



ประกันภัยการเดินทางต่างประเทศ
Outbound Travel Insurance

Smart Traveller Plus Insurance Policy

Sell through Electronic Channel (online)

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Remark: The English version is a translation of the original in Thai for information purpose only. In case of a discrepancy, the Thai original shall prevail.

Outbound Travel Insurance for Individual Smart Traveller Plus

(Sell through electronic channel(Online))

In reliance upon the statement made in the proposal for Insurance Policy which is considered a part of this Insurance Policy, and in consideration of the premium paid by the Insured, and subject to the insuring agreements, exclusions, general conditions and attached endorsements of this Insurance Policy, the Company agrees to the Insured as follows;

Section 1 – Definition

Words or expressions to which specific meanings have been attached in any part of this Insurance Policy shall bear such specific meaning wherever they appear, unless otherwise stated in this Insurance Policy.

Insurance Policy	means	policy schedule, term and conditions, insuring agreement, exclusions, endorsed document, special condition, application, certification, insurance endorsement and other declaration that the Insured has signed as a part of the Insurance Policy
Company	means	AXA Insurance Public Company Limited as the Insurer of this Insurance Policy
Insured	means	the person named as Insured in the policy schedule and/or endorsements as a person is covered under this Insurance Policy
Spouse	means	a legally married spouse of the Insured, and/or a person named in the policy schedule as a travel companion

Child/Children	means	Unemployed and unmarried child/children of the Insured including legally adopted child/children whose age not over twenty-one (21) years and wholly dependent on the Insured for financial support
Family Member	means	legal spouse and child/children of Insured.
Immediate Family Member		spouse, parents, grandparents, child/children, siblings and parent-in-law of the Insured
Accident	means	an event which happens suddenly from external means giving rise to a result which is not intended or anticipated by the Insured
Injury	means	bodily injury which is caused directly and solely from an accident and is independently from other causes
Sickness	means	symptom, irregularity, illness or disease occurred to the Insured unexpectedly, acute and independently from other causes after this Insurance Policy is in force.
Any Loss or Damage	means	bodily injury suffered by the Insured as a result of an accident and which causes death, dismemberment, loss of sight, disability or requires the Insured to be medically treated
Deductible	means	the first fixed amount which the Insured is responsible for paying according to insuring agreement or endorsement(if any) per each accident
Hospital	means	a legally constituted institution which is open for medical treatment and can provide overnight accommodation to its patient and provided with sufficient facilities and medical personnel and full

		range of services especially rooms for major surgery and duly permitted to registered as “Hospital” according to related law of such territory
Medical Center	means	a legally constituted medical center which is open for medical treatment and can provide overnight accommodation to its patient and duly permitted to registered as “Medical Center” according to the law of such territory
Clinic	means	a legally constituted modern type clinic which is open for medical treatment and diagnosis by the physician without overnight accommodation and duly permitted to registered as “Clinic” according to the law of such territory
Physician	means	a person who graduated medical sciences and is legally licensed with the medial council to provide medical treatment or surgery within the territory he/she is licensed but not including physician who is the Insured or legally spouse or child/children of the Insured
Nurse	means	a person licensed to perform nursing duties with the nurse council
Inpatient	means	a person who require medical treatment in hospital or medical center continuously not less than 6 hours and is registered as an in-patient based on diagnosis and advice of physician in accordance to medical standard for the period the suitable for such injury or sickness, including the circumstance that “inpatient” die before six (6) hours after hospitalized

Outpatient	means	a person who receives medical treatment in outpatient department or emergency room of hospital, medical center or clinic which according to diagnosis and medical standard has no indication to be admitted as an inpatient
Medical Standard	means	international rules or practices of modern medical service that creates suitable treatment for the patient according to the medical necessity and correspondent with the summary from the injury and sickness background, finding, autopsy result or others (if any)
Medical Necessity	means	<p>medical treatment which meets the following conditions:</p> <p>(1) in accordance with the diagnosis and treatment for such illness or injury of the patient;</p> <p>(2) in accordance with medical indication of current medical standard;</p> <p>(3) not primarily for the convenience of the patient or his/her family or treatment provider solely; and</p> <p>(4) in accordance with the suitable medical standard of patient care based on the medical necessity of such injury or sickness of patient</p>
Customary and Reasonable Medical Charges	means	medical treatment cost and/or any reasonable expense upon comparing with service of the hospital or medical center or clinic charged to general patient of the hospital or medical center or clinic where the Insured has received treatment
Pre-existing Condition	means	a disease (including complications), symptom or

		abnormality occurred to the Insured before the start date of this Insurance Policy which is sufficiently significant that the Insured would seek a diagnosis, care or treatment or a physician would be able to provide diagnosis, care or treatment
AIDS	means	an acquired immune deficiency syndrome which is caused by AIDS virus infection and shall inclusively mean infection of opportunistic microorganisms, Malignant Neoplasm, or infection or any sickness that blood tests represent positive results of HIV (Human Immune Deficiency Virus). Infection of opportunistic microorganisms includes but does not limit to Pneumocystis Carinii Pneumonia, Organism or Chronic Enteritis, Virus and/or Disseminated Fungi Infection, Malignant Neoplasm shall include but not limit to Kaposi's Sarcoma, Central Nervous System Lymphoma and/or other serious diseases presently known as the symptoms of Acquired Immune Deficiency Syndrome or reasons of sudden death, sickness or disability. In this regard, AIDS shall include HIV(Human Immune Deficiency Virus), Encephalopathy Dementia, and virus spreading
Policy Year	means	a period of one year from the commencement date or the subsequent annual anniversary thereafter
Residence	means	the place for living of the Insured in Thailand
Journey	means	the journey between Thailand and country of destination that is in line with the itinerary as the passenger of a commercial airline including scheduled transit for refueling and flight connection

Carrier	means	commercial airlines, cruise, train or bus that received transportation fare from passengers (excluding van, taxi and motorcycle) including their employee and representative
Public Transportation	means	services from commercial airlines legally licensed to carry passengers or bus, coach, train, ferry that are legally transport general passenger to the destination specified in the itinerary
Terrorism	means	an act, including the use of force or violence and/or the threat thereof, of any person or group(s) of persons, whether acting alone or on behalf of or in connection with any organization(s) or government(s), committed for political, religious, ideological or similar purposes including the intention to influence any government and/or to put the public, or any section of the public, in fear
Strike or work Stoppage	means	any kind of protest or work stoppage organized by employees undertaken in support of strike, oppose or interfere with goods production or service operation
Aircraft	means	an aircraft of commercial airline which is legally licensed to carry passengers but not include helicopter

Section 2 –General Terms and Conditions

2.1 Insurance Contract

This insurance contract is executed based on the reliance on the statement declared by the Insured in the application form and additional declaration (if any) duly signed by the Insured as evidence to accept such Insurance Policy according to the insurance contract; this Insurance Policy is thus issued by the Company as evidence.

In case of the Insured has already known but provided false statement in the declaration as mentioned in first paragraph, or already known any fact but concealed thereof, of which if it is known to the Company, it may motivate the Company to demand

higher premium or refuse to execute insurance contract. In this regard, this insurance contract shall become void pursuant to Section 865 of Civil and Commercial Code and the Company is entitled to terminate this insurance contract.

The Company cannot deny acceptance of responsibility except where there has been material misrepresentation in the aforementioned documents submitted by the applicant.

2.2 Completion and Alteration of Contract

This Insurance Policy, together with insuring agreement and endorsement forms part of insurance contract. Alteration in this insurance contract shall be valid upon being consented by the Company and endorse in this Insurance Policy or its endorsement.

2.3 Period of insurance

The Insurance Policy shall provide the coverage for the Insured according to below definition:

2.3.1 In case of a single trip policy

The coverage starts from the time the Insured departs his/her place of residence or business for a direct journey to the place of embarkation in Thailand to commence travel to the intended destination(s) and ends on whichever of the following that occurs first

- 1) The expiry of the period of insurance as specified on policy schedule
- 2) Insured returns to his/her place of residence or business in Thailand
- 3) Twenty-four (24) hours after arrival in Thailand.

2.3.2 In case of annual policy for multiple trips

The coverage starts and ends for each trip as mentioned in 2.3.1 subject to the maximum duration for each trip shall not exceed.....days (Maximum 180 days).

In case of the Insured is hospitalized as an inpatient during the Insurance Policy is in force and required continue medical treatment as an inpatient, this Insurance Policy will automatically extend until the Insured is discharged from hospital or medical center.

2.4 Report of Accident and Claim

The Insured, beneficiary or representative of the said person, as the case maybe, must inform the Company in case of injury, loss or damage that could cause the claiming for benefit under this Insurance Policy without delay. In case of death, notice must be reported to the Company immediately, unless it can be proved that there is reasonable explanation why the notice cannot be made in a timely manner and the notification is given to the Company as soon as possible.

For the claiming process, the Insured, beneficiary or representative of the said person is required to send the documents as state in insuring agreement and/or endorsement or any required document as deemed necessary to the Company within the period specified by the Company at their own expense.

