

Policy Wording Endorsement

This endorsement:

- is issued by Zurich Australian Insurance Limited (ACN 000 296 640, an overseas registered company incorporated in Australia) (ZAIL), trading as Zurich New Zealand
- supplements each Policy Wording issued by ZAIL

and should be read together with the following Policy Wording:

- Cover-More Corporate Travel Insurance with effective date 01 October 2018

Terms defined in the Policy Wording have the same meaning where used in this endorsement.

The Policy Wording is amended as follows:

Section 2: Medical Evacuation, Overseas Medical and Dental Expenses

Under the heading **We will not pay for** the following exclusion is introduced:

“14. costs arising directly or indirectly out of an Epidemic, Pandemic or outbreak of an infectious disease or any derivative or mutation of such viruses, or the threat or perceived threat of any of these.”

Section 4: Personal Accident and Sickness

Under the heading **We will not pay for** the following exclusion is introduced:

“9. any claim arising directly or indirectly out of an Epidemic, Pandemic or outbreak of an infectious disease or any derivative or mutation of such viruses, or the threat or perceived threat of any of these.”

Section 5: Loss of Income

Under the heading **We will not pay for** the following exclusion is introduced:

“9. any claim arising directly or indirectly out of an Epidemic, Pandemic or outbreak of an infectious disease or any derivative or mutation of such viruses, or the threat or perceived threat of any of these.”

Section 6: Travel Disruption

Under the heading **We will not pay for** the existing wording is changed

From:

“5. claims under Section 6, Extensions of Cover, Part 3. Other Circumstances arising from an Epidemic, Pandemic or outbreak of an infectious disease or any derivative or mutation of such viruses, or the threat or perceived threat of any of these.”

To:

“5. costs arising directly or indirectly out of an Epidemic, Pandemic or outbreak of an infectious disease or any derivative or mutation of such viruses, or the threat or perceived threat of any of these.”

The section specific exclusion number 5 now applies to all benefits under Section 6 including Extensions of Cover.

CORPORATE
TRAVEL
INSURANCE



*keep
travelling*

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The insurer of this product is Zurich Australian Insurance Limited (ACN 000 296 640, an overseas registered company incorporated in Australia) (ZAIL), trading as Zurich New Zealand.

Welcome

The Cover-More Corporate Travel Insurance Policy protects organisations with multiple staff on the move throughout the year.

As your organisation goes through changes, the Cover-More Corporate Travel Insurance Policy offers flexibility to meet those changing circumstances.

Medical emergencies and events are unexpected and can result in repercussions on not only your organisation's productivity, but also its financial status.

About this cover

Cover-More Corporate Travel Insurance allows The Company to tailor insurance cover for its requirements. The Policy includes cover for:

- Employees
- a Spouse or Partner who travels with the Employee on the Journey
- Dependent Child(ren) who travel with the Employee on the Journey (maximum of six Dependent Children)
- any other person approved by The Company to be covered by this Policy and agreed by Us. Nominated Person(s) (other than Spouse, Partner, Dependent Child(ren), or business associate with a clear relationship with The Company) can be added if The Company has purchased a Corporate Platinum Policy
- Incidental Leisure Travel up to two weeks pre or post business
- international and domestic travel (more than 100km from the Insured Person's Home or business premises), whichever they depart from last, and
- Pure Leisure Travel of up to six weeks for Senior Managers of The Company, based within New Zealand, if The Company has purchased a Corporate Platinum plan.

Our contract with The Company

The Policy is a contract of insurance between The Company and Cover-More Travel Insurance and contains all the details of the cover that We provide.

Throughout this document when referring to the insurance broker, agent or adviser, We simply refer to them as the Intermediary.

If a person insured under the Policy, purchased by The Company, makes a claim under the Policy then that person will have the same obligations to Us as if they were The Company; and We will have the same rights against the Insured Person as We would have against The Company who purchased the Policy.

