



Affinity Travel Insurance

Policy Document

General information about this insurance

Insurance providers

This travel insurance is underwritten by AIG Europe S.A. AIG Europe S.A. is authorised by the Luxembourg Ministère des Finances and supervised by the Commissariat aux Assurances and is regulated by the Central Bank of Ireland for conduct of business rules.

If a solvency and financial condition report of AIG Europe S.A. is available, it can be found at <http://www.aig.lu/>.

This insurance is arranged by the Broker shown in the Schedule who is regulated by the Central Bank of Ireland

Insurance Compensation Fund

The **Policyholder** may be entitled to compensation from the scheme in the unlikely event that AIG Europe S.A. cannot meet its obligations. The maximum amount that could be available in respect of any sum due to a **Policyholder** is 65% of the sum due or EUR 825,000, whichever is the lesser.

Further information on the Insurance Compensation Fund is available on the Central Bank of Ireland's website through the following link: <https://www.centralbank.ie/regulation/industry-market-sectors/insurance-reinsurance/solvency-ii/insurance-compensation-fund>

AIG Europe S.A, Ireland branch does not provide advice or any personal recommendation about this product.

This travel insurance

This policy document, along with the **Policy Schedule**, the **Completed Application Form** and any memoranda or endorsements form the basis of the contract of insurance. Together, these documents explain what is covered. The policy document contains conditions and exclusions which the **Policyholder** and **Insured Person** must be aware of. They must keep to all the terms and conditions of the insurance.

Please carefully check the insurance cover information confirmed in this document, to ensure that the cover benefits detailed sufficiently meet **Your** insurance cover protection needs. If they do not, please contact your insurance broker who arranged this insurance, immediately.

Alteration of Risk

You must contact the insurance broker who arranged this insurance immediately or as soon as reasonably possible, if any of the answers or information provided is inaccurate or has changed beyond what was reasonably contemplated when this contract of insurance was concluded. Failure to do so may be regarded as a misrepresentation (please refer to impacts of misrepresentation section for full details).

Impact of Misrepresentation

The impact of any Misrepresentation by the **Policyholder** to any of the answers provided on the **Completed Application Form** is as follows:

(a) Innocent Misrepresentation:

Where the **Policyholder** has answered all questions in the **Completed Application Form** honestly and with reasonable care but where the **Policyholder** made an innocent misrepresentation (that is, one that is neither



negligent nor fraudulent) **We** will pay any covered claim event subject to the terms and conditions of this insurance.

(b) Negligent Misrepresentation:

If the **Policyholder** makes a negligent misrepresentation or fail to take reasonable care in completing the **Completed Application Form** the cover under this insurance may not fully operate and in the event of a claim **We** will exercise one of the following remedies:

1. If knowing the full details **We** would not have entered into this contract of insurance, **We** may avoid the contract, refuse all claims and return any premiums paid by the **Policyholder**.
2. If **We** would have entered into the insurance contract, but on different terms (excluding terms relating to the premium), this contract of insurance may be treated as if it had been entered into on those terms.
3. If **We** would have entered into this contract of insurance but have charged a higher premium, **We** may reduce proportionately the amount to be paid on the claim.
4. Where there is no outstanding claim under this contract of insurance, **We** may either:

(i) give notice to the **Policyholder** that in the event of a claim **We** will exercise the remedies in paragraphs 1 to 3, or

(ii) terminate the contract of insurance by giving reasonable notice to the **Policyholder**.

(c) Fraudulent Misrepresentation:

If the **Policyholder** make a fraudulent misrepresentation or where any conduct by **Policyholder** or **Insured Person** involves fraud of any kind **We** shall be entitled to avoid this contract of insurance and refuse any claims.

Law

This insurance will be governed by laws of the Republic of Ireland unless **We** agree otherwise before the insurance starts and any dispute arising hereunder will be subject to the exclusive jurisdiction of the Courts of the Republic of Ireland. All communication in respect of this insurance will be in English.

How we use Personal Information

AIG Europe S.A. is committed to protecting the privacy of customers, claimants and other business contacts.

For the purposes of this section (How **we** use Personal Information) 'you' and 'your' is amended as follows:

You or Your is the Policyholder or the Insured Person

"**Personal Information**" identifies and relates to **you** or other individuals (e.g. **your partner** or other members of your family). If **you** provide Personal Information about another individual, **you** must (unless **we** agree otherwise) inform the individual about the content of this notice and **our** Privacy Policy and obtain their permission (where possible) for sharing of their Personal Information with **us**.

The types of Personal Information we may collect and why – Depending on **our** relationship with **you**, Personal Information collected may include: contact information, financial information and account details, credit reference and scoring information, sensitive information about health or medical conditions (collected with **your** consent where required by applicable law) as well as other Personal Information provided by **you** or that **we** obtain in connection with **our** relationship with **you**. Personal Information may be used for the following purposes:

- Insurance administration, e.g. communications, claims processing and payment
- Make assessments and decisions about the provision and terms of insurance and settlement of claims
- Assistance and advice on medical and travel matters
- Management of **our** business operations and IT infrastructure
- Prevention, detection and investigation of crime, e.g. fraud and money laundering
- Establishment and defense of legal rights
- Legal and regulatory compliance (including compliance with laws and regulations outside **your** country of residence)
- Monitoring and recording of telephone calls for quality, training and security purposes
- Market research and analysis

To opt-out of any marketing communications that **we** may send **you**, contact **us** by e-mail at: unsub.ie@aig.com or by writing to: Data Protection Officer, AIG Europe S.A., 30 North Wall Quay, International Financial Service Centre, Dublin 1. If **you** opt-out **we** may still send **you** other important service and administration communications relating to the services.

Sharing of Personal Information - For the above purposes Personal Information may be shared with **our** group companies and third parties (such as brokers and other insurance distribution parties, insurers and reinsurers, credit reference agencies, healthcare professionals and other service providers). Personal Information will be shared with other third parties (including government authorities) if required by laws or regulations. Personal Information (including details of injuries) may be recorded on claims registers shared with other insurers. We are required to register all third party claims for compensation relating to bodily injury to workers' compensation boards. We may search these registers to prevent, detect and investigate fraud or to validate your claims history or that of any other person or property likely to be involved in the policy or claim. Personal Information may be shared with prospective purchasers and purchasers, and transferred upon a sale of our company or transfer of business assets.

International transfer - Due to the global nature of **our** business, Personal Information may be transferred to parties located in other countries (including the United States, China, Mexico Malaysia, Philippines, Bermuda and other countries which may have a data protection regime which is different to that in your country of residence). When making these transfers, **we** will take steps to ensure that **your** Personal Information is adequately protected and transferred in accordance with the requirements of data protection law. Further information about international transfers is set out in **our** Privacy Policy (see below).

Security of Personal Information – Appropriate technical and physical security measures are used to keep **your** Personal Information safe and secure. When **we** provide Personal Information to a third party (including our service providers) or engage a third party to collect Personal Information on **our** behalf, the third party will be selected carefully and required to use appropriate security measures.

Your rights – **You** have a number of rights under data protection law in connection with **our** use of Personal Information. These rights may only apply in certain circumstances and are subject to certain exemptions. These rights may include a right to access Personal Information, a right to correct inaccurate data, a right to erase data or suspend **our** use of data. These rights may also include a right to transfer your data to another organisation, a right to object to **our** use of your Personal Information, a right to request that certain automated decisions **we** make have human involvement, a right to withdraw consent and a right to complain to the data



protection regulator. Further information about your rights and how **you** may exercise them is set out in full in **our** Privacy Policy (see below).