Non submission of documents within the specified time shall not jeopardize the right to claim if it can be proved that there is reasonable explanation why a claim could not be made in a timely manner and that the claim was filed as soon as possible.

2.5 Medical Examination

The Company has the right to require a medical examination and diagnosis records of the Insured as deemed necessary and entitled to perform autopsy if necessary, by the expenses of the Company, and such autopsy is within the limit of law or religious doctrine.

In case the Insured, beneficiary or their representative, as the case maybe, does not allow the Company to review a medical examination and diagnosis records for process of claim consideration, the Company has the right to decline the claim for compensation from the Insured.

2.6 Compensation payment

The Company will pay compensation within 15 days commencing from the date the Company received complete and correct proof of loss or damage. Compensation for death will be paid to the beneficiary, while other compensation will be paid to the Insured.

In case it is doubtful that such above mentioned claim is not in compliance with the insuring agreement and/or endorsement in the Insurance Policy, the prescribed period may be extended as deemed necessary but shall not exceed 90 days commencing from the date the Company received complete documents.

If the Company is unable to complete compensation payment within the period mentioned above, the Company shall be responsible to pay 15% interest per annum of the payable amount commencing from the due date.

2.7 Premium Payment and Premium Refund

2.7.1 The premium must be paid promptly or prior to the effective date of the Insurance Policy.

2.7.2 In case of a single trip policy, the Insured will not be entitled to premium refund if the cancellation was done after the issuance of Insurance Policy unless the Insured receives VISA rejection from the embassy because of this Insurance Policy. The evidence for VISA rejection from the embassy is required and the Insured must notify the company prior to the effective date of the Insurance Policy.

2.7.3 In case of an annual policy, the Insured or the Company shall have the right to cancel the Insurance Policy according to the following conditions:

- (1) The Company shall have the right to cancel the Insurance Policy by giving written notice not less than fifteen (15) days in advance by registered mail to the Insured's last known address. In such event, the Company shall refund the paid premium to the Insured after premium deduction for the covered period of the Insurance Policy on a pro rata basis.
- (2) The Insured shall have the right to cancel the policy by giving written notice to the Company and shall be entitled to receive a premium refund after premium deduction for the covered period of the Insurance Policy on a short rate basis as per table of short-term premium rate:-

The Schedule of short-term premium rate

Period of Cover (not over/month)	Percentage of Annual Premium
1	15
2	25
3	35
4	45
5	55
6	65
7	75
8	80
9	85
10	90
11	95
12	100

Cancellation of Insurance Policy according to this condition regardless by any party, the entire Insurance Policy must be terminated. It is not possible to select termination only any part of coverage during the Policy Year.

The Insured will not be entitled to any premium refund if the request for Insurance Policy cancellation is filed after a claim has been made.

2.8 Arbitration

In case of dispute, contradictory, or any claim under the Insurance Policy between the person who is entitled to compensation and the Company. If the person who is entitled to compensation desired or finds it necessary to settle the dispute, contradictory or any claim by arbitration, the Company must conform and allow the case to be judged by arbitration according to the **arbitration regulation governed by the Office of Insurance Commission(OIC)**.

2.9 Precedent Condition

The Company shall not be liable to compensate under this Insurance Policy unless the Insured, the beneficiary or their representative, as the case maybe, have fully and correctly complied with the insurance contract and condition of this Insurance Policy.

2.10 Currency and Expenses incurred oversea

If the compensation covered under this Insurance Policy is in foreign currency, the Company will pay the compensation in Thai Baht by using the exchange rate on the date given on the receipt which use an evidence to claim under insuring agreement and/or endorsement.

2.11 Fraudulent claim

Any claim under this Insurance Policy filed with the fraudulent intention or present false document including any injury or illness intentionally happened for the purpose of claim payment under this Insurance Policy, the benefits under this Insurance Policy will be void. All benefits claimed fraudulently and received must be paid back to the Company.

Section 3 - General Exclusions

This Insurance Policy does not cover any loss or damage due to, as a consequence of, causes by or occur at the time as follow;(Unless otherwise specified in insuring agreement)

3.1 Suicide or attempted suicide or self-inflicted injury whether being his/her own action or allow others to perform while insane or not. This also includes the accident to the Insured due to consuming, drinking, or injection of toxic substance into the body or drug overdose.

3.2 Any action of the Insured while under the following condition

- 1) Under the influence of addictive drugs or narcotic drugs to the extent of being unable to control one's mind or**
- 2) Under the influence of alcohol which have blood/alcohol level of 150mg percent and over or**
- 3) In the event of no blood test for alcohol and the Insured is under the influence of those substances to the extent of unable to control one's mind.**

3.3 War, invasion, act of foreign enemies or warlike whether declared or otherwise, or civil war, insurrection, rebellion, riot, strike, civil commotion, revolution, coup d'état, chaos from the uprising of citizens against government, martial law announcement or any incident causing the maintenance of martial law.

3.4 Terrorism

3.5 Intentional unlawful acts of the Insured, seizure, confiscation, deterioration, destruction by Customs or other competent officer, violation of government regulations

- 3.6 Radiation or radioactivity from any nuclear fuel or any nuclear refuse arising from the combustion of nuclear fuel and any process of self-sustaining nuclear fission/fusion.**
- 3.7 Explosion of radioactivity or nuclear component or other hazardous material which may cause explosion in nuclear process.**
- 3.8 While the Insured serves as a soldier, police, or a volunteer and participates in war or crime suppression. In this case, if the time served is more than 30 days consecutively, the Company shall refund the premium from the date of service until such service is ended. After such time, the Insurance Policy shall become effective again until the expiry date on the policy schedule.**
- 3.9 While the Insured is taking part in a brawl or taking part in inciting a brawl.**
- 3.10 While the Insured is in the country or territory which is specified as excluded territory on policy schedule and/or the endorsement (if any).**
- 3.11 While the Insured is at the oil rigs, offshore petroleum drilling platform or underground mining.**

Section 4 - Insuring Agreement

Subject to regulations, insuring agreement, exclusions, terms, conditions and attached endorsements of this Insurance Policy, and in compensation for the premium paid by the Insured, the Company agrees to provide coverage only specified in the insuring agreement and/or the endorsement which is attached with this Insurance Policy and sum Insured is as specified on the policy schedule only.

Insuring Agreement

Loss of life, Dismemberment, Loss of sight or Total Permanent Disability due to Accident

Definitions

Dismemberment means the loss of body organ from the wrist joint or ankle joint and shall inclusively mean total loss of usage of such organs with clear medical indication that such organ will never be able to function at any time in the future.

Loss of Sight means complete blindness, which is permanently incurable.

Total Permanent Disability means disability to the extent of being unable to perform the normal duty in the Insured's regular occupation or any other occupation totally and permanently and such permanent disability prevent the Insured to perform 3 or more activities of daily living by himself/herself.

Activities of Daily Living(ADL) means the ability to perform 6 types of daily self-care activities which is a term used in healthcare to assess the patient. The Activities of Daily Living consist of

(1) The ability to move refer to the ability to move from chair to bed without the help of other person or equipment.

(2) The ability to walk or move refer to the ability to move from one room to another without the help of other person or equipment.

(3) The ability to dress refer to the ability to put on and take off clothes without the help of other person or equipment.

(4) The ability to clean refer to the ability to wash body in a bath or shower including the ability to get to and from

the bathroom without the help of other person or equipment.

(5) The ability to eat food refer to the ability to eat food without the help of other person or equipment.

(6) The ability to excrete refer to the ability to get to and from the toilet, using it appropriately, and cleaning oneself without the help of other person or equipment.

Coverage

This Insurance Policy covers any loss or damage due to bodily injury of the Insured caused by an accident during the trip duration and such accident lead to loss of life, dismemberment, loss of sight or total permanent disability of the Insured within one hundred and eighty (180) days commencing from the date of accident or the injury causes the Insured to receive continuous medical treatment as an inpatient in a hospital or a medical center and subsequently death, the Company will compensate in accordance with the schedule as follows:

100% of the sum insured	for loss of life
100% of the sum insured	for total permanent disability the Insured receive medical treatment for not less than twelve (12) consecutive months from the accident date or there is a clear medical indication that the Insured suffers a total permanent disability
100% of the sum insured	for loss of both hands from the wrist joint, both feet from ankle joint or loss of sight in both eyes
100% of the sum insured	for loss of one hand from the wrist joint and one foot from ankle joint.

100% of the sum insured	for loss of one hand from the wrist joint and loss of sight in one eye
100% of the sum insured	for loss of one foot from the ankle joint and loss of sight in one eye
60% of the sum insured	for loss of one hand from the wrist joint
60% of the sum insured	for loss of one foot from the ankle joint
60% of the sum insured	for loss of sight in one eye

*The Company shall compensate only one item of loss which has the highest amount.

The Company shall compensate the consequence result occurred according to this insuring agreement in aggregate not exceeding the sum insured stated on the policy schedule. If the Company has not paid up to such maximum amount of sum insured, the remaining benefit is still valid until the expiry of the policy period.