The Policy is made up of the:

- Policy wording document, which tells you what is covered, the claims procedure, exclusions and other terms and conditions of cover, and
- most current Policy Schedule issued by Us. The Schedule is a separate document unique to, and issued separately to, The Company. It includes limits, excesses, special terms imposed, extensions, changes, conditions and exclusions made to suit The Company's individual circumstances and may amend the Policy.

Please note, only those Sections shown as covered in the Schedule are insured.

The Company should ensure that a copy of the Policy wording is made available to each Insured Person.

This Policy wording document is also the Policy wording for any offer of renewal We may make, unless We tell The Company otherwise. We reserve the right to change the terms of this product where permitted to do so by law.

Please read the Policy wording carefully to ensure it provides the cover required. If you have any questions please contact The Company's Intermediary or Us.

The Policy wording details:

- the benefits – read these together with the Schedule and options to vary cover
- information if the Insured Person has an Existing Medical Condition or is pregnant
- obligations in relation to the duty of disclosure
- definition of 'Words with special meaning' where they are used in the Policy, and
- what is and isn't covered.

Benefits and features of this Policy

A summary of benefits and the Benefits Table are outlined on pages 4-8. Please refer to the Policy wording section for further details of this insurance cover, including the terms and conditions that may apply. Full details of the levels of benefits for your Policy are outlined in the separate Schedule document issued to The Company.

Summary of benefits

Cover-More has three Corporate Travel Insurance plans available, each with its own summary of benefits:

1. Corporate Silver
2. Corporate Gold
3. Corporate Platinum.

The following table summarises the major benefits available under the Policy.

For additional details of benefit limits, special terms imposed, extensions, changes and Excess levels, where applicable, please refer to the Policy Schedule document, which is determined by the type of plan purchased by The Company.

| Summary of the benefits | | Page |
|---|---|------|
| Section 1 – Overseas Emergency Assistance | | |
| | Our emergency assistance service can be accessed anytime, anywhere in the world. Our team of doctors, nurses, case managers and travel agents is available 24 hours a day, 365 days a year. Corporate Travel Alerts also available. | 19 |
| Section 2 – Medical Evacuation, Overseas Medical and Dental Expenses | | |
| Medical Evacuation Expenses | Cover for expenses related to the evacuation of the Insured Person due to Injury or Sickness whilst on a Journey, or expenses related to the repatriation of the Insured Person to the most suitable hospital or to New Zealand | 20 |
| Overseas Medical and Dental Expenses | Cover for overseas hospital, medical, surgical, nursing, ambulance and emergency dental expenses | 20 |
| Hospital Incidentals | Covers the cost of miscellaneous expenses up to \$250 per night if the Insured Person is hospitalised overseas for at least 48 hours | 20 |
| Medical Aids | Covers the cost of equipment such as crutches, heat packs etc that are recommended in the treatment of an Injury by a Medical Practitioner | 20 |
| Section 3 – Additional Expenses | | |
| If the Insured Person Becomes Sick or Injured | Cover for Additional accommodation and transport expenses for the Insured Person due to Injury or Sickness whilst on a Journey. Cover includes Additional accommodation and transport expenses for one Relative or travelling companion who is required to travel to and remain with the Insured Person | 22 |
| If the Insured Person Dies | Cover for funeral, burial, cremation or repatriation of remains expenses if the Insured Person dies whilst on a Journey | 22 |
| Death, Injury or Sickness of a Relative or Close Business Colleague in New Zealand | Cover for Additional accommodation and transport expenses if the Insured Person must return Home due to the Serious Injury, Serious Sickness or unexpected death of a Relative or Close Business Colleague in New Zealand | 22 |

This table should be read in conjunction with the conditions, exclusions, limits, sub-limits and aggregate limits that apply to particular benefits.