Privacy Policy - More details about **your** rights and how **we** collect, use and disclose **your** Personal Information can be found in **our** full Privacy Policy at: <https://www.aig.ie/privacy-policy> or you may request a copy by writing to: Data Protection Officer, AIG Europe S.A., 30 North Wall Quay, International Financial Service Centre, Dublin 1 or by email at: dataprotectionofficer.ie@aig.com.

Price

The price payable for this insurance is the premium (including applicable government levies and premium taxes). This premium, the rate at which any applicable government levies and/or premium taxes are applied are separately specified in your **policy schedule**.

We do not provide advice or any personal recommendation about this product

Commission & Fees

Members of **our** sales team are paid a salary; **we** do not pay them bonuses or commissions directly linked to sales.

Cancellation and Cooling Off period

Cooling Off Period

Cancelling the policy during the cooling off period – if the cover does not meet **your** requirements **you** may cancel this policy within 14 consecutive days of the start date of the policy as shown in the **policy Schedule** or within 14 consecutive days of receiving your policy, whichever is the latter. **We** will give a full refund of any premiums paid so long as **you** have not claimed. Premium will be returned to **you** within 5 working days from the date we receive notice of cancellation from **you**.

Cancellation after the cooling off period

We have the right to cancel this insurance by giving at least 30 days notice in writing to the **Policyholder** at **your** last known address or by email.

The Policyholder can cancel this policy by giving 30 days written notice to **us** at the company's branch office address at 30 North Wall Quay, Financial Services Centre, Dublin 1. If this happens, provided no claim has been paid or is payable and no incident has occurred which could give rise to a claim under this policy, the premium for the period up to the date when the cancellation takes effect will be calculated and any unearned portion of the premium paid will be returned,

The **Insured Person** has no rights of cancellation under this policy.

We can cancel any cover provided by this policy for **war** by sending seven days notice to the **Policyholder** at the **Policyholder's** last known address

If Insured Person has any questions

If the **Insured Person** has any questions about the cover provided under this Insurance or they would like more information, please contact the **Policyholder** or the insurance Broker who arranged this insurance

Health conditions

This insurance contains conditions relating to the **Insured Person's** health, the health of people travelling with them and the health of others who might not be travelling with them, but on whose health the **Trip** depends (this would include a **Relative**). In particular, **We** do not cover claims arising from medical problems which the **Insured Person** or they had before the cover started. Please see General Exclusion number 1 for further details.

If there is a change in the state of health of the **Insured Person**, anyone travelling with them or a **Relative** occurring after the **Policyholder** has bought this insurance but before the **Insured Person** travels, and upon whom the **Insured Person's Trip** depends, they must contact the **Policyholder**, insurance broker and **Us** immediately. **We** have the right to alter the terms of cover in line with the change in risk.

Health agreements

If the **Insured Person** is travelling to a country in the European Union, they should take a European Health Insurance Card (EHIC) with them. Application forms to obtain an EHIC are available from local Health Office or you can download an application form from the following website: www.ehic.ie. This entitles European citizens to benefit from the health agreements which exist between countries in the European Union/EEA. If the **Insured Person** is travelling to Australia or New Zealand and they need medical treatment, they should enrol with Medicare or the equivalent scheme of these countries. Further information is available from the following website: www.humanservices.gov.au

If the **Insured Person** presents their EHIC to the treating doctor or hospital if they need medical treatment within the European Union or they enrol with Medicare when travelling to Australia or New Zealand, this will save them paying the excess under section B (Medical and other expenses outside of the Republic of Ireland) if their medical costs are reduced as a result of using their EHIC or Medicare being involved.

Residency

The **Insured Person** must have lived in the Republic of Ireland for at least six of the last 12 months before the **Policyholder** bought this insurance.

Travel delays - EC Regulations

This policy is not designed to cover costs which are met under the EC Regulation No. 261/2004. Under this Regulation if the **Insured Person** has a confirmed reservation on a flight, and that flight is delayed by between 2 and 4 hours (length of time depends on the length of their flight) the airline must offer the **Insured Person** meals, refreshments and hotel accommodation. If the delay is more than 5 hours, the airline must offer to refund the **Insured person's** ticket. The Regulations should apply to all flights, whether budget, chartered or scheduled, originating in the EU, or flying into the EU using an EU carrier.

If the **Insured Person's** flight is delayed or cancelled due to a **natural catastrophe**, they must in the first instance approach their airline and clarify with them what costs they will pay under the Regulation.

If the **Insured Person** would like to know more about their rights under this Regulation, additional useful information can be found on the Irish Aviation Authority website (www.iaa.ie).

Sports and activities

The **Insured Person** may not be covered when they take part in certain sports or activities. For certain activities, cover under section G (Personal liability) will not apply. If the **Insured Person** intends to take part in a sport or activity during their **Trip**, please note that cover is available for the activities declared to **Us**, or in the boxes below provided:

- The **Insured Person** follows the safety guidelines for the activity concerned and where applicable use the appropriate and recommended safety equipment;
- The activity is not on a professional basis.

If the **Insured Person** has any questions or if they wish to take part in an activity not shown in the boxes below, they must contact the insurance broker who arranged this insurance before taking part to make sure that cover is provided.

Amateur athletics, angling, archery, badminton, banana boating, basketball, boardsailing, bowling, bridge walking (supervised by a fully trained guide), bungee jumps (three jumps), cave tubing or river tubing, cricket, curling, cycling, fell walking, gymnastics, handball, husky sledge driving, ice skating, jogging (not including marathons), mountain biking (not including downhill racing and extreme terrain), netball, orienteering, parasailing, parascending (over water), rambling, ringos, roller blading (inline skating and skateboarding), running (not including marathons), safari trekking in a vehicle or on foot (only as part of an officially organised tour and not including the personal use of firearms), sand boarding, scuba diving (qualified, maximum depth 30 metres), sleigh rides (as part of an officially arranged excursion), snorkelling, squash, surfing, swimming, swimming with dolphins (as part of an officially arranged excursion), table tennis, tennis, ten pin bowling, trekking (under 2,000 metres altitude), triathlons, volleyball, wake boarding, water polo, waterskiing and white or black water rafting (grades 1 to 4).

Cover is provided for the activities listed in the box below, however, no cover is available under section G (Personal liability).

Baseball, camel or elephant riding (supervised by a fully trained guide), canoeing, canopy walking or tree top walking, conservation or charity work (educational and environmental - working with hand tools only), cycle touring, dragon boat racing, dune and wadi bashing, football, go-karting, golf, hiking (over 2,000 metres but under 6,000 metres altitude), hockey, horse riding (not polo, hunting, jumping), hot-air ballooning (officially organised pleasure rides only), jet boating, jet skiing, kayaking, kite surfing (over water), motorcycling over 50cc (not racing), mud buggying, paintballing (wearing eye protection), passenger (in private or small aircraft or helicopter), rowing, trekking (over 2,000 metres but under 6,000 metres altitude), windsurfing and yachting (no racing or crewing) inside territorial waters and zip lining.

Geographical area

- Europe: The continent of Europe west of the Ural Mountains, including its neighbouring islands and non-European countries bordering the Mediterranean (excluding Algeria, Lebanon, Libya, Israel and Jordan).
- Worldwide including USA, Canada and the Caribbean

Please note; No cover is provided under this policy for any trips in, to or through the Cuba, Iran, Syria, Crimea region of Ukraine and North Korea (and see General Exclusion 24 regarding sanctions)

Period of Cover

Cover under section A1 (Cancelling your trip) starts at the time that the **Insured Person** books the **Trip** or the start date shown on the **Policy Schedule**, whichever is later.