Additional terms and conditions (only apply to Insuring Agreement: Loss of life, Dismemberment, Loss of sight or Total Permanent Disability due to Accident)

Claim and evidence of loss or damage submission

The Insured, beneficiary or representative of the said person, as the case maybe, is required to send the following documents to the Company within 30 days commencing from the date of Death or the date physician diagnose the Insured with Dismemberment, Loss of sight or Total Permanent Disability at their own expense.

1. Claiming for death due to accident
 - 1.1 The Company's claim form
 - 1.2 Death Certificate
 - 1.3 Copy of Autopsy Report and Daily Police Report
 - 1.4 Copy of the Insured's passport and/or any travel document of the Insured

- 1.5 Copy of ID card and House Registration with the mark as “Death” of the Insured
- 1.6 Copy of ID card and House Registration of the beneficiary
2. Claiming for Total Permanent Disability or Dismemberment from an accident
 - 2.1 The Company’s claim form.
 - 2.2 Medical Certificate confirming total permanent disability or dismemberment
 - 2.3 Copy of the Insured’s passport/or any travel evidence.

Non submission of documents within the specified time shall not jeopardize the right to claim if it can be proved that there is reasonable explanation why a claim could not be made in a timely manner and that the claim was filed as soon as possible.

Specific Exclusions (only apply to Insuring Agreement: Loss of life, Dismemberment, Loss of sight or Total Permanent Disability due to Accident)

1. The Insurance Policy will not cover injury, or any loss or damage arise from, or in consequence of following causes;

- 1.1 Be killed or assaulted intentionally**
- 1.2 Parasite infection except pyogenic infections or tetanus, or rabies from a cut or wound suffered as a result of an accident**
- 1.3 Injury arise from abnormality or disability of the Insured either physically or mentally which is a pre-existing condition or before policy start date of this Insurance Policy**
- 1.4 Medical treatment or surgical treatment except the necessary treatment for the injury which is covered under this Insurance Policy and occurring within the period of this Insurance Policy**
- 1.5 Abortion unless such abortion is a result of accident**
- 1.6 Dental care or root canal treatment except dental treatment which is given within seven (7) days from the date of accident**
- 1.7 Replacement of or new sets of dentures, dental crowns, artificial denture**

1.8 Backache as a result of Disc herniation, Spondylolisthesis, Degeneration or Spondylosis, Spondylitis and Spondylolysis, except if there is a Fracture or Dislocation of spine as a result of an accident.

2. Loss or damage occurred at the time as follows unless the coverage is extended and stated in the endorsement

2.1 While Insured is hunting, racing of all kinds of car or boat, horse racing, ski racing including jet-ski, skate racing, boxing, parachuting (except for the purpose of life saving), boarding or traveling in a hot-air balloon, gliding, bungee jumping, climbing or hiking that requires tools or diving with oxygen tank and breathing equipment under water.

2.2 While the Insured is boarding or traveling in an aircraft which has no license for carrying passengers or does not operate as a commercial aircraft.

2.3 While the Insured pilots or works as a crew in any aircraft.

2.4 While the Insured is committing a crime or while the Insured is being arrested or escaping the arrest

Insuring Agreement

Medical Expenses due to Accident and Sickness

Definition

Alternative Medicine means Examination, treatment or preventive health care practices such as traditional Thai or Chinese herbal medicine, and similar which is not considered as modern medicine

Coverage

This Insurance Policy provides coverage if the Insured is injured in an accident or sickness caused by sudden and unpredictable which occurred during the insured period and received medical treatment in the hospital, clinic or a medical center in a foreign country whether as an inpatient or outpatient.

The Company will compensate the actual amount incurred which is customary and reasonable medical charge from such treatment according to the medical necessity and medical standard but not exceeding the sum insured as specified on the policy schedule.

If the Insured has a need for continual medical treatment in Thailand after returning from a trip, first follow-up medical visit must be made within twelve hours (12 hours) after arrived in Thailand.

The Company will compensate the actual expenses paid by the Insured maximum not exceeding 10% of sum insured or not exceeding 7 consecutive days depends on whichever is lower amount. However, the condition of this clause shall not be applied in case the Insured encounters an accident or need to be ambulated to Thailand for emergency medical treatment specified in the insuring agreement "Emergency Medical Evacuation and Repatriation" (If any).

Covered expenses are as follow

1. Physician fee such as medical practitioner fees, treatment fee, procedure and surgical fee, anesthesiologist fee, dental service fee etc.
2. Medicine, intravenous infusion cost, blood and blood component including expenses in separation, preparation and analysis for blood or blood component transfusion, laboratory test and pathology, radiological diagnosis, other special diagnosis method including physician reading fee , expenses related to the use or provision of service for medical tools and equipment outside the operation room, non-reusable medical supplies (medical supplies 1), operation room and equipment

inside excluding special nurse during admission as inpatient in hospital, medical center or clinic.

3. Cost of ambulance for medical emergency to transport the Insured to and from a hospital or a medical center and such transportation is considered medical necessity.
4. Take home drugs prescribe based on medical necessity but not over fourteen (14) days.
5. Cost of ICU room or standard single room including food provided for the patient by the hospital or medical center and daily nursing service fee.
6. Other expenses related to medical treatment such as nursing service fee, hospital service fee and medical procedure fee.

Claim and evidence of loss or damage submission

The Insured, beneficiary or representative of the said person, as the case maybe, is required to send the following evidences to the Company within 30 days after discharge from the hospital, medical center or the date received treatment from clinic at the expense of the Insured.

1. The Company's claim form
2. Physician's report stating the symptoms, diagnosis and the treatment
3. Receipt and invoice showing the itemized medical expenses
4. Copy of the passport and/or travel document of the Insured
5. Any required document as deemed necessary

The receipt with itemized medical expense must be the original receipt. The Company will return the original receipt remark the paid amount, so that the Insured can claim the remaining balance from other insurers. If the Insured received reimbursement from the government, other welfare or other insurers, the Insured may submit a copy of the receipt showing the amount paid by the government or other welfare and claim the remaining balance from the Company.

Non submission of documents within the specified time shall not jeopardize the right to claim if it can be proved that there is reasonable explanation why a claim could not be made in a timely manner and that the claim was filed as soon as possible.

Specific Exclusions (Only apply to Insuring Agreement :Medical Expenses due to Accident and Sickness)

This Insurance Policy does not cover medical expenses or any loss or damage arising from injury or illness (including complications) symptoms or abnormalities as follow:-

1. Pre-existing condition, injury or illness is existing or become aggravated due to pre-existing condition
2. Examination or treatment for congenital disorder or abnormal development or genetic disease.
3. Health check-up, convalescent care including rest cures and rehabilitation. Any examination or treatment which are not related to the diagnosis or not according to the medical necessity and standard of medical practice.
4. Any beautification treatment such as treatment for acne, freckles, dandruff, weight reduction, hair transplant, cosmetic surgery unless the surgery is necessary in order to reactivate the function of such organ and that injury is sustained as a result of an accident covered under this Insurance Policy.
5. Treatment related to pregnancy, miscarriage, child delivery, complication of pregnancy, infertility service (including analysis and treatment), sterilization or birth control.
6. Medical treatment for sign and symptom related to the mental disorders, mental illness, behavioral disorder or personality disorder including attention deficit hyperactivity disorder (ADHD), autism, stress, eating disorder or anxiety and drug addiction or genetic disease.
7. AIDS or venereal disease or sexually transmitted disease(STD).
8. Treatment or protection, medicine usage to prevent aging, hormone replacement therapy for menopause, erectile dysfunction in female or male, sexual identity disorders treatment and transsexual operation.
9. Eye examination and eyesight corrective surgery including lasik and other expenses associated with eyesight correction
10. Treatment for addiction of alcohol, cigarette psychoactive substance.
11. Parasite infection except pyogenic infections or tetanus, or rabies from a cut or wound suffered as a result of an accident
12. Any treatment or examination which are not considered a modern medicine, including alternative medicine e.g. acupuncture, natural therapy, massage or chiropractic, etc.
13. Orthosis and prosthesis such as crutches, glasses, hearing aid device, speech device and all kind of defibrillator.