| Section 4 – Personal Accident and Sickness | | |
|--|---|----|
| Part A – Accidental Death and Lump Sum Benefits | Cover for agreed Lump Sum Benefits specified in the Schedule following the Insured Person’s Injury or Accidental Death as a result of an Accident occurring whilst on a Journey | 22 |
| Part B – Injury Resulting in Surgery | Benefits payable where the Insured Person suffers an Injury whilst on a Journey and requires a specified surgical procedure | 23 |
| Part C – Sickness Resulting in Surgery | Benefits payable where the Insured Person suffers Sickness whilst on a Journey and requires a specified surgical procedure | 23 |
| Part D – Injury Resulting in Fractured Bones | Benefits payable where the Insured Person suffers an Injury whilst on a Journey resulting in fractured bones | 23 |
| Part E – Injury Resulting in Loss of Teeth or Dental Procedures | Benefits payable where the Insured Person suffers an Injury whilst on a Journey resulting in loss of Teeth or requiring full or partial capping of Teeth | 24 |
| Section 5 – Loss of Income | | |
| Due to Injury | Cover for agreed weekly benefits payable when the Insured Person suffers Temporary Total Disablement or Temporary Partial Disablement, as a result of an Injury on a Journey, and subsequently is unable to work on their return to New Zealand | 26 |
| Due to Sickness | Cover for agreed weekly benefits payable when the Insured Person suffers Temporary Total Disablement or Temporary Partial Disablement, following Sickness on a Journey, and as a result is unable to work on their return to New Zealand | 26 |
| Section 6 – Travel Disruption | | |
| Loss of Deposits | Cover for the non-refundable unused portion of travel and accommodation expenses paid for in advance of a proposed Journey following necessary cancellation, alteration or incompleteness of the Journey due to unforeseen circumstances | 27 |
| Cancellation or Curtailment | Cover for the non-refundable unused portion of travel and accommodation expenses as a result of necessary cancellation, alteration or incompleteness of the Journey due to unforeseen circumstances whilst on the Journey | 27 |
| Missed Transport Connection | Cover of reasonable Additional travel expenses incurred for use of alternative public transport where the Insured Person misses a transport connection due to an unforeseen circumstance covered by this Policy | 28 |
| Travel Delay | Cover for Additional accommodation expenses if the Insured Person’s scheduled transport is delayed for more than six hours | 28 |
| Section 7 – Luggage, Travel Documents and Money | | |
| Personal Luggage and Business Property | Cover for lost, stolen or damaged personal Luggage and Business Property | 29 |
| Money | Cover for cash that is lost or stolen from the Insured Person’s person or from a locked safe | 29 |
| Travel Documents | Cover for replacement cost if lost or stolen | 29 |
| Delayed Luggage Allowance | Cover for the cost of essential clothing and toiletries purchased overseas if the Insured Person’s Luggage is delayed, misdirected or temporarily mislaid by a Transport Provider | 30 |

This table should be read in conjunction with the conditions, exclusions, limits, sub-limits and aggregate limits that apply to particular benefits.

| | | |
|--|---|----|
| Section 8 – Rental Car Insurance Excess Waiver | | |
| Rental Car Insurance Excess Waiver | Cover for any Rental Car Insurance Excess the Insured Person or The Company becomes liable to pay as a result of damage to, or theft of, a Rental Car | 31 |
| Personal Car Excess Waiver | Cover for any Excess under the Insured Person’s comprehensive motor policy where the Insured Person suffers theft of, or damage to, their personal car whilst it is being used for business purposes on a Journey | 31 |
| Section 9 – Alternative Employee/Resumption of Assignment | | |
| | Cover for expenses incurred by the Insured Person or a replacement Employee to complete or resume an assignment as a direct result of the Insured Person dying or suffering an Injury or Sickness whilst on a Journey | 32 |
| Section 10 – Kidnap and Ransom | | |
| | Reimbursement for Extortion/Ransom Monies if the Insured Person is Kidnapped whilst on a Journey | 33 |
| Section 11 – Hijack and Detention | | |
| | An allowance, as specified in the Schedule, for each 24 hour period that whilst on a Journey, the Insured Person is Detained as a result of a Hijack of a means of Public Transport or is Detained by any government, state or other lawful authority | 34 |
| | Cover for the Insured Person’s personal legal costs as a result of being Detained | 34 |
| Section 12 – Personal Liability | | |
| | Cover for legal liability, including defence costs, if the Insured Person’s negligent act during the Journey causes bodily injury or damage to property of other persons | 34 |
| Section 13 – Political Unrest and Natural Disaster Evacuation | | |
| | Cover to return the Insured Person to New Zealand or the nearest place of safety, as well as reasonable accommodation costs, for up to 14 days, if the Insured Person is unable to return to New Zealand | 35 |
| Section 14 – Additional Benefits | | |
| | <p>If The Company has purchased the Corporate Gold plan or the Corporate Platinum plan, the following additional benefits apply:</p> <ul style="list-style-type: none"> • Court Attendance • Independent Financial Advice • Spouse or Partner Accidental Death Benefit • Dependent Child Assistance • Partner Retraining • Corporate Image Protection • Home and/or Car Modification • Unexpired Membership • Replacement of Keys and Locks • Home Burglary Insurance Waiver • Identity Theft Protection. <p>These benefit limits are outlined in detail in the Schedule, a separate document issued to The Company.</p> | 36 |