Cover under all other sections starts when the **Insured Person** leaves their **Home** address in the Republic of Ireland (but not more than 24 hours before the booked departure time) or from the start date shown on the **Policy Schedule**, whichever is the later.



Cover ends when the **Insured Person** returns to their **Home** address in the Republic of Ireland (but not more than 24 hours after their return to the Republic of Ireland) or at the end of the period shown on the **Policy Schedule**, whichever is earlier.

Cover cannot start after the **Insured Person** has left the Republic of Ireland.

Trip extensions

If, once the **Insured Person** has left the Republic of Ireland and before the end of the **Trip** during the **Period of Insurance**, they decide they want to extend their insurance, they must contact the **Policyholder** who must contact the insurance broker who arranged this insurance. Extensions can usually only be considered if there has been no change in the **Insured Person's** health (or that of a **Relative**), they are not waiting for a claim to be settled and they do not know of a reason for a claim to arise. However, should there have been a change in health or a claim arose under the original insurance then **We** may still be able to consider the extension provided full details are passed to **Us** for consideration.

If, due to unexpected circumstances beyond the **Insured Person's** control which fall within the conditions of this cover, the **Trip** cannot be completed within the **Period of Insurance** outlined in the **Policy Schedule**, cover will be extended for them at no extra cost for up to 30 days. This also applies to one person travelling with the **Insured Person** who is authorised to stay with them by the Medical Emergency Assistance Company if the extension is due to medical reasons.

All requests for more than 30 days must be authorised by the Medical Emergency Assistance Company.

Important claim information

Medical and other emergencies

The Medical Emergency Assistance Company, AIG Assistance Services, will provide immediate help if the **Insured Person** is ill, injured or dies outside the Republic of Ireland. They provide a 24-hour emergency service 365 days a year. The contact details are as follows:

Phone: +44 (0) 1273 723 146

Email: uk.assistance@aig.com

Please have the following information available when contacting AIG Assistance Services so that the case can be dealt with swiftly and efficiently:

- The **Insured Person's** name and address;
- The **Insured Person's** contact phone number abroad;
- The **Policyholder's** policy number shown on the **Policy Schedule**; and
- The name, address and contact phone number of the **Insured Person's** GP.

Please note: This is not a private medical insurance. If the **Insured Person** goes into hospital abroad and is likely to be kept as an inpatient for more than 24 hours or if outpatient treatment is likely to cost more than €500, someone must contact AIG Assistance Services for immediately. If they do not, **We** may provide no cover or **We** may reduce the amount **We** pay for medical expenses.

If the **Insured Person** has to return to the Republic of Ireland under section A2 (Cutting your trip short) or section B (Medical and other expenses outside of the Republic of Ireland) AIG Assistance Services must authorise this. If they do not, **We** may provide no cover or **We** may reduce the amount **We** pay for their return to the Republic of Ireland.

If you need to make a claim

The **Insured Person** or **Policyholder** must register a claim by contacting their insurance broker who arrange this insurance in the first instance or

AIG Claims Services,
AIG Europe S.A.
30 North Wall Quay,
International Financial Services Centre,
Dublin 1

Phone: (+353 1) 208 1400

Please note: All claims must be notified as soon as it is reasonably practical after the event which causes the claim. If **Our** position is prejudiced by the late notification of a claim then this may affect **Our** acceptance of a claim.



AIG Claims Services are open Monday to Friday between 9am and 5pm. A claim form will be sent as soon as the **Insured Person** or **Policyholder** tells them about the claim. Claim forms can also be downloaded from <https://www.aig.ie/existing-customers/claims>

Complaints Handling Process

AIG Europe S.A. wants to give **You** the best possible service. If **You** feel you have cause for complaint you should contact:

The Customer Complaints Officer
AIG Europe S.A.,
30 North Wall Quay,
IFSC,
Dublin 1,
D01 R8H7.

Phone: +353 1 208 1400

E-mail: customercomplaints.ie@aig.com

Website: www.aig.ie/complaints

We will acknowledge the complaint within 5 business days of receiving it, keep the complainant informed of progress and provide an answer within one month (unless specific circumstances prevents us from doing so, in which case the complainant will be informed).

At any stage you may contact any of the following:

Insurance Ireland
Insurance Centre,
5 Harbourmaster Place,
IFSC,
Dublin 1,
D01 E7E8.

Phone: +353 1 676 1820

E-mail: feedback@insuranceireland.eu

Website: <http://www.insuranceireland.eu>

Financial Services and Pensions Ombudsman
3rd Floor,
Lincoln House,
Lincoln Place,
Dublin 2,
D02 VH29.

Phone: +353 1 567 7000

E-mail: info@fspo.ie

Website: www.fspo.ie

As AIG Europe S.A. is a Luxembourg based insurance company, complainants who are natural persons acting outside of their professional activity may also, in addition to the complaints procedure set out above, if they are not satisfied with AIG's Irish Branch response or in the absence of response after 90 days:

- raise the complaint with our head office by writing to AIG Europe SA "Service Reclamations Niveau Direction" 35D Avenue JF Kennedy L- 1855 Luxembourg - Grand Duché de Luxembourg or by email at aigeurope.luxcomplaints@aig.com ;
- access one of the Luxembourg mediator bodies the contact details of which are available on AIG Europe S.A.'s website: <http://www.aig.lu/>: or
- lodge a request for an "out of court resolution" process with the Luxembourg Commissariat Aux Assurances (CAA) by writing to CAA, 7 boulevard Joseph II, L-1840 Luxembourg - Grand Duché de Luxembourg, or by email at reclamation@caa.lu or online through the CAA website: <http://www.caa.lu>.
- All requests to the CAA or to one of the Luxembourg mediator bodies must be filed in Luxembourgish, German, French or English.

Following this complaint procedure or making use of the one of the above options does not affect the complainant's right to take legal action.

General exclusions

General exclusions apply to all sections of this insurance. In addition to these general exclusions, please also refer to 'What is not covered ' under each policy section as this sets out further exclusions which apply to certain sections.

We will not cover the following.

1. Any claim where at the time of taking out this insurance, the following apply.
 - a. The claim relates to a medical condition, or an illness or death related to a medical condition which the **Insured Person** or any person who their **Trip** depends on (this would include a **Relative**) knew about before the **Trip**.

They must make sure they tell the **Policyholder** about any change in the state of their health or the health of anyone travelling with them, or a **Relative**, occurring after this insurance was bought but before the **Insured Person** travels.

The **Insured Person** is travelling against the advice of a medical practitioner.
 - b. The **Insured Person** is travelling with the purpose of receiving medical treatment abroad.
 - c. The **Insured Person** or any person who their **Trip** depends on are receiving or waiting for hospital investigation or treatment for any undiagnosed condition or set of symptoms.
 - d. The **Insured Person** or any person who their **Trip** depends on, have been given a terminal prognosis.
2. Any claim relating to an incident which the **Policyholder** or **Insured Person** were aware of at the time of booking the **Trip** and which could reasonably be expected to lead to a claim.
3. Any claim if the **Insured Person**, or any person whose condition may give rise to a claim, is suffering from or has suffered from any diagnosed psychological or psychiatric disorder, anxiety or depression.
4. Any claim arising out of **War**, civil war, invasion, revolution or any similar event.
5. Any claim arising from civil riots, blockades, strikes or industrial action of any type (except for strikes or industrial action which were not public knowledge when the **Insured Person** booked their **Trip**).
6. Loss or damage to any property, or any loss, expense or liability arising from ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from burning nuclear fuel or the radioactive, toxic, explosive or other dangerous properties of any explosive nuclear equipment or any part of it.
7. Any claim if the **Insured Person** already has a more specific insurance covering this (for example, if an item they are claiming for under section E1 (Personal belongings and baggage) is a specified item on their household contents insurance policy).
8. Any claim arising from using a two-wheeled motor vehicle over 50cc as a driver or passenger if the **Insured Person** is not wearing a crash helmet, or the driver does not hold an appropriate driving licence.
9. Any consequential losses (losses which are not listed under the headings 'What is covered ' in sections A to F, for example, loss of earnings if the **Insured Person** cannot work after they have been injured or the cost of replacement locks if their keys are stolen).