- 14. Treatment or surgery relating to dental or gum e.g. denture, crowns and bridges, root treatment, filling, orthodontic, scaling, extraction, except the necessary dental treatment after an accident to relieve the pain or injury. However, this necessary dental treatment shall not include the expense for dental reconstructive treatment, orthodontics, crowns, scaling or polishing, filling, or dentures.**
- 15. Any medical treatment or surgery for injury or sickness incurred for the purpose of reaping benefit from this Insurance Policy.**
- 16. Medical expenses incurred from the physician who is the Insured or parents, spouse, or child/children of the Insured.**
- 17. Vaccination or Immunization except rabies vaccine after animal attack and tetanus vaccine after injury from accident which covered under this Insurance Policy.**
- 18. The Insured fails to obtain any recommended vaccines, inoculations prior to trip duration**
- 19. Medical Treatment or examination which is in trial stage or experimental, examination or treatment for sleep apnea, sleep disorders or snoring.**
- 20. Any injury occurred while Insured is hunting, racing of all kinds of car or boat, horse racing, ski racing including jet-ski, skate racing, boxing, parachuting (except for the purpose of life saving), boarding or traveling in a hot-air balloon, gliding, bungee jumping, climbing or hiking that requires tools or diving with oxygen tank and breathing equipment under water.**
- 21. Any injury occurred while the Insured is committing a crime or being arrested or escaping the arrest**
- 22. Any injury occurred while the Insured is boarding or traveling in an aircraft which has no license for carrying passengers or does not operate as a commercial aircraft.**
- 23. Any injury occurred while the Insured pilots or works as a crew in any aircraft.**
- 24. The Insured travel to the country, specific area or event where the Thai government or destination country has advised against all travel.**

Insuring Agreement

Emergency Medical Evacuation or Repatriation back to Thailand

Coverage

This Insurance Policy covers if the Insured sustains injury from an accident or suffers from sickness which is sudden and unforeseeable during the trip duration in abroad , subject to the injury or sickness is covered under this Insurance Policy, and it is medically necessity to evacuate and repatriate the Insured as per the advice of Company, emergency assistance provider or attending physician in order to receive appropriate medical care or return to Thailand. The Company will pay for the actual cost incurred for this evacuation and repatriation but not exceed the sum insured stated in the policy schedule. This shall include the expense to transport the Insured by air, boat, land or any appropriate means determined solely on medical necessity and medical standard.

The Company will cover the expense of any services arranged by emergency assistance provider for transportation, medical services, medical supplies and medical fee as deem necessary, resulting from emergency medical evacuation of the Insured as state in this insuring agreement.

The emergency assistance provider shall decide the evacuation method for urgent medical treatment, form of transportation and destination including the cost of transportation by air, boat, land or any appropriate means. If the Insured is injured in the remote area, the Insured or his/her representative shall contact local physician to get first aid treatment and then the emergency assistance provider will consider the appropriate method of evacuation later.

The first aid treatment shall be covered under insuring agreement : Medical Expenses. The emergency assistance provider refers to Inter Partner Assistance Company Limited.

Additional Terms and Condition (Only Apply to Insuring Agreement: Emergency Medical Evacuation or Repatriation back to Thailand)

Claim and evidence of loss or damage submission

The Insured, beneficiary or representative of the said person, as the case maybe, is required to send the following evidences to the Company within 30 days at the occurrence of the right to claim subject to this insuring agreement at the expense of the Insured.

1. The Company's claim form.

Non submission of documents within the specified time shall not jeopardize the right to claim if it can be proved that there is reasonable explanation of delay sending and that the document was filed as soon as possible.

The Company and/or the emergency assistance provider shall reserve the right to consider as follow:

1. If the injury or sickness of the Insured is a serious condition which requires emergency evacuation
2. The suitable place for the Insured to receive medical treatment
3. The suitable means of evacuation or repatriation back to Thailand which depends on a material fact or circumstance that the Company and/or emergency assistance provider are aware of at that time
4. Insured or Insured's representative must inform the Company or emergency assistance provider without delay

Specific Exclusions (Only Apply to Insuring Agreement: Emergency Medical Evacuation or Repatriation back to Thailand)

This Insurance Policy does not cover any loss or damage arise from the following causes:-

1. **All expenses related to service which the Insured is not liable to pay, nor any expenses included in travel cost or travel services**
2. **All expenses related to any service unapproved nor managed by emergency assistance provider unless the Insured or his/her companion is unable to inform emergency assistance due to uncontrollable reason of Insured or his/her travel companion**

However, if expenses related to any service unapproved nor managed by emergency assistance provider or the Insured paid in advance incurred because the Insured is unable to notify the emergency assistance provider due to circumstance is uncontrollable and necessary for the Insured to obtain emergency medical treatment. The Company shall reimburse the actual amount incurred to Insured but not exceeding the amount which the emergency assistance provider would charge from the Company for the same or similar services and not exceeding the sum insured stated on the policy schedule.

Insuring Agreement Repatriation of Mortal Remains back to Thailand

Coverage

This Insurance Policy covers if the Insured dies within 30 days commencing from the date of accident or sickness which is sudden and unforeseeable during the trip duration in abroad subject to such loss occur from the cause covered under this Insurance Policy.

The Company will pay for expenses incurred for funeral expenses including casket, corpse preparation, or cremation at the place where the Insured dies. The expense incurred to repatriate the cremains back to the Thailand by the Company or emergency assistance provider authorized by the Company will be charged directly to the Company but not exceeding the sum insured stated on the policy schedule.

The emergency assistance provider refers to Inter Partner Assistance Company Limited.

Additional Terms and Condition (Only Apply to Insuring Agreement: Repatriation of Mortal Remains back to Thailand)

Claim and evidence of loss or damage submission

The Insured, beneficiary or representative of the said person, as the case maybe, is required to send the following evidences to the Company within 30 days at the occurrence of the right to claim subject to this insuring agreement at the expense of the Insured.

1. The Company's claim form.

Non submission of documents within the specified time shall not jeopardize the right to claim if it can be proved that there is reasonable explanation of delay sending and that the document was filed as soon as possible.

Specific Exclusions (Only Apply to insuring agreement: Repatriation of Mortal Remains back to Thailand)

This Insurance Policy does not cover any loss or damage arise from the following causes:-

- 1. All expenses related to service which the Insured is not liable to pay, nor any expenses included in travel cost or travel services**
- 2. Expense for funeral including burial, cremation or transportation of the Insured's body at his/her domicile**

However, if expenses related to any service unapproved nor managed by emergency assistance provider or the Insured paid in advance incurred because the Insured is unable to notify the emergency assistance provider due to circumstance is uncontrollable and necessary for the Insured to obtain emergency medical treatment. The Company shall reimburse the actual amount incurred but not exceeding the amount which the emergency assistance provider would charge from the Company for the same or similar services and not exceeding the sum insured stated on the policy schedule.

Insuring Agreement Third Party Liability

Definition

Third party means any person other than immediate family member or family member of the Insured, person reside with the Insured, employee during the course of work and person who travel with the Insured

Coverage

While the Insured is covered by this Insurance Policy, the Company shall compensate on behalf of the Insured to third party which the Insured is legally liable for the actual amount of loss or damage incurred during period of insurance but not exceeding sum insured as stated on the policy schedule for the any loss or damage as follow

1. Loss of life or bodily injury of third party caused by or as a consequence of the accident arise from Insured.
2. Loss or damages to property of third party caused by or as a consequence of accident arise from the Insured.

Additional Terms and Condition (Only Apply to Insuring Agreement: Third Party Liability)

1. Duty of the Insured in the event of claim
In the event which could cause claim for compensation under this insuring agreement, the Insured must;
 - 1.1 Notify the Company without delay.
 - 1.2 Pass the case to the Company immediately after receipt subpoena or judicial order in the event that the Insured is sued for legal liability to third party which covered under this insuring agreement.
 - 1.3 The Insured must not agree or promise to compensate to third party, other person, injured person or take any action which could cause prosecution or take legal proceeding without consent of the Company, unless the Company have failed to take action with such claim in a proper time frame after received the notification from the Insured.
 - 1.4 The Insured must provide detail and assist the Company in settlement of any compensation, defense or prosecution.
2. Duty of the Insured to prevent
The Insured must prevent and take proper precaution to avoid any accident and must comply with legal provision and government officer's regulation.

3. Subrogation

The Insured, at the expense of the Company, must take any necessary procedure required by the Company, either before or after received compensation from the Company in order to preserve the rights of subrogation from third party.

4. Company's right

The Company has the right to defend and compromises on behalf of the Insured for any appeal.

5. Liability average if the Insured has more than one insurance

If the Insured has insurance with other insurer which has the same coverage of third-party liability as this insuring agreement at the time of the incident of claim, the Company shall share the compensation for damage, litigation expense and other expense with other insurers proportionally.

Claim and evidence of loss or damage submission

The Insured is required to send the following evidences to the Company within 30 days at the occurrence of the third-party liability at the expense of the Insured.

1. The Company's claim form
2. Copy of the Insured's passport and/or traveling document of the Insured
3. Copy of Police officer's daily report at the scene of action
4. Any required document as deemed necessary

Non submission of documents within the specified time shall not jeopardize the right to claim if it can be proved that there is reasonable explanation why a claim could not be made in a timely manner and that the claim was filed as soon as possible.

