at 603-7628 3860 to obtain approval in advance. Failure to do so will invalidate a claim for such costs. f) Copy of the **RTK-Ag/ PCR** test result (if applicable). g) Proof of full **COVID-19** vaccination.
Loss of Baggage and Personal Effects	a) Provide description of items (brand/model), year of purchase and price of purchase. b) Police report detailing the circumstances and list of items stolen. c) Property irregularity Report from Airline or Damaged Report from Carrier, hotel manager stated details of loss or damage. d) Photos showing the damaged baggage (extent of damage and brand).
Baggage Delay	a) Obtain delayed baggage report from the carrier.
Loss of Personal Money and Documents	a) Police report detailing the circumstances and list of items stolen. b) Original receipts for additional costs incurred in replacing lost travel documents.
Travel Delay	a) Boarding pass.
Travel Re-Route	a) Obtain written confirmation from the carrier concerned confirming the duration of delay and reasons.
Loss of Deposit or Cancellation	a) Medical report, Death Certificate, proof of relation etc. as the case may be. b) Original receipts for payment of the tour. c) Tour operator's booking and cancellation/refund invoices, terms & conditions. d) Copy of the **RTK-Ag/ PCR** test result (if applicable). e) Proof of full **COVID-19** vaccination.
Travel Curtailment	a) A written confirmation from the attending **Medical Practitioner** that it is necessary to return home. b) Medical report, Death Certificate, proof of relation etc. as the case may be. c) If due to hijacking or natural disaster, written confirmation from tour operator concerned confirming the incident. d) Boarding pass to confirm the actual date of arrival back to Malaysia. e) Copy of the **RTK-Ag/ PCR** test result (if applicable). f) Proof of full **COVID-19** vaccination

Travel Overbooked	a) A written confirmation from the carrier concerned confirming the over booked flight details and when the next alternative transportation is available.
Travel Misconnection	a) Boarding pass.
Hijacking Inconvenience	a) A written confirmation from the carrier concerned confirming the incident and duration.
Missed Departure	a) Original receipts for expenses claimed for additional accommodation and travel expenses. b) A written confirmation from the public transport services concerned confirming the mechanical breakdown.
Loss of Deposit or Full Payment due to Insolvency of Airlines	a) Original receipt for payment for the Airline ticket. b) Booking invoice together with the booking terms and conditions, and **Trip** itinerary. c) Official notification from the Carrier or Press Release confirming the insolvency
Personal Liability	a) DO NOT ADMIT LIABILITY. b) Forward any correspondence from third party unanswered to **Us** immediately.

Please note that **We** may request additional information when required; **Your** early response will expedite the processing of **Your** claim.

HOW WE WILL SETTLE YOUR CLAIM

Misrepresentation/ Fraud
Policy shall be void in any of the following circumstances:
1) If **Your** application or declaration is untrue in any respect;
2) If any material fact affecting the risk is incorrectly stated or omitted by **You**;
3) If this insurance or its renewal shall have been obtained through any misstatement, misrepresentation or suppression;
4) If any false declaration, false statement, fraudulent or exaggerated claim is made by **You**.

Certification, Information and Evidence
Any document (certificates, information, medical reports and evidence) as required by **Us** shall be furnished at **Your** expense, and in such a form that **We** may require.

Governing Law
This Policy shall be governed by and interpreted in accordance with Malaysian law.

Jurisdiction
Any disputes relating to this Policy must be submitted to the exclusive jurisdiction of the courts in Malaysia.

Other Insurance
1) No person shall be insured under more than one travel insurance policy issued by **Us**. In the event **You** are covered under more than one such policy, **We** shall consider that **You** are only insured under the policy which provides the greatest amount of benefit.
2) If at the time of any loss, damage, or liability arising under this Policy, there is other insurance provided by another company covering **You** for the same loss, damage or liability, **We** will only effect payment on a proportionate basis.

Determination of Age
In any claim, **Your** age will be determined as at the date of **Injury** or **Illness** with reference to **Your** birth date.

Right of Recovery
In the event that **We** or **Our** authorised service providers have authorised payment incurred by **You** which is not liable by **Us**, **We** or **Our** authorised service providers reserve the right to recover the full sum paid to **You**.

Subrogation
We are entitled to recover compensation in **Your** name from any third-party causing loss or damage to the items covered by this Policy at **Our** own expense and for **Our** benefit.

Sanction Limitation and Exclusion
No Insurer shall be deemed to provide cover and no Insurer shall be liable to pay any claim or provide any benefit hereunder to the extent that the provision of such cover, payment of such claim or provision of such benefit would expose that Insurer to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions laws or regulations of the European Union, United Kingdom or United States of America.

Please cut or snap the following card and keep it handy to call the Hotline in case emergency assistance is required.

BERJAYA SOMPO INSURANCE

CIMB Travel Insurance HOTLINE

FOR EMERGENCY WORLDWIDE E
Call our 24-Hour Hotline:

603 7628 3860

Service Provider:
Redion Malaysia Sdn. Bhd
(formerly known as Europ Assistance Services (Malaysia) Sdn Bhd)