10. Any claim arising from the tour operator, airline or any other company, firm or person becoming insolvent, or being unable or unwilling to fulfil any part of their obligation to the **Insured Person**.
11. Any claim resulting from the **insured person** travelling to a country where the Department of Foreign Affairs (Republic of Ireland) have allocated a security status of 'Avoid non-essential travel' or 'Do not travel'.
12. Any claim arising from the **Insured Person** being involved in any deliberate, malicious, reckless, illegal or criminal act.
13. Motor racing, rallying or vehicle racing of any kind.
14. Any claim arising from the **Insured Person** being in, entering, or leaving any aircraft other than as a fare-paying passenger in a fully-licensed passenger-carrying aircraft.
15. Any claim involving the **Insured Person** taking part in **Manual Labour** or in any sport or activity unless the activity has been authorised by **Us**. Please see the Sports and activities section.
16. Any claim relating to winter sports
17. Any claim arising from
 - The **Insured Person's** suicide or attempted suicide; or
 - The **Insured Person** injuring themselves deliberately or putting themselves in danger (unless they are trying to save a human life).
18. Any claim arising directly or indirectly from using alcohol or drugs (unless the drugs have been prescribed by a doctor) or the **Insured Person** is affected by any sexually transmitted disease or condition.
19. Any costs which the **Insured Person** would have been liable to pay had the reason for the claim not occurred (for example, the cost of food which they would have paid for in any case).
20. Any claim arising as a result of the **Insured Person** failing to get the inoculations and vaccinations that they need.
21. Any claim arising from the **Insured Person** acting in a way which goes against the advice of a medical practitioner.
22. Any claim arising under this insurance for any **Trip** in, to or through the following countries;
Cuba, Iran, Sudan, Syria, Crimea region of Ukraine and North Korea (and see General Exclusion 24 regarding sanctions).
23. Any claim arising under this insurance if the **Insured Person** is on any official government or police database of suspected or actual terrorists, members of terrorist organisations, drug traffickers or illegal suppliers of nuclear, chemical or biological weapons.
24. **We** shall not be deemed to provide cover and the **We** shall not 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 **Us**, **Our** parent Company or its ultimate controlling entity to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, or the United States of America.

General definitions

Wherever the following words or phrases appear in bold in this document they will always have the meanings listed below.

Children: Children of the **Insured Person** or the **Insured Person's Partner** who are under 18 years of age and are either in fulltime education or living with them.

Completed Application Form: The application form provided by the **us** to the **Policyholder** at pre-contractual stage of a contract of insurance. The **Policyholder** must answer the questions on the completed application form honestly and with reasonable care, failure to do so may be regarded as a **Misrepresentation** (see Impact of Misrepresentations section).

Flood: A general and temporary covering of water of two or more acres of normally dry land.

Home: The **Insured Person's** usual place of residence within the Republic of Ireland.

Insured Person: Any registered member of the **Policyholder** resident in Republic of Ireland up to age 75years

Manual labour: Work involving physical labour, for example, but not limited to, construction, installation and assembly.

Misrepresentation: Innocent, negligent, or fraudulent answers provided by the **Policyholder** to the questions on the **Completed Application Form**.

Natural Catastrophe: Volcanic eruption, **flood**, tsunami, earthquake, landslide, hurricane, tornado or wildfire.

Partner: A person who the **Insured Person** lives with, who is either their husband or wife, common law husband or common law common law wife, civil partner, fiancé or fiancée, boyfriend or girlfriend.

Pair or set of items: A number of items associated as being similar or complementary or used together.

Period of Insurance: The period shown in the **Policy Schedule** during which cover applies for **Trips** declared to **Us**.

Policyholder: The organisation noted on the **Policy Schedule** and who effected this insurance.

Policy Schedule: The document issued to the **Policyholder** showing details of the cover.

Relative: The **Insured Person's Partner** and their, or their **Partner's** parent, brother, sister, son, daughter, (including adopted or fostered **Children**), grandparent, grandchild, step-parent, stepchild, stepbrother, stepsister or next of kin.

Trip: A trip undertaken by an **Insured person** outside the Republic of Ireland ,organised by the **Policyholder** and advised to **Us**, cover starting from the time that the **Insured Person** leaves their **Home** in the Republic of Ireland or from the start date shown on the **Policy Schedule**, whichever is the later, until arrival back at their **Home** address in the Republic of Ireland at the end of the trip or on the end date shown on the **Policy Schedule** whichever is earlier. No trip may exceed 21 days in duration unless declared to **us**.

Valuables: Photographic, audio, video and electrical equipment (including cds, dvds, video and audio tapes and electronic games), MP3 players, computer equipment, binoculars, antiques, jewellery, watches, furs, silks, precious stones and articles made of or containing gold, silver or precious metals.

War: **War**, whether declared or not, or any warlike activities, including use of military force by any sovereign nation to achieve economic, geographic, nationalistic, political, racial, religious or other goals.



We, us, our: AIG Europe S.A.

You, your: The Policyholder

General conditions

The following conditions apply to all sections of this insurance. The **Policyholder** or **Insured Person** must tell **Us** if they know about anything which may affect **Our** decision to accept the insurance. If they are not sure whether to tell **Us**, tell **Us** anyway.

1. The **Policyholder** and **Insured Person** must take all reasonable steps to avoid or reduce any loss covered under this insurance.
2. The **Policyholder** and **Insured Person** must give AIG Claims Services all the documents they need to deal with any claim. The **Policyholder** or **Insured Person** will be responsible for the costs involved in doing this. For example, in the event of a cancellation claim the **Insured Person** will need to supply proof that they were unable to travel, such as a medical certificate completed by their doctor.
3. The **Policyholder** must reimburse **Us** and/or assist **Us** fully in recovering any money that **We** have paid under the insurance and which is also recoverable from anyone else or from other insurers (including the Department of Social Welfare).
4. If the **Policyholder** or **Insured Person** try to make a fraudulent claim or if any fraudulent means or devices are used when trying to make a claim, this insurance may become void and the premium the **Policyholder** or **Insured Person** will have paid may be forfeited. Any benefits already paid to the **Policyholder** or **Insured Person** must be repaid in full.
5. The **Insured Person** must agree to have a medical examination if **We** ask. If they die, **We** are entitled to have a post-mortem examination.
6. The **Policyholder** or **Insured Person** must pay **Us** back any amounts that **We** have paid to the **Policyholder** or **Insured Person** which are not covered by the insurance.
7. After a claim has been settled, any salvage the **Policyholder** or **Insured Person** has sent into AIG Claims Services will become **Our** property.

Sections of cover

Section A 1 – Cancelling your trip

What is covered

We will pay up to the amount shown in the table of benefits for:

- travel and accommodation expenses which the **Policyholder** or **Insured Person** have paid or have agreed to pay under a contract and which they cannot get back;
- the cost of excursions, tours and activities which the **Policyholder** or the **Insured Person** have paid for and which they cannot get back; and
- the cost of visas which the **Policyholder** or **Insured Person** have paid for and which they cannot get back.

Please note: If payment has been made using frequent flyer points, airmiles, loyalty card points or the like, settlement of the **Insured Person's** claim will be based upon the lowest available published flight fare for the flight originally booked if they are non-transferable.