This table should be read in conjunction with the conditions, exclusions, limits, sub-limits and aggregate limits that apply to particular benefits.

| Benefits Table | | Corporate Silver | Corporate Gold | Corporate Platinum |
|---|--|--|--------------------------|--------------------------|
| | | Maximum benefit limit per Insured Person | | |
| Where an Excess per claim applies, the Excess is specified in the Schedule | | | | |
| 1 | Overseas Emergency Assistance | Included | Included | Included |
| 2 | Medical Evacuation, Overseas Medical and Dental Expenses | | | |
| | Medical Evacuation Expenses | \$Unlimited | \$Unlimited | \$Unlimited |
| | Overseas Medical and Dental Expenses | \$Unlimited [#] | \$Unlimited [#] | \$Unlimited [#] |
| | Hospital Incidentals | \$5,000 | \$5,000 | \$10,000 |
| | Replace or Adjust Dentures | \$2,500 | \$2,500 | \$2,500 |
| | Medical Aids | \$500 | \$500 | \$500 |
| | Insured Person 75 Years and Over [~] | \$Unlimited | \$Unlimited | \$Unlimited |
| 3 | Additional Expenses | | | |
| | If the Insured Person Becomes Sick or Injured | \$Unlimited | \$Unlimited | \$Unlimited |
| | If the Insured Person Dies | \$25,000 | \$25,000 | \$25,000 |
| | Death, Injury or Sickness of a Relative or Close Business Colleague in New Zealand | \$Unlimited | \$Unlimited | \$Unlimited |
| | Return of a Rental Car | \$1,000 | \$1,000 | \$1,000 |
| 4 | Personal Accident and Sickness | | | |
| | Part A – Accidental Death and Lump Sum Benefits | \$100,000 | \$250,000 | \$400,000 |
| | Part B – Injury Resulting in Surgery | N/A | \$5,000 | \$5,000 |
| | Part C – Sickness Resulting in Surgery | N/A | \$5,000 | \$5,000 |
| | Part D – Injury Resulting in Fractured Bones | N/A | \$5,000 | \$5,000 |
| | Part E – Injury Resulting in Loss of Teeth or Dental Procedures | N/A | \$5,000 | \$5,000 |
| 5 | Loss of Income | | | |
| | Loss of Income – Due to Injury | \$9,000 | \$18,000 | \$36,000 |
| | Loss of Income – Due to Sickness | N/A | \$18,000 | \$36,000 |
| 6 | Travel Disruption | | | |
| | Loss of Deposits ^{*^} | \$Unlimited | \$Unlimited | \$Unlimited |
| | Cancellation or Curtailment ^{*^} | \$Unlimited | \$Unlimited | \$Unlimited |
| | Missed Transport Connection | \$5,000 | \$10,000 | \$15,000 |
| 7 | Luggage, Travel Documents and Money | | | |
| | Personal Luggage and Business Property | \$15,000 | \$25,000 | \$40,000 |
| | Electronic Equipment ^{**} | \$10,000 | \$15,000 | \$20,000 |
| | Delayed Luggage Allowance | \$3,000 | \$3,000 | \$5,000 |
| | Money | \$1,000 | \$2,000 | \$5,000 |
| | Loss From Unauthorised or Fraudulent Use of Money and Travel Documents | \$3,000 | \$3,000 | \$3,000 |
| 8 | Rental Car Insurance Excess Waiver | \$2,000 | \$4,000 | \$6,000 |
| | Personal Car Excess Waiver | \$2,500 | \$2,500 | \$2,500 |