Specific Exclusions (Only apply to Insuring Agreement: Third Party Liability)

This Insurance Policy does not cover any loss or damage from the following reason

- 1. Any loss or damage to life, body or property of anybody who is the immediate family or family member of the insured, a person residing with the Insured, employee in the course of the employment and a person traveling together with the Insured**
- 2. Any loss or damage to property of the Insured or in possession or legally supervised by the Insured**
- 3. Any loss or damage related to the liability claimed subject to any contract made by the Insured and the liability shall not incur in the absence of the contract.**
- 4. Any loss or damage caused by willful, malicious or unlawful act of the Insured.**

- 5. Any loss or damage arising from ownership, in possession or use of all kinds of vehicle or pistol including pet or animal of the Insured, immediate family and family member.**
- 6. Liability arising from trade, professional activities or failure to render business of the Insured.**
- 7. Any loss or damage caused by the action of the Insured while having mental illness or sign of mental illness including while the Insured is taking part in a brawl or inciting a brawl.**

Insuring Agreement Trip Cancellation

Coverage

The Company shall compensate for any loss or damage of the travel and/or accommodation expenses that the Insured already paid and cannot be reimbursed from anywhere due to trip cancellation after the effective of Insurance Policy and the trip cancellation occurs within.....days (Maximum 30 days)before the commencement date of the trip and as a result from:-

1. Loss of life, severe injury or sickness which threaten to life of the Insured. The Company must receive the death certificate from the authorized person or the written medical advice from the attending physician that confirm the trip cancellation is due to severe injury or sickness which threaten to life.
2. Loss of life, severe injury or sickness which threaten to life of the spouse, child/children, parents, grandparents, siblings of the Insured or spouse. The Company must receive the death certificate from the authorized person or the written medical advice from the attending physician that confirm the trip cancellation is due to severe injury or sickness which threaten to life.
3. The Insured receives summons to present as witness in the court during the period of insurance subject to Insured has never known in this matter.
4. The permanent residence of the Insured is severely damaged due to fire or natural disaster within.....week (Up to 1 week) before travel start date which resulting in the Insured is unable to travel as planed schedule.

The Company will reimburse the Insured under this insuring agreement for deposit, travel expense, ticket fee, accommodation, food which the Insured already paid in advance and/or any expense the Insured is legally liable to pay. The Company will compensate for only the loss or damage in which cannot be reimbursed from anywhere and for the actual cost incurred not exceeding sum insured as stated on policy schedule.

The coverage shall be in force only if the Insured obtained the Insurance Policy before being aware of any incident that lead to trip cancellation. **The Insured cannot claim for compensation under insuring agreement: trip cancellation and insuring agreement: trip curtailment (if any) for the same incident.**

Additional Terms and Conditions (Only Apply to insuring agreement: Trip Cancellation)

Claim and evidence of loss or damage submission

The Insured is required to send the following evidences to the Company within 30 days after the occurrence of trip cancellation at the expense of the Insured.

1. The Company's claim form.
2. Copy of the Insured's passport and/or traveling document of the Insured.
3. Death certificate from the authorized person or medical certificate from attending physician confirming that trip cancellation is necessary due to severe injury or sickness which threaten to life
4. Any required document as deemed necessary

Non submission of documents within the specified time shall not jeopardize the right to claim if it can be proved that there is reasonable explanation why a claim could not be made in a timely manner and that the claim was filed as soon as possible

Specific Exclusions (Only apply to Insuring Agreement: Trip cancellation)

This Insurance Policy does not cover any loss or damage arise from or as a consequence of the following reason

- 1. Circumstances known to the Insured before or at the time of purchasing Insurance Policy or booking any trip which could reasonably have been expected to lead to cancelling the trip**
- 2. Pre-existing condition including symptom or complication related to pre-existing condition that occur later**
- 3. Any claim arising from a reason not listed in the 'coverage' section**
- 4. Treatment for mental illness or any sign of mental illness.**
- 5. Any loss or damage occurred directly or indirectly from control or rules and regulation of the government.**
- 6. Any claim where the Insured cannot travel or choose not to travel because the advises against travel due to a pandemic from The Ministry of Public Health or other government agencies.**
- 7. Bankruptcy, liquidation, breach of contract of travel agencies or carrier caused to trip cancellation**
- 8. Any unused or additional costs incurred by the Insured which are recoverable from:**
 - 8.1 The providers of the accommodation, their booking agents, travel agent or other compensation scheme.**

- 8.2 The providers of the transportation, their booking agents, travel agent, compensation scheme or The Civil Aviation Authority of Thailand.**
- 8.3 Your credit or debit card provider or Paypal.**
- 9. Any illegal action taken by the Insured or the Insured is prosecuted**
- 10. Any loss or damage for any trip privilege of Insured**

Insuring Agreement Travel Delay

Coverage

This Insurance Policy covers in the event that aircraft, cruise or train which the Insured takes as planned schedule state on policy schedule is delayed for at least consecutive hours (up to 8 hours), or other (if any) as specified on the policy schedule from the following reason :-

1. As a result of adverse weather condition causes carriers of aircraft, cruise or train to postpone travel for safety of passengers.
2. Defect, malfunction, breakdown of machine, or mechanical or electrical derangement of the engine or equipment of the aircraft, cruise or train.
3. Strike or work stoppage of the employees of carrier, aircraft, airport ,cruise or train.

The Insured shall submit any evidence that states the time delay and cause of delay, issued by the carrier. The Company shall compensate the Insured every.....hours delay(Up to 8 hours) or other (if any) as stated on the policy schedule, but not exceeding sum insured stated on the policy schedule.

Additional Terms and Condition (Only Apply to Insuring Agreement: Travel Delay)

Claim and evidence of loss or damage submission

The Insured is required to send the following documents to the Company within 30 days at the occurrence of trip delay at the expense of the Insured.

1. The Company's claim form.
2. Copy of the Insured's passport and/or any travel evidence
3. Document stating the time delay and cause of delay by carrier
4. Any required document as deemed necessary

Non submission of documents within the specified time shall not jeopardize the right to claim if it can be proved that there is reasonable explanation why a claim could not be made in a timely manner and that the claim was filed as soon as possible.

Specific Exclusions (Only apply to Insuring Agreement: Travel Delay)

This Insurance Policy does not cover any loss or damage due to or arise from the following reason

- 1. The Insured fails to check in before boarding aircraft, cruise or train at the time specified in itinerary supplied to the Insured and unable to obtain the**

written confirmation from the carriers or their handling agents of the number of hours of delay and the reason for such delay.

- 2. Strike or industrial action of the employees of carrier, aircraft, airport, cruise or train occur before applying for this Insurance Policy.**
- 3. The delay arising from the service cancelled by the carrier due to order or recommendation of government of any country.**
- 4. The delay which the Insured is aware before applying for this Insurance Policy.**
- 5. Any loss or damage for any trip privilege of Insured**
- 6. Any damage which can be reimbursed or refunded by aircraft, airport, cruise or train.**

Insuring Agreement Flight Misconnection

Coverage

This Insurance Policy covers in the event that the Insured is missing connecting flight duly confirmed according to the trip schedule while being abroad at the transfer point due to late arrival of the incoming confirmed connecting flight for onward transportation and there is no alternative flight is available to Insured within.....hours (Maximum 8 hours) or other (if any) as specified on the policy schedule, starting from the time when the delayed aircraft arrives the transit point

The Company shall compensate the Insured for accommodation, food and drink as necessary due to flight misconnection for every..... consecutive hours(Maximum 8 hours) or other (if any) as specified on the policy schedule but not exceed sum insured stated on the policy schedule.

Additional Terms and Condition (Only Apply to Insuring Agreement: Flight Misconnection)

Claim and evidence of loss or damage submission

The Insured is required to send the following documents to the Company within 30 days after the occurrence of flight misconnection at the expense of the Insured.

1. The Company's claim form
2. Copy of the Insured's passport and/or traveling document of the Insured
3. Document stating the cause of flight misconnection by commercial airline or carrier
4. Any receipt of actual expense incurred
5. Any required document as deemed necessary

Non submission of documents within the specified time shall not jeopardize the right to claim if it can be proved that there is reasonable explanation why a claim could not be made in a timely manner and that the claim was filed as soon as possible.

Specific Exclusions (Only apply to Insuring Agreement: Flight Misconnection)

This Insurance Policy does not cover any loss or damage due to or arise from the following reason

- 1. The Insured fails to get in the transportation at the first departure point by any reason**
- 2. The Insured fails to check in with the airline within the specified time**
- 3. Any prohibition or regulations by any government for delay or changing trip including error, omission or breach of contract is done by service provider or travel agency**
- 4. The delay arising from the service cancelled by the carrier due to order or recommendation of government of any country**

Insuring Agreement Trip Curtailment

Coverage

This Insurance Policy covers if the Insured's trip is shortened after the start of traveling and the Insured has to return to Thailand before the planned date which caused by:-

1. Loss of life, severe injury or sickness which threaten to life of the Insured resulting in trip curtailment. The Company must receive the death certificate from the authorized person or the written medical advice from the attending physician that confirm the trip cancellation is due to from severe injury or sickness which threaten to life.
2. Loss of life, severe injury or sickness which threaten to life of the spouse, child/children, parents, grandparents or siblings of Insured or spouse resulting in trip curtailment. The Company must receive the death certificate from the authorized person or the written medical advice from the attending physician that confirm the trip cancellation is due to severe injury or sickness which threaten to life.
3. Cancellation announcement of carriers due to adverse weather condition.

The Company shall compensate for loss or damage directly arise from trip curtailment in which the Insured made the advance payment for the planned trip in respect of traveling or accommodation expense or fine due to trip curtailment and these expenses cannot be reimbursed from any insurance company or others. The Company will compensate the actual amount paid by the Insured but not exceeding the sum insured stated on the policy schedule.