We will provide this cover if the cancellation of the **Trip** is necessary and unavoidable as a result of the following.

1. The **Insured Person** dying, becoming seriously ill or being injured.
2. The death, serious illness or injury of a **Relative**, a person who the **Insured Person** has booked to travel with or a **Relative** or friend living abroad who the **Insured Person** had planned to stay with. The incident giving rise to the claim must have been unexpected and not something the **Insured Person** was aware of when the **Trip** was booked.
3. The **Insured Person** being made redundant, as long as they are entitled to payment under the current redundancy payments law and that, at the time of booking their **Trip**, **You** or they had no reason to believe that they would be made redundant.
4. The **Insured Person** being called for jury service (and their request to postpone their service has been rejected) or attending court as a witness (but not as an expert witness).
5. If the police or relevant authority need the **Insured Person** to stay in the Republic of Ireland after a fire, storm, **Flood**, burglary or vandalism to their **Home** within seven days before they planned to leave on their **Trip**.
6. If the **Insured Person** is a member of the armed forces or police, fire, nursing or ambulance services which results in their having to stay in the Republic of Ireland due to an unforeseen emergency or if they are posted overseas unexpectedly.
7. If after the time the **Insured Person** booked their **Trip** the Department of Foreign Affairs have allocated a status of 'Avoid non-essential travel' or 'Do not travel' to their intended destination.
8. If the **Insured Person** becomes pregnant after the date of booking this **Trip** and they will be more than 26 weeks pregnant at the start of or during their **Trip**. Or, if the **Insured Person** becomes pregnant after the

date the **Policyholder** arranged this insurance cover and their doctor advises that they are not fit to travel due to complications in their pregnancy.

What is not covered

1. The excess as shown the table of benefits (or €35 if the claim relates to loss of deposit) which will apply for each **Trip** that the **Policyholder** or **Insured Person** has booked and for each **Insured Person**.
2. Cancelling the **Trip** because of a medical condition or an illness or death related to a medical condition which the **Insured Person** knew about and which could reasonably be expected to lead to a claim. This applies to the **Insured Person**, a **Relative** or a person who the **Insured Person** is travelling with, and any person the **Insured Person** was depending on for the **Trip**.
3. The **Insured Person** not wanting to travel.
4. Any extra costs resulting from the **Policyholder** or **Insured Person** not telling the travel company as soon as they know they have to cancel the **Trip**
5. The **Insured Person** being unable to travel due to their failure to obtain the passport or visa they need for the **Trip**.
6. Airport taxes and associated administration fees shown in the cost of the **Insured Person's** flights.
7. Costs which have been paid for on behalf of a person who has not taken out insurance cover with AIG.

Claims evidence required for section A1

- Proof of travel cost (confirmation invoice, travel tickets, unused excursion, tour or activity tickets)
- Cancellation invoice or letter confirming no refund is due
- A medical certificate which **we** will supply for the appropriate doctor to complete
- An official letter confirming: redundancy, emergency posting overseas, the need for the **Insured Person** to remain in the Republic of Ireland
- Summons for jury service

Please note: This is not a full list and **We** may request other evidence to support the claim.

Section A2 – Cutting short the trip

Please note: If the **Insured Person** needs to return home to the Republic of Ireland earlier than planned, they must contact the **Medical Emergency Assistance Company** immediately (please see the **Medical and other emergencies** section for further details).

What is covered

We will pay up to the amount shown in the table of benefits for:

- travel and accommodation expenses which the **Policyholder** or **Insured Person** has paid or has agreed to pay under a contract and which they cannot get back;
- the cost of excursions, tours and activities which the **Policyholder** or the **Insured Person** has paid for either before they left the Republic of Ireland or those paid for locally upon their arrival overseas and which they cannot get back; and

- reasonable additional travel costs to return back to the Republic of Ireland if it is necessary and unavoidable for the **Insured Person** to cut short their **Trip**.

Please note: If payment has been made using frequent flyer points, air miles, loyalty card points or the like, settlement of the **Insured Person's** claim will be based upon the lowest available published flight fare for the flight originally booked if they are non-transferable.

We will provide this cover if the cutting short of the **Insured Person's Trip** is necessary and unavoidable as a result of the following.

1. the **Insured Person** dying, becoming seriously ill or being injured.
2. The death, serious illness or injury of a **Relative**, person who the **Insured Person** is travelling with or a **Relative** or friend living abroad who the **Insured Person** is staying with.
3. If the police or relevant authority need the **Insured Person** to return **Home** to the Republic of Ireland after a fire, storm, **Flood**, burglary or vandalism to their **Home** or place of business.
4. If the **Insured Person** is a member of the armed forces or police, fire, nursing or ambulance services which results in the **Insured Person** having to return **Home** to the Republic of Ireland due to an unforeseen emergency or if they are posted overseas unexpectedly.

What is not covered

1. The excess as shown in the table of benefits for each **Insured Person** and for each incident.
2. Cutting short the **Insured Person's** trip because of a medical condition, or an illness or death related to a medical condition which they knew about and which could reasonably be expected to lead to a claim. This applies to the **Insured Person**, a **Relative** or a person who the **Insured Person** is travelling with, and any person the **Insured Person** was depending on for the **Trip**.
3. Any claims where the Medical Emergency Assistance Company has not been contacted to authorise the **Insured Person's** early return back to the Republic of Ireland.
4. If the **Insured Person** has to cut short their **Trip** and they do not return to the Republic of Ireland **We** will only be liable for the equivalent costs which the **Insured Person** would have incurred had they returned to the Republic of Ireland
5. The **Insured Person** being unable to continue with their travel due to their failure to obtain the passport or visa they need for the **Trip**.
6. The cost of the **Insured Person's** intended return travel to the Republic of Ireland if **We** have paid additional travel costs for them to cut short their **Trip**.

Please note: **We** will calculate claims for cutting short the **Trip** from the day the **Insured Person** returns to the Republic of Ireland or the day they go into hospital as an inpatient. The **Insured Person's** claim will be based solely on the number of complete days they have not used.

Claims evidence required for section A2

- Proof of travel cost (confirmation invoice, flight tickets)
- Invoices and receipts for **Insured Person's** expenses
- An official letter confirming: redundancy, the need for the **Insured Person's** return to the Republic of Ireland, emergency posting overseas

- Summons for jury service

Please note: This is not a full list and **We** may require other evidence to support the claim.

Section B1 – Medical and other expenses outside of the Republic of Ireland

Please note: If the insured person is admitted into hospital as an inpatient for more than 24 hours someone must contact the Medical Emergency Assistance Company on their behalf immediately (please see the Medical and other emergencies section for further details).

What is covered

We will pay up to the amount shown in the table of benefits for the necessary and reasonable costs as a result of the **Insured Person** becoming ill, being injured or dying during their **Trip**. This includes:

1. Emergency medical, surgical and hospital treatment and ambulance costs.
2. Up to €300 for emergency dental treatment as long as it is for the immediate relief of pain only.
3. The cost of the **Insured Person's** return to the Republic of Ireland earlier than planned if this is medically necessary and the Medical Emergency Assistance Company approve this.
4. If the **Insured Person** cannot return to the Republic of Ireland as they originally planned and the Medical Emergency Assistance Company approve this, **We** will pay for:
 - Extra accommodation (room only) and travel expenses (economy class unless a higher grade of travel is confirmed as medically necessary and authorised by the Medical Emergency Assistance Company) to allow the **Insured Person** to return to the Republic of Ireland; and
 - Extra accommodation (room only) for someone to stay with the **Insured Person** and travel **Home** with them if this is necessary due to medical advice; or
 - Reasonable expenses for one **Relative** or friend to travel from the Republic of Ireland to stay with the **Insured Person** (room only) and travel **Home** with the **Insured Person** if this is necessary due to medical advice.
5. Up to €7,000 for the cost of returning the **Insured Person's** body or ashes to the Republic of Ireland or up to €3,000 for the cost of the funeral and burial expenses in the country in which they die if this is outside the Republic of Ireland.