Overseas Medical and Dental Cover will not exceed 24 months from onset. Medical and dental expenses cover is limited to \$1,500 for treatment provided in New Zealand.

~ Excess is \$5,000 for each claim.

* Benefits under Loss of Deposits and Cancellation or Curtailment cover in this section are limited to a maximum of \$5,000 in respect of an Insured Person aged 75 years and over.

^ Sub-limits apply to benefits under Loss of Deposits and Cancellation or Curtailment where the Insured Person is travelling on Incidental Leisure Travel or Pure Leisure Travel, where applicable. Please refer to the Schedule for sub-limits.

** Is a sub-limit of the total for personal Luggage and Business Property.

This table should be read in conjunction with the conditions, exclusions, limits, sub-limits and aggregate limits that apply to particular benefits.

| Benefits Table | | Corporate Silver | Corporate Gold | Corporate Platinum |
|----------------|---|------------------|----------------|--------------------|
| 9 | Alternative Employee/Resumption of Assignment | \$10,000 | \$15,000 | \$20,000 |
| 10 | Kidnap and Ransom | \$100,000 | \$250,000 | \$500,000 |
| 11 | Hijack and Detention | | | |
| | Hijacked and Detained for more than 24 continuous hours | \$15,000 | \$30,000 | \$50,000 |
| | Personal Legal Costs | \$15,000 | \$30,000 | \$50,000 |
| 12 | Personal Liability | \$1,000,000 | \$2,500,000 | \$5,000,000 |
| 13 | Political Unrest and Natural Disaster Evacuation | \$25,000 | \$25,000 | \$25,000 |
| 14 | Additional Benefits | | | |
| | Court Attendance | N/A | \$1,000 | \$1,000 |
| | Independent Financial Advice | N/A | \$5,000 | \$5,000 |
| | Spouse or Partner Accidental Death | N/A | \$25,000 | \$25,000 |
| | Dependant Child Assistance | | | |
| | a. Education Fund Supplement | N/A | \$15,000 | \$15,000 |
| | b. Orphaned Benefit | N/A | \$30,000 | \$30,000 |
| | Partner Retraining | N/A | \$10,000 | \$10,000 |
| | Corporate Image Protection | N/A | \$15,000 | \$15,000 |
| | Home and/or Motor Vehicle Modification | N/A | \$10,000 | \$10,000 |
| | Unexpired Membership | N/A | \$500 | \$500 |
| | Replacement of Keys and Locks | N/A | \$1,000 | \$1,000 |
| | Home Burglary | N/A | \$1,000 | \$1,000 |
| | Identity Theft Protection | N/A | \$15,000 | \$15,000 |

This table should be read in conjunction with the conditions, exclusions, limits, sub-limits and aggregate limits that apply to particular benefits.



Significant information to consider

Excesses can apply

An Excess may apply to claims made under certain Sections of the Policy. An Excess is the amount that you must contribute towards each claim where an Excess is applicable. Any Excess applicable to a Section of the Policy is specified in the Schedule. The Excess applies per claim.

Journey duration limit

The maximum Journey duration is shown in the Schedule. If the Insured Person is travelling for longer than the maximum Journey duration shown, the Insured Person will not be covered for the travel days exceeding the limit. If cover is required beyond the limit, please contact The Company's Intermediary.

Age limits

There is no maximum age limit for Insured Persons under this Policy, however the following conditions apply.