The coverage shall be in force only if the Insured obtained the Insurance Policy before being aware of any incident that lead to trip curtailment. **The Insured cannot claim for compensation under insuring agreement: trip curtailment and insuring agreement: trip cancellation (if any) for the same incident.**

Additional Terms and Conditions (Only Apply to insuring agreement: Trip Curtailment)

Claim and evidence of loss or damage submission

The Insured is required to send the following documents to the Company within 30 days at the occurrence of trip curtailment at the expense of the Insured

1. The Company's claim form.
2. Copy of the Insured's passport and/or traveling document of the Insured.

3. Document describe the event of shortening traveling of carries or any evidence that stating the cause of trip curtailment.
4. Any required document as deemed necessary

Non submission of documents within the specified time shall not jeopardize the right to claim if it can be proved that there is reasonable explanation why a claim could not be made in a timely manner and that the claim was filed as soon as possible

Specific Exclusion (Only apply to Insuring Agreement: Trip Curtailment)

This Insurance Policy does not cover any loss or damage due to or arise from the following reason

1. **Circumstances known to the Insured before or at the time of purchasing Insurance Policy or booking any trip which could reasonably have been expected to lead to cancelling the trip**
2. **Pre-existing condition including symptom or complication related to pre-existing condition that occur later**
3. **Treatment for mental illness or any sign of mental illness**
4. **Any claim arising from a reason not listed in the 'coverage' section**
5. **Any loss or damage occurred directly or indirectly from control or rules and regulation of the government. Bankruptcy, liquidation, breach of contract of travel agencies or carrier cause trip curtailment.**
6. **Any unused or additional costs incurred by the Insured which are recoverable from:**
 - 6.1 **The providers of the accommodation, their booking agents, travel agent or other compensation scheme.**
 - 6.2 **The providers of the transportation, their booking agents, travel agent, compensation scheme or The Civil Aviation Authority of Thailand.**
 - 6.3 **Your credit or debit card provider or Paypal.**
7. **Any loss or damage for any trip privilege of Insured**
8. **Any illegal action taken by the Insured or the Insured is prosecuted**

Insuring Agreement Baggage Delay

Coverage

The Insurance Policy covers in the event of the Insured's baggage delay due to the carriers that send the baggage to the wrong destination or temporary lost the baggage for more than..... hours (Maximum 8 hours) or as specified on the policy schedule, after the Insured arrives at the baggage claim point at the scheduled destination that specified on the policy schedule.

The Company shall compensate the Insured on the actual expenses paid for essential clothing, but not exceed sum insured as stated on the policy schedule.

Additional Terms and Conditions (Only Apply to insuring agreement: Baggage Delay)

1. Claiming for benefit

The Insured is required to send the following documents to the Company within 30 days after the occurrence of baggage/luggage delay at the expense of the Insured.

1. The Company's claim form.
2. Copy of the Insured's passport and/or traveling document of the Insured.
3. Any written confirmation states the delay from airline or carriers.
4. Any required document as deemed necessary.

Non submission of documents within the specified time shall not jeopardize the right to claim if it can be proved that there is reasonable explanation why a claim could not be made in a timely manner and that the claim was filed as soon as possible.

2. Subrogation

In case the Company already paid compensation under this Insurance Policy, the Company shall subrogate the Insured's rights having over any person or organization only for the amount compensated by the Company. The Insured must cooperate with the Company in handling documents, as well as taking necessary procedures to protect such rights, and not take any action which could damage the right of the Company, and after such loss or damage, the Insured must not take legal proceedings against a person causing such loss or damage.

Specific Exclusions (Only apply to Insuring Agreement: Baggage Delay)

This Insurance Policy does not cover any loss or damage due to or arise from the following reason

- 1. Baggage delay at Thailand or after the end of travel period as specified on the policy schedule.**
- 2. Any expenses already compensated to the Insured by the carriers.**
- 3. Baggage seized or detained by customs, airport officer or authorized person.**
- 4. Expenses that the Insured can claim from airline or carriers.**

Insuring Agreement

Loss or Damage of Baggage and/or Personal Effects in the Baggage

Definitions

Third party	means	any person other than immediate family member or family member of the Insured, person reside with the Insured, employee during the course of work and person who travel with the Insured
Baggage	means	baggage that the Insured carries with while travelling
Personal Effects	means	personal effects of the Insured that the Insured carries with while travelling and such effects must be in baggage and not listed in exclusion
Souvenir	means	articles that are a symbol or reminder of an event, place or things, and that are sold or given as souvenirs
Accessories	means	articles such as rings, bracelets, necklaces, bangles, earrings, pendants and watches worn as body accessories
Valuable items	means	accessories made of gold, silver, or other precious metals, wool, watches and jewelry, diamond or precious stones including gold ornaments and silverware
Pair or set	means	any asset/article which look the same or merged or use together
Robbery	means	Theft by doing act of violence or threatening to do any act of violence immediately in order to:- <ol style="list-style-type: none">1. Facilitate the theft or taking away of such property, or2. Obtain the delivery of such property, or3. Take hold of such property, or4. Conceal the doing of such offence, or5. Escape from arrest

Theft shall include the event that a person falsely or illegally takes hold of the property owned by or co-owned by another person

Gang Robbery means Robbery committed by 3 or more persons

Coverage

This Insurance Policy covers any loss or damage of baggage and/or personal effects in the baggage of the Insured during the trip by the following causes;

1. While baggage and personal effects therein is in care custody and control of the hotel's staff or carrier. Also, the evidence of such loss must be obtained in writing from the hotel or carrier management at the place of loss or damage
2. Robbery, gang robbery or any action done with aggression or threatening the Insured from other person in order to take hold of baggage or personal effects

The Company shall compensate the Insured for loss or damage of baggage/ personal effects in the baggage of Insured the actual costs which cannot reimburse from manufacturer, carriers or hotel or accommodation service provider or other insurance, but not more than the amount stated per item (such as a piece or a pair or a set etc.) as specified on the policy schedule.

Additional Terms and Conditions (Only Apply to insuring agreement: Loss or Damage of Baggage and/or Personal Effects in the Baggage)

1. Compensation and limit of liability of the Company

The Company shall compensate by practicing one of the following methods

- 1.1 Pay for the actual value at the time of loss or damage of the property and the depreciation value of such property is considered. The Company's limit of liability per piece, pair or set not exceedingBaht(Up to 10,000) and not exceeding sun insured as stated on policy schedule or
- 1.2 Repair the actual damage or
- 1.3 Offer the similar property for replacement

2. Duty of the Insured in the event of claim

In the event of loss or damage occurred, the Insured must

- 2.1 The Insured must report to the police or authorized person having jurisdiction at the place of loss or damage within 24 hours from the incident. The Insured shall submit the written police report, or the letter certified by authorized person to Company as supporting evidence for claiming. In case of the inevitable event that the insured could not report to the police or authorized person within the specified time, it shall

not jeopardize the right to claim if it can be proved that there is reasonable explanation why the report could not be made in a timely manner and that it was done as soon as possible

- 2.2 The Insured must take all the procedures to ensure that the baggage and personal effects are in proper care
- 2.3 The Insured is liable to deductible per each loss or damage for the amount stated on policy schedule in every loss or damage
- 2.4 The Insured, beneficiary or representative of the said person, as the case maybe, must notify and send documents or evidences to the Company within 30 days after the occurrence of loss or damage at the expense of the Insured
 - 2.4.1 The Company's claim form
 - 2.4.2 Copy of the Insured's passport and/or traveling document of the Insured
 - 2.4.3 Copy of Police officer's daily report at the scene of action
 - 2.4.4 Letter certifying loss or damage from the carrier, manager or owner of the place the Insured resides at the date of loss or damage including the payment slip of the transporter manager or the owner of residence
 - 2.4.5 Any required document as deemed necessary

Non submission of documents within the specified time shall not jeopardize the right to claim if it can be proved that there is reasonable explanation why a claim could not be made in a timely manner and that the claim was filed as soon as possible.

3. Liability average if the Insured has more than one insurance

If at the time of loss or damage, the Insured has insurance with other insurer which cover the same loss or damage, whether effected by the Insured or other person acting on behalf of the Insured. In no case shall the Company be liable to compensate or contribute more than its ratable proportion of such loss or damage to the total sum insured under all policies and the Company shall not compensate more than sum insured under this Insurance Policy.

4. Subrogation

In case the Company already paid compensation under this Insurance Policy, the Company shall subrogate the Insured's rights having over any person or organization only for the amount compensated by the Company. The Insured must cooperate with the Company in handling documents, as well as taking necessary procedures to protect such rights, and not take any action which could damage the right of the Company.