Please note: If the claim relates to the **Insured Person's** return travel to the Republic of Ireland and they do not hold a return ticket, **We** will deduct from their claim an amount equal to their original carriers published one way airfare (based on the same class of travel as that paid by the **Insured Person** for their outward **Trip**) for the route used for their return.

What is not covered under section B1

1. The excess as shown in the table of benefits which will apply for each **Insured Person** and incident. The excess will be reduced to Nil if the **Insured Person's** medical expenses have been reduced by their using the European Health Insurance Card or Medicare or equivalent schemes (please refer to the Health Agreements section for further details).
2. Any medical treatment that the **Insured Person** receives because of a medical condition or an illness related to a medical condition which they knew about and which could reasonably be expected to lead to a claim.

3. Any costs relating to pregnancy, if the **Insured Person** is more than 26 weeks pregnant at the start of or during their **Trip**.
4. Any treatment or surgery which the Medical Emergency Assistance Company thinks is not immediately necessary and can wait until the **Insured Person** returns to the Republic of Ireland. The decision of the Medical Emergency Assistance Company is final.
5. The extra cost of a single or private hospital room unless this is medically necessary.
6. Any search and rescue costs (costs charged to the **Insured Person** by a government, regulated authority or private organisation connected with finding and rescuing an individual. This does not include medical evacuation costs by the most appropriate transport).
7. Any costs for the following:
 - telephone calls (other than the first call to the Medical Emergency Assistance Company to notify them of the medical problem);
 - taxi fares (unless a taxi is being used in place of an ambulance to take the **Insured Person** to or from a hospital); and
 - food and drink expenses (unless these form part of the **Insured Person's** hospital costs if they are kept as an inpatient).
8. Any medical treatment and associated costs the **Insured Person** has to pay if they have refused to come back to the Republic of Ireland and the Medical Emergency Assistance Company considered they were fit to return **Home**.
9. Any treatment or medication of any kind that the **Insured Person** receives after they return to the Republic of Ireland.

Please note: This section does not apply to Trips taken within the Republic of Ireland

Section B2 – Hospital Benefit

What is covered

We will pay up to the amount shown in the table of benefits if, after an accident or illness that is covered under section B1 (Medical and other expenses outside of the Republic of Ireland) of this insurance, the **Insured Person** goes into hospital as an inpatient. We will pay a benefit of €15 for each complete 24-hour period that the **Insured Person** is kept as an inpatient.

Please note: This benefit is only payable for the time that the **Insured Person** is kept as an inpatient abroad and ceases if they go into hospital upon their return to the Republic of Ireland.

This amount is meant to help the **Insured Person** pay any extra expenses such as taxi fares and phone calls.

Claims evidence required for sections B1 and B2

- Policy schedule
- Proof of travel (confirmation invoice, travel tickets)
- Invoices and receipts for your expenses
- Proof of your hospital admission and discharge dates and times (for claims under section B2)

Please note: This is not a full list and we may require other evidence to support the claim.

Section C1 – Missed Departure

Definition relating to this section

Public transport: Bus, coach, ferry, sea vessel or train which operates according to a published timetable.

What is covered

We will pay up to the amount shown in the table of benefits for the reasonable extra costs of travel and accommodation the **Insured Person** needs to arrive at their booked destination if they cannot reach the final international departure point on the outward or return from or to the Republic of Ireland because:

- public transport services (please refer to the definition of ‘public transport’ above) fail due to poor weather conditions, a strike, industrial action or mechanical breakdown; or
- the vehicle in which the **Insured Person** is travelling is directly involved in an accident or suffers a mechanical breakdown (this would not include their vehicle running out of fuel, oil or water or suffering a flat tyre, puncture or flat battery).

Section C2 – Missed Connection

What is covered

We will pay up to the amount shown in the table of benefits for the reasonable extra costs of travel and accommodation the **Insured Person** needs to enable them continue with their pre-booked journey in accordance with their itinerary should they miss a flight connection due to;

- the airline with whom the **Insured Person** is booked to travel being unable to deliver them in sufficient time to their connecting airport to meet their connecting flight due to poor weather conditions, a strike, industrial action or mechanical breakdown.

What is not covered under sections C1 and C2

1. The excess as shown in the table of benefits for each **Insured Person** and for each incident.
2. Any claims arising due to **Natural Catastrophe** or volcanic ash carried by the wind.
3. Any claims where the **Policyholder** or **Insured Person** have not allowed enough time to reach their final booked international departure point at or before the recommended time.
4. Any claims where the **Policyholder** or **Insured Person** have not obtained written confirmation from the appropriate transport company or authority stating the reason for the delay and how long the delay lasted.
5. Any claims relating to the **Policyholder’s** or **Insured Person’s** own vehicle suffering a mechanical breakdown if they are unable to provide evidence that the vehicle was properly serviced and maintained and that any recovery or repair was made by a recognised breakdown organisation.

Claims evidence required for section C1 and C2

- **Policy schedule**
- Proof of travel (confirmation invoice, flight tickets)

- Invoices and receipts for the **Insured Person's** expenses
- An official letter confirming the reason for the late arrival and the length of the delay

Please note: This is not a full list and We may require other evidence to support the claim

Section D1 – Travel Delay

Please note: You are entitled to claim under section D1 or D2 but not both sections.

What is covered

We will pay up to the amount shown in the table of benefits if the **Insured Person's** final international departure from or to the Republic of Ireland by aircraft, sea vessel, coach or train is delayed for more than 12 hours due to poor weather conditions, a strike, industrial action or mechanical breakdown. **We** will pay a benefit of €15 for each complete 12-hour period that the **Insured person** is delayed, as long as the **Insured Person** eventually goes on the **Trip**.

Section D2 – Abandoning your trip

What is covered

We will pay up to the amount shown in the table of benefits if it is necessary for the **Insured Person** to cancel their **Trip** if their final international departure from the Republic of Ireland by aircraft, sea vessel, coach or train is delayed for more than 24 hours due to poor weather conditions, a strike, industrial action or mechanical breakdown. **We** will pay for the following costs which the **Policyholder** or the **Insured Person** have already paid for and cannot get back:

- travel and accommodation expenses;
- excursions, tours and activities; and
- visas.

Please note: If payment has been made using frequent flyer points, air miles, loyalty card points or the like, settlement of the claim will be based upon the lowest available published flight fare for the flight originally booked if they are non-transferable.

What is not covered under sections D1 and D2

1. The excess as shown in the table of benefits for each **Insured Person** and for each incident (this only applies if the **Insured Person** is claiming under section D2).
2. Any claims arising due to **Natural Catastrophe** or volcanic ash carried by the wind.
3. Any claims where the **Insured Person** has not checked in for their **Trip** at the final international departure point at or before the recommended time.
4. Any claims where the **Insured Person** has not obtained written confirmation from the appropriate transport company or authority stating the reason for the delay and how long the delay lasted.

Claims evidence required for sections D1 and D2

- **Policy schedule**
- Proof of travel (confirmation invoice, flight tickets)

- An official letter confirming the cause and length of the delay
- Official confirmation that the pre paid expenses cannot be refunded (abandoning the **Trip** only)

Please note: This is not a full list and **we** may require other evidence to support the claim.

Section E1 – Personal Belongings and Baggage

What is covered

We will pay for items which are usually carried or worn by **Insured Persons** for their individual use during a **Trip**. **We** will pay up to the amount shown in the table of benefits for items owned (not borrowed or rented) by the **Insured Person** which are lost, stolen or damaged during their **Trip**.

Please note:

- Payment will be based on the value of the property at the time it was lost, stolen or damaged. An allowance may need to be made for wear, tear and loss of value depending on the age of the property.
- The maximum amount **We** will pay for any one item, **Pair or set of items** is €250. Please refer to the definition of '**Pair or set of items**'.
- The maximum amount **We** will pay for **Valuables** in total is €250. Please refer to the definition of '**Valuables**' in Definitions.
- The maximum **We** will pay for property which is lost or stolen from an unattended motor vehicle is €150 for each **Insured Person** as long as the property was kept in a locked boot, a locked and covered luggage compartment or a locked glove compartment and there is evidence of forced and violent entry to the vehicle.

Section E2 – Delayed baggage

What you are covered for

We will pay up to the amount shown in the table of benefits for buying essential items if the **Insured Person's** baggage is delayed in reaching them on their outward international journey for more than 12 hours.

Please note: The **Insured Person** must get written confirmation of the length of the delay from the appropriate airline or transport company and they must keep and produce all receipts for the essential items they buy.

If the **Insured Person's** baggage is permanently lost and not returned to them within two months of the end of their **Trip** **We** will take any payment **We** make for delayed baggage from the **Insured Person's** overall claim for baggage.

Section E3 – Personal money

What is covered

We will pay up to the amount shown in the table of benefits for the loss or theft of the following if the **Insured Person** can provide evidence they owned them and evidence of their value (this would include receipts, bank statements or cash-withdrawal slips):

- Cash; and

- Travellers cheques (if these cannot be refunded by the provider).

Please note: The maximum amount **We** will pay for cash carried by one person, whether jointly owned or not, is the cash limit as shown in the table of benefits (or €50 for **Children** under 16 years of age)

Section E4 – Passport and travel documents

What is covered

We will pay up to the amount shown in the table of benefits for the cost of replacing the following items belonging to the **Insured Person** in the event of loss, theft or damage:

- Passport;
- Travel and admission tickets; and
- Visas.

Please note: The cost of replacing the **Insured Person's** passport includes the necessary and reasonable costs they pay overseas associated with getting a replacement passport to allow them to return back to the Republic of Ireland (this would include travel costs to the local Embassy as well as the cost of the emergency passport itself). A claim for the lost or stolen passport would be calculated according to its expiry date – depending upon how many years there were left to run on the original passport, an unused pro-rata refund would be made of its original value.

What is not covered under sections E1, E2, E3 and E4

1. The excess as shown in the table of benefits for each **Insured Person** and for each incident.
2. Property the **Insured Person** leaves unattended in a public place.
3. Any claim for loss or theft to personal belongings and baggage, personal money or passports and travel documents which the **Insured Person** does not report to the police within 24 hours of discovering it and which they do not get a written police report for.
4. Any claim for loss, theft, damage or delay to personal belongings and baggage which the **Insured Person** does not report to the relevant airline or transport company within 24 hours of discovering it and which they do not get a written report for. In the case of an airline, a property irregularity report will be required. If the loss, theft or damage to the **Insured Person's** property is only noticed after they have left the airport, they must contact the airline in writing with full details of the incident within seven days of leaving the airport and get a written report from them.
5. Any loss or theft of the **Insured Person's** passport which they do not report to the consular representative of their **Home** country within 24 hours of discovering it and get a written report for.
6. Any loss, theft or damage to **Valuables** which the **Insured Person** does not carry in their hand luggage while they are travelling.
7. Money, passports and travel documents which the **Insured Person** does not carry with them unless they are being held in locked safety deposit facilities.
8. Claims arising due to an unauthorised person fraudulently using the **Insured Person's** credit or debit cards.
9. Claims where the **Insured Person** is unable to provide receipts or other reasonable proof of ownership wherever possible for the items being claimed.

10. Breakage of fragile objects or breakage of sports equipment while being used
11. Damage due to scratching or denting unless the item has become unusable as a result of this.
12. Shortages due to variations in exchange rates.
13. If the **Insured Person's** property is delayed or held as a result of Customs, the police or other officials legally holding it.
14. Loss of jewellery (other than wedding rings) while swimming or taking part in dangerous activities.
15. Losses caused by mechanical or electrical breakdown or damage caused by leaking powder or fluid carried within the **Insured Person's** baggage.
16. Loss, theft or damage to contact or corneal lenses, sunglasses, prescription glasses or spectacles, dentures, hearing aids, artificial limbs, paintings, household equipment, mobile phones, bicycles and their accessories, motor vehicles and their accessories, marine craft and equipment or items of a perishable nature (meaning items that can decay or rot and will not last for long, for example, food).

Claims evidence required for sections E1 to E4

- Policy Schedule
- Loss or theft to property or money – police report
- Loss, theft or damage by an airline – property irregularity report, flight tickets and baggage check tags
- Delay by an airline – written confirmation of the length of delay from the airline, flight tickets, baggage check tags, receipts for emergency purchases
- Loss or theft of a passport – police report, consular report, receipts for additional expenses to get a replacement passport overseas
- Proof of value and ownership for property and money

Please note: This is not a full list and **we** may require other evidence to support the claim.

Important information:

- The **Insured Person must** act in a reasonable way as if uninsured to look after their property and not leave it unattended or unsecured in a public place
- The **Insured Person must** carry **Valuables** and money with them when they are travelling. When they are not travelling, keep their money and passport with them at all times or leave them in a locked safety deposit box
- The **Insured Person must** report all losses, thefts or delays to the relevant authorities and obtain a written report from them within 24 hours of the incident
- The **Insured Person must** provide AIG Claims Services with all the documents they need to deal with their claim, including a police report, a property irregularity report, receipts for the items being claimed as applicable

Section F – Personal accident

Definition relating to this section

Accident: A sudden, unexpected, unusual, specific and external event which occurs at a specific time during the **Insured Person's Trip** and does not result from illness.

Illness: Sickness or disease of an **Insured Person**, which manifests itself during a **Trip** and results in their death or disablement.

What is covered

We will pay up to the amount shown in the table of benefits to the **Insured Person** or the **Insured Person's** executors or administrators if the **Insured Person** is involved in an **Accident** during their **Trip** which solely and independently of any other incident results in one or more of the following within 12 months of the date of the **Accident**.

- Complete loss of limb (meaning permanent loss by physical separation at or above the wrist or ankle or permanent and total loss of use of a limb). A limb means an arm, hand, leg or foot.
- Loss of sight in one or both eyes (meaning physical loss of an eye or the loss of a substantial part of sight of an eye). A substantial part means the degree of sight after the accident is 3/60 or less on the Snellen scale after correction with spectacles or contact lenses. (At 3/60 on the Snellen scale something can be seen at 3 foot which should be seen at 60 foot.)
- Permanent total disablement (meaning a disability which prevents the **Insured Person** from working in any job which they are suitably qualified for and which lasts 12 months from the date of the **Accident** and, at the end of those 12 months, is in our medical advisor's opinion, not going to improve).
- Death.

Please note: We will only pay for one personal accident benefit for each **Insured Person** during the **Period of Insurance** shown on the **Policy Schedule**.

Section G – Personal liability

What is covered

We will pay up to the total amount shown in the table of benefits if, within the **Period of Insurance** shown on the **Policy Schedule**, they are legally liable for accidentally:

- A. injuring someone; or
- B. damaging or losing someone else's property.