Specific Exclusions (Only apply to Insuring Agreement : Loss or Damage of Baggage and/or Personal Effects in the Baggage)

This Insurance Policy does not cover any loss or damage due to or arise from the following reason

- 1. Deductible is borne by the Insured that specified on the policy schedule (if any)**
- 2. Damage caused by the confiscation in the storage room of the customs department, airport officer or government authority of that country.**
- 3. Pets, wallet, handbag, bag pack or other kinds of baggage that is for general use and not baggage, household appliances, antique, computer (software and computer accessories), valuable items namely jewelry, gold, silver, articles made out of gold and silver, contact lens, denture, artificial limbs, stock certificate, all kind of documents, bill, notes, coin, cash, travel cheque, tickets and souvenir**
- 4. Rented or leased equipment**
- 5. Loss or injury or damage of baggage/ personal effects caused by wear and tear, gradual deterioration, moths, vermin, inherent vice, self-depreciation or damage occurred due to any action to repair, clean or modify and amend such property**
- 6. Loss or injury or damage of baggage/ personal effects was sent in advance before the commencement date of Insurance Policy and article mailed or crised separately**
- 7. Loss or damage to the baggage and/or personal effects in baggage left unattended in the public place or in any vehicle as a result of the Insured's failure to take care and precaution for the safeguard and security of such property**

Insuring Agreement

Loss or Damage of Personal Money and Travel Cheque

Definition

Personal Money	means	bank notes or coins in legal tender
Travel Cheque	means	a cheque for a fixed amount, sold by a bank or travel agent, and easily exchanged for cash in foreign countries
Robbery	means	Theft by doing act of violence or threatening to do any act of violence immediately in order to:- <ol style="list-style-type: none">1) Facilitate the theft or taking away of such property, or2) Obtain the delivery of such property, or3) Take hold of such property, or4) Conceal the doing of such offence, or5) Escape from arrest Robbery shall include the event that falsely or illegally takes hold of the property owned by or co-owned by another person.
Gang Robbery	means	Robbery committed by 3 or more persons.

Coverage

This Insurance Policy covers loss or damage of the Insured's personal money and travel cheque during trip duration according to his/her itinerary:-

1. Resulting from burglary with forcible entry at the hotel safe deposit box where the Insured is registered as a guest, or
2. Arise from robbery, gang-robbery or way of violent means

Additional Terms and Conditions (Only Apply to insuring agreement: Loss or Damage of Personal Money and Travel Cheque)

1. Duty of the Insured in the event of claim

- 1.1 The Insured must report such loss to the management of hotel and to the local police or authorized person having jurisdiction at the place of loss or damage within 24 hours from the incident. The Insured shall submit the written police report, or the letter certified by authorized person to Company as supporting evidence for claiming. In case of the inevitable event that the insured could not report to the police or authorized person within the specified time, it shall not jeopardize the right to claim if it can be proved that there is reasonable explanation why the report could not be made in a timely manner and that it was done as soon as possible.
- 1.2 The Insured has taken all reasonable prevention to prevent the loss or burglary as the normal reasonable person would have done.
- 1.3 The Insured must take all reasonable actions or as required by the Company for the purpose of subrogation from the third party

2. Compensation and limit of liability of the Company

- 2.1 The Company shall compensate for such loss or damage of personal money and travel cheque which the Insured could not claim from anyone or other insurances for the actual value of damage but not exceed the sum insured specified on the policy schedule less the deductible (if any).
- 2.2 The Insured, beneficiary or representative of the said person, as the case maybe, must notify and send documents or evidences to the Company within 30 days after the occurrence of loss or damage at the expense of the Insured
 - 1) The Company's claim form
 - 2) Copy of the Insured's passport and/or traveling document of the Insured
 - 3) Copy of Police officer's daily report at the scene of action
 - 4) Letter certifying loss or damage from the manager or owner of the place the Insured resides at the date of loss or damage including the payment slip of the management or the owner of residence.
 - 5) Any required document as deemed necessary

Non submission of documents within the specified time shall not jeopardize the right to claim if it can be proved that there is reasonable explanation why a claim could not be made in a timely manner and that the claim was filed as soon as possible.

3. Liability average if the Insured has more than one insurance

If at the time of loss or damage, the Insured has insurance with other insurer which cover the same loss or damage, whether effected by the Insured or other person acting on behalf of the Insured. In no case shall the Company be liable to compensate or contribute more than its ratable proportion of such loss or damage to the total sum insured under all policies and the Company shall not compensate more than sum insured under this Insurance Policy.

4. Subrogation

In case the Company already paid compensation under this Insurance Policy, the Company shall subrogate the Insured's rights having over any person or organization only for the amount compensated by the Company. The Insured must cooperate with the Company in handling documents, as well as taking necessary procedures to protect such rights, and not take any action which could damage the right of the Company.

Specific Exclusions (Only apply to Insuring Agreement : Loss or Damage of Personal Money and Travel Cheque)

This Insurance Policy does not cover loss or damage arise from:

- 1. Deductible is borne by the Insured that specified on the policy schedule (if any)**
- 2. Loss or damage of the personal money and travel cheque left unattended in the public place or forgetfulness in any conveyance or as a result of the Insured's failure to take due care and precaution for the safeguard and security of such property.**
- 3. Loss or damage of the personal money and travel cheque caused by wear and tear, gradual deterioration, moths, vermin, inherent vice, self-depreciation or damage occurred due to any action to repair, clean or modify and amend such property**
- 4. Loss or damage caused by the confiscation in the storage room of the Customs Department or airport officer or government authority of that country.**

Insuring Agreement

Loss or Damage of Travel Documents

Definition

- Robbery** means Theft by doing act of violence or threatening to do any act of violence immediately in order to:-
- 1) Facilitate the theft or taking away of such property, or
 - 2) Obtain the delivery of such property, or
 - 3) Take hold of such property, or
 - 4) Conceal the doing of such offence, or
 - 5) Escape from arrest
- Robbery shall include the event that falsely or illegally takes hold of the property owned by or co-owned by another person.
- Gang Robbery** means Robbery committed by 3 or more persons.

Coverage

This Insurance Policy covers any loss or damage of travel documents namely passport, green card, visa, driver license, travel ticket or travel card while the Insured is traveling and result in the Insured cannot use such documents subject to such loss and damage arise from:

1. Burglary with forcible entry where the Insured's accommodation is locked
2. Robbery, gang-robbery or way of violent means .The Company shall compensate the Insured for any loss or damage of travel documents namely passport, green card, visa, driver license, travel ticket or travel card for actual costs incurred and the Insured cannot reimburse from anyone or other insurance company for:-
 - 2.1 Expense for reproduction of a new document
 - 2.2 Additional travel and accommodation expense which is necessary due to the postpone of return trip, in case the Insured does not receive the certificate from the consulate within the due date of return that specified on the policy schedule

The Company shall reimburse the Insured on the actual expenses incurred but not exceed sum insured stated on the policy schedule.

Additional Terms and Conditions (Only Apply to insuring agreement: Loss or Damage of Travel Documents)

Claim and evidence of loss or damage submission

The Insured is required to send the following documents to the Company within 30 days after the occurrence of loss or damage of travel documents at the expense of the Insured.

1. The Company's claim form
2. Copy of the Insured's passport and/or traveling document of the Insured
3. Copy of police officer's daily report at the scene of action
4. Original receipt showing the itemized expenses
5. Letter certifying loss or damage from the manager or owner of the place the Insured resides at the date of loss or damage including the payment slip of the manager or the owner of residence(if any)
6. Any required document as deemed necessary

Non submission of documents within the specified time shall not jeopardize the right to claim if it can be proved that there is reasonable explanation why a claim could not be made in a timely manner and that the claim was filed as soon as possible.

Specific Exclusions (Only apply to Insuring Agreement: Loss or Damage of Travel Documents)

This Insurance Policy does not cover any loss or damage arise from the causes as follows:

1. Loss or damage of travel documents while being in Thailand or expired date that specified on the policy schedule
2. Loss or damage of the travel documents left unattended in the public place or forgetfulness in any conveyance or as a result of the Insured's failure to take due care and precaution for the safeguard and security of such property
3. Loss or damage of the travel documents caused by wear and tear, gradual deterioration, moths, vermin, inherent vice, self-depreciation or damage occurred due to any action to repair, clean or modify and amend such property
4. Loss or damage caused by the confiscation in the storage room of the customs department or airport officer or government authority of that country.

Insuring Agreement Compassionate Visitation

Coverage

This Insurance Policy covers in the event the Insured is required to attend the medical treatment in overseas hospital as an inpatient for more than seven (7) consecutive days from injury or sickness cover under this Insurance Policy during trip duration. It is agreed that the compensation under this insuring agreement shall be the amount stated on policy schedule.

The Company will provide and indemnify an economy class two-way airfare for family member or immediate family member of the Insured for one (1) person for a compassionate visitation. In addition, the Company will consider whether the compassionate visitation is necessary and affect the medical treatment or not. Therefore, the compassionate visitation must be consented by the Company prior to such visit.

Additional Terms and Conditions (Only Apply to insuring agreement: Compassionate Visitation)

1. Additional conditions

1. Such symptom of the Insured is not allowed for an evacuation as the written medical advice from the attending physician that describes prohibit the evacuation of the Insured.
2. There is no family member or friend of the Insured which is over eighteen (18) years old companion with the Insured

2. Claim and evidence of loss or damage submission

The Insured is required to send the following documents to the Company within 30 days at the expense of the Insured.