What is not covered

1. The excess as shown in the table of benefits for each **Insured Person** and for each incident.
2. Any liability arising from an injury or loss or damage to property:
 - owned by the **Policyholder** or **Insured Person**, a member of the **Insured Person's** family or household or a person the **Insured Person** or **Policyholder** employs; or

- in the care, custody or control of the **Policyholder**, the **Insured Person** or of their family or household.
3. Any liability for death, disease, illness, injury, loss or damage:
- to members of the **Insured Person's** family or household, or a person they or the **Policyholder** employ;
 - arising in connection with the **Policyholder's** or the **Insured Person's** trade, profession or business;
 - arising in connection with a contract the **Policyholder** or **Insured Person** has entered into;
 - arising due to the **Insured Person** acting as the leader of a group taking part in an activity;
 - arising due to the **Policyholder** or **Insured Person** owning, possessing, using or living on any land or in buildings, except temporarily for the purposes of the **Trip**; or
 - arising due to the **Policyholder** or **Insured Person** owning, possessing or using mechanically propelled vehicles, watercraft or aircraft of any description, animals (other than horses, domestic cats or dogs), firearms or weapons.

Important information:

- The **Policyholder** or **Insured Person** must give AIG Claims Services notice of any cause for a legal claim against them as soon as they know about it, and send them any documents relating to a claim
- The **Policyholder** or **Insured Person** must help AIG Claims Services and give them all the information they need to allow them to take action on their behalf
- The **Policyholder** or **Insured Person** must not negotiate, pay, settle, admit or deny any claim unless they get AIG Claims Services' permission in writing
- **We** will have complete control over any legal representatives appointed and any proceedings, and **We** will be entitled to take over and carry out in the **Policyholder** or **Insured Person's** name their defence of any claim or to prosecute for **our** own benefit any claims for indemnity, damages or otherwise against anyone else.

Claims advice for section G

- Do not admit liability, offer or promise compensation
- Give details of the **Policyholder** and **Insured Person's** name, address and travel insurance
- Take photographs and videos, and get details of witnesses if the **Insured Person** can

Tell AIG Claims Services immediately about any claim that is likely to be made against the **Policyholder** or **Insured**

Section H – Legal expenses

What is covered

We will pay up to the amount shown in the table of benefits for legal costs and expenses arising as a result of dealing with claims for compensation and damages resulting from the **Insured Person's** death, illness or injury during their **Trip**.

What is not covered

1. The excess as shown in the table of benefits for each **Insured Person** and for each incident

2. Any claim which **We** have not agreed to accept beforehand in writing.
3. Any claim where **We** or **Our** legal representative believe that an action is not likely to be successful or if **We** believe that the costs of taking action will be greater than any award.
4. The costs of making any claim against **Us**, **Our** agents or representatives, or against any tour operator, accommodation provider, carrier or any person who the **Insured Person** has travelled with or arranged to travel with.
5. Any fines, penalties or damages the **Policyholder** or **Insured Person** has to pay.
6. The costs of following up a claim for bodily injury, loss or damage caused by or in connection with the **Policyholder** or **Insured Person's** trade, profession or business, under contract or arising out of the **Policyholder** or **Insured Person** possessing, using or living on any land or in any buildings.
7. Any claims arising out of the **Policyholder** or **Insured Person** owning, possessing or using mechanically propelled vehicles, watercraft or aircraft of any description, animals, firearms or weapons.
8. Any claim reported more than 180 days after the incident leading to the claim took place.

Important information:

- **We** will have complete control over any legal representatives appointed and any proceedings
- The **Policyholder** and **Insured Person** must follow **our** advice or that of **our** agents in handling any claim
- The **Policyholder** or **Insured Person** must get back all of **our** expenses where possible. They must pay **Us** any expenses they do get back

Claims evidence required for section H

- Please contact the insurance broker who arranged this insurance for advice as soon as the **Policyholder** or **Insured Person** needs to make a claim

Section I – Hijack

What is covered

We will pay up to the amount shown in the table of benefits if the aircraft or sea vessel in which the **Insured Person** is travelling is hijacked for more than 24 hours.

Please note: The **Policyholder** must get written confirmation from the appropriate transport company stating how long the hijack lasted.

Claims evidence required for section J

- **Policy schedule**
- Proof of travel (confirmation invoice, flight tickets)
- An official letter confirming the length of the hijack

Please note: This is not a full list and **we** may require other evidence to support the claim

Section J – Uninhabitable accommodation

What is covered

We will pay up to the amount shown in the table of benefits for the cost the **Policyholder or Insured Person** pays or agrees to pay overseas for travel expenses and providing other similar accommodation to allow the **Insured Person** to continue with their **Trip** if they cannot live in their booked accommodation because of a fire, **Flood**, earthquake, storm, lightning, explosion, hurricane or major outbreak of infectious disease.

Please note: The **Policyholder or Insured Person** must get written confirmation from the appropriate authority stating the nature of the disaster and how long the disaster lasted. They must keep all receipts for the extra expenses they pay.

What is not covered

1. The excess as shown in the table of benefits for each **Insured Person** and for each incident.
2. Any expenses that the **Policyholder or Insured Person** can get back from their tour operator, airline, hotel or other service provider.
3. Any claim resulting from the **Insured Person** travelling against the advice of the appropriate national or local authority.

Claims evidence required for section J

- **Policy schedule.**
- Proof of travel (confirmation invoice, flighttickets).
- An official letter confirming the cause of the disaster and how long it lasted.
- Invoices and receipts for **your** expenses.

Please note: This is not a full list and **we** may require other evidence to support the claim.

Table of Benefits

The following cover is provided for each **insured person**. It is important that the **policyholder** and **insured person** refer to the terms and conditions of the policy document for full details of cover.

Table of benefit			
Section	Benefit	Sum insured up to:	Excess*
A1	Cancelling your trip	€5,000	€90
A2	Cutting short your trip	€5,000	€90
B1	Medical and other expenses outside the Republic of Ireland	€5,000,000	€100
B2	Hospital Benefit	€15 per day up to €2,000	Nil
C1	Missed departure	€800	€90
C2	Missed Connection	€500	€90
D1	Travel delay	€15 per 12 hours up to €300	Nil
D2	Abandoning your trip	€5,000	€90
E1	Personal belongings and baggage	€2,000	€90
	Including: Single article limit	€250	Nil
	Including: Valuables limit	€250	Nil
E2	Delayed Baggage	€300	Nil
E3	Personal money	€300	€90
	Including: Cash limit	€200	Nil
E4	Passport and travel documents	€300	€90
F	Personal accident	€25,000	Nil
G	Personal liability	€2,000,000	€250
H	Legal expenses	€25,000	€250
I	Hijack	€100 per day up to €1,000	Nil
J	Uninhabitable Accommodation	€500	€90

*** Excess**

When claiming under certain sections listed in the tables above, the **Insured Person** has to pay the first part of a claim. The excess will apply to each person claiming, and to each incident and to each section which a claim is made under. When dealing with claims under section A1 where the **Insured Person** is claiming for cancelling more than one **Trip** due to one incident, an excess for each person claiming and for each **Trip** will be deducted.

Summary of Important Contact Details

Emergency Medical Assistance – AIG Assistance Services

Phone: +44 (0) 1273 723 146

Email: uk.assistance@aig.com

Phone lines are open 24 hours a day, 7 days a week

Claims – AIG Claims Services

AIG Claims Service

AIG Europe S.A

30 North Wall Quay, International Financial Services Centre, Dublin 1

Phone: (01) 208 1400

E-mail: irelandclaims@aig.com

AIG Claims Services are open Monday to Friday between 9.00am and 5.00pm (excluding Bank Holidays).

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