1. The Company's claim form
2. Medical certificate or report
3. Medical Certificate from the attending physician that prohibit the evacuation of the Insured
4. Proof of the Insured being ill alone overseas
5. Copy of the Insured's passport and/or traveling document of the Insured

6. Any required document as deemed necessary.

Non submission of documents within the specified time shall not jeopardize the right to claim if it can be proved that there is reasonable explanation why a claim could not be made in a timely manner and that the claim was filed as soon as possible

Insuring Agreement Return of Children

Coverage

This Insurance Policy covers in the event the Insured is required to attend the medical treatment in overseas hospital as an inpatient from injury or sickness cover under this Insurance Policy during trip duration. The Company will provide and indemnify an economy class airfare to domicile country for one (1) accompanied child of Insured who is left alone abroad due to the Insured is hospitalized in overseas hospital or the Insured is being evacuated to domicile country due to loss of life or for continuous medical treatment. It is agreed that the compensation under this insuring agreement shall be the amount stated on policy schedule.

Additional Terms and Conditions (Only Apply to insuring agreement: Compassionate Visitation)

The Company will consider whether the return of children is necessary or not. Therefore, the return of children must be consented by the Company prior to returning.

Claim and evidence of loss or damage submission

The Insured is required to send the following documents to the Company within 30 days at the expense of the Insured.

1. The Company's claim form
2. Copy of the Insured's passport and/or traveling document of the Insured
3. Medical certificate or report
4. Any required document as deemed necessary

Non submission of documents within the specified time shall not jeopardize the right to claim if it can be proved that there is reasonable explanation why a claim could not be made in a timely manner and that the claim was filed as soon as possible.

Insuring Agreement

Automatic Extension of Insurance Policy

Definitions

- Unforeseen/unexpected circumstance** means
1. Adverse weather or *natural* disaster
 2. Mechanical breakdown or derangement of the aircraft
 3. The Insured is denied boarding of aircraft due to the over-booking
 4. The Insured is injured or sickness to the extent of unable to travel as per the physician's advice.

Coverage

This Insurance Policy shall automatically extended if the return traveling of the Insured is postponed resulting from an unforeseen/unexpected circumstance which is beyond the Insured's control. The Company will extend the period of insurance to cover the postponed period, for which the Insured has not to pay additional premium. The extension of travel period in case of injury or sickness of the Insured shall be under consideration of the Company and/or attending physician.

However, the automatic extension of the period of insurance from unforeseen/unexpected circumstance shall not include the travel delay, flight misconnection and hospital income benefit due to accident or sickness (if any) and this extension shall not be more than fifteen (15) days from the date of accident or sickness or other (if any) as specified on the policy schedule.

**Insuring Agreement
Hospital Income Benefit
while admitted as Inpatient due to Injury or Sickness**

Coverage

This Insurance Policy covers in case the Insured receive treatment as an inpatient in the hospital or medical center based on medical necessity and medical standard due to injury or sickness occur during period of insurance and such injury and sickness arise from any cause covered by this Insurance Policy.

The Company shall pay the hospital cash benefit every twenty-four (24) hours of admission as an inpatient in the hospital or medical center for.....Baht/day (Maximum 5,000 Baht) or the amount state on the policy schedule commencing from the first day of admission but not exceed.....days/injury or sickness/trip/time(if any) (Maximum 30 days) or otherwise specified on policy schedule. The Company shall compensate after the Insured discharge from the Hospital.

In the event that the injury or sickness is sudden, acute and unforeseeable which require the Insured to receive surgery or procedure based on medical necessity as an inpatient but the Insured is not hospitalized in hospital or medical center due to the medical advancement, the Company shall compensate 1 day benefit for surgery and procedure as follow

1. ESWL : Extracorporeal Shock Wave Liththotripsy
2. Coronary Angiogram / Cardiac Catheterization
3. Extra Capsular Cataract Extraction with Intra Ocular Lens
4. Laparoscopic
5. Endoscope
6. Sinus Operations
7. Excision Breast Mass
8. Bone Biopsy

9. Amputation of fingers or toe
10. Liver Puncture/Liver Aspiration
11. Bone Marrow Aspiration
12. Lumbar Puncture
13. Thoracentesis/Pleuracentesis/Thoracic Aspiration/Thoracic Paracentesis
14. Abdominal Paracentesis/Abdominal Tapping
15. Curettage, Dilatation & Curettage, Fractional Curettage
16. Colposcope, Loop diathermy
17. Marsupialization of Bartholin's Cyst
18. Gamma knife

The admission as an in-patient in the hospital or medical center must occur within thirty (30) days after the accident and the physician find that it is necessary to admit as inpatient in hospital and the treatment cannot be postponed until the Insured return to Thailand.

The Insured must notify the Company or the emergency assistance provider every admission as an inpatient in a hospital or a medical center.

Additional Terms and Conditions (Only Apply to insuring agreement: Hospital Income Benefit while admitted as Inpatient due to Injury or Sickness)

Claim and evidence of loss or damage submission

The Insured is required to send the following evidences to the Company within 30 days at the expense of the Insured.

1. The Company's claim form
2. Medical certificate or report.
3. Medical receipts/medical bills from hospital
4. Copy of the Insured's passport and/or travel document of the Insured
5. Any required document as deemed necessary

Non submission of documents within the specified time shall not jeopardize the right to claim if it can be proved that there is reasonable explanation why a claim could not be made in a timely manner and that the claim was filed as soon as possible.

Specific Exclusions (Only apply to Insuring Agreement: Hospital Income Benefit while admitted as inpatient due to Injury and Sickness)

This Insurance Policy does not cover medical expenses or any loss or damage from an injury or illness (including complication), symptom arising out of

- 1. Pre-existing Condition**
- 2. Examination or treatment for congenital abnormalities or development disorder or genetic disease**
- 3. Any cosmetic surgery or beautification treatment including treatment of acne, freckles, dandruff, weight reduction and weight gain, hair loss. Reconstructive surgery is also excluded unless injury is sustained as a result of an accident**
- 4. Pregnancy, childbirth, abortion or miscarriage, or any causes related to pregnancy, sterilization or investigation of sterilization**
- 5. AIDS or venereal disease or sexually transmitted disease(STD).**
- 6. Treatment or protection, medicine usage to prevent aging, hormone replacement therapy for menopause, erectile dysfunction in female or male, sexual identity disorders treatment and transsexual operation.**
- 7. Health check-ups, convalescent care including rest cures and rehabilitation. Any treatment, drugs or medical supplies which are not related to the diagnosis; and diagnosis which is not related to the injury or illness or not according to the medical necessity.**
- 8. Eye examination and eyesight corrective surgery including lasik and other expenses associated with eyesight correction**
- 9. Any medical treatment or surgery for injury or sickness incurred for the purpose of reaping benefit from this Insurance Policy.**

- 10. Treatment or surgery relating to dental or gum e.g. denture, crowns and bridges, root treatment, filling, orthodontic, scaling, extraction, except the necessary dental treatment after an accident to relieve the pain or injury. However, this necessary dental treatment shall not include the expense for dental reconstructive treatment, orthodontics, crowns, scaling or polishing, filling, or dentures.**
- 11. Treatment for addiction of alcohol, cigarette psychoactive substance.**
- 12. Medical treatment for sign and symptom related to the mental disorders, mental illness, behavioral disorder or personality disorder including attention deficit hyperactivity disorder (ADHD), autism, stress, eating disorder or anxiety and drug addiction or genetic disease.**
- 13. Medical Treatment or examination which is in trial stage or experimental, examination or treatment for sleep apnea, sleep disorders or snoring.**
- 14. Vaccination or Immunization except rabies vaccine after animal attack and tetanus vaccine after injury from accident which covered under this Insurance Policy.**
- 15. Any treatment or examination which are not considered a modern medicine, including alternative medicine e.g. acupuncture, natural therapy, massage or chiropractic, etc.**
- 16. Medical treatment given by the physician who is the Insured or parents, spouse, or child/children of the Insured.**
- 17. Orthosis and prosthesis such as crutches, glasses, hearing aid device, speech device and all kind of defibrillator.**
- 18. Injury arising while the Insured is taking part in a brawl or taking part in inciting a brawl**
- 19. Any injury occurred while the Insured is committing a crime or being arrested or escaping the arrest**
- 20. Any injury occurred while Insured is hunting, racing of all kinds of car or boat, horse racing, ski racing including jet-ski, skate racing, boxing, parachuting (except for the purpose of life saving), boarding or traveling in a hot-air balloon, gliding, bungee jumping, climbing or hiking that requires tools or diving with oxygen tank and breathing equipment under water.**
- 21. Any injury occurred while the Insured is boarding or traveling in an aircraft which has no license for carrying passengers or does not operate as a commercial aircraft.**
- 22. Injury arises while the Insured pilots or works as a crew in any aircraft**
- 23. Injury arises while the Insured is riding or being a passenger on a motorcycle**

- 24. Any operation or treatment that, in the physician's opinion, is not necessary or can be postponed until the Insured return to Thailand.**
- 25. Parasite infection except pyogenic infections or tetanus, or rabies from a wound suffered as a result of an accident**



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