1. In respect to each Insured Person aged 75 years or over at the time the Policy was issued:

Section 2 – Medical Evacuation, Overseas Medical and Dental Expenses and Section 3 – Additional Expenses

- An Excess of \$5,000 applies to each claim

Section 4 – Personal Accident and Sickness

- For Part A – Accidental Death and Lump Sum Benefits, Injury Type 1 (Accidental Death) in the Benefits Table, the maximum benefit payable is limited to \$25,000, unless otherwise shown in the Schedule
- For Part A – Accidental Death and Lump Sum Benefits, Injury types 2-19, no benefit will be payable

Section 5 – Loss of Income

For loss of income as a result of Injury or Sickness no benefits will be payable.

Section 6 – Travel Disruption

- Benefits under 'Loss of Deposit' cover in this Section are limited to a maximum of \$5,000
 - Benefits under 'Cancellation and Curtailment' cover in this Section are limited to a maximum of \$5,000
2. In respect to each Insured Person under this Policy aged under 18 years of age at the time the policy was issued:

Section 4 – Personal Accident and Sickness

 - For Part A – Accidental Death and Lump Sum Benefits, Injury Type 1 (Accidental Death) in the Benefits Table, the maximum benefit payable is limited to \$25,000, unless otherwise shown in the Schedule
 - For Part A – Accidental Death and Lump Sum Benefits, the benefit payable for Injury types 2-19 under the Benefits Table will be \$50,000 unless otherwise agreed to in writing by Us.

Aggregate limit of liability

(applicable to Sections 4, 10 and 13 only)

1. Our total liability for all claims arising under Section 4 – Personal Accident and Sickness, which arise out of any one event or series of related events, will not exceed the Limit of Liability for Section 4 specified in the Schedule.
2. Subject to point 1, above, Our total liability for all claims arising under Section 4 – Personal Accident and Sickness, which arise out of any air travel in an aircraft whose flights are not conducted in accordance with fixed schedules to and from fixed terminals, will not exceed the Limit of Liability for non-scheduled flights specified in the Schedule.
3. In the event that claims are made under the Policy, which exceed the above aggregate limits of liability, We shall reduce the payments made with respect to each person insured under this Policy in such manner as We may determine. Any determination as to the amount payable in these circumstances shall be made entirely at Our discretion and shall not be the subject of any challenge.
4. Our total liability for all claims arising under Section 10 – Kidnap and Ransom arising out of any one event or series of related events, will not exceed the Limit of Liability for Section 10 specified in the Schedule.
5. Our total liability for all claims arising under Section 13 – Political Unrest and Natural Disaster Evacuation, which arise out of any one event or series of related events, will not exceed the Aggregate specified in Section 13 of the Schedule.

Exclusions

This Policy contains a number of exclusions, some of which are common in insurance policies of this type. Some of the exclusions may be less common, and as such may be unexpected. However The Company and the Insured Persons should make themselves aware of all the exclusions that apply to all Sections.

Please refer to 'General exclusions' on page 37-38 and any additional exclusions specific to each Section.

Money back guarantee

If The Company cancels this Policy for any reason within the cooling-off period, which is within 15 working days (excluding public holidays) of the date of purchase, We will refund The Company its money.

Our money back guarantee ensures a refund of the entire premium unless anyone insured under the Policy purchased by the Company:

- has made a claim under the Policy
- intends to make a claim under the Policy, or
- has departed on their Journey.

If The Company wishes to cancel the Policy and receive a full refund, please contact The Company's Intermediary within the cooling-off period. Please refer to 'Cancellation' under General Terms and Conditions applicable to all sections on page 18.

What happens if payment is not made for this Policy?

If The Company fails to pay the premium on time, and the premium remains unpaid for at least 30 days after We have notified the Company's Intermediary in writing, We may cancel the Policy.

Activities

Snow skiing, snowboarding and snowmobiling

Claims involving participation by the Insured Person (during the Journey) in snow skiing, snowboarding or snowmobiling are automatically included in this Policy.

The Insured Person will only be covered if they are:

- skiing or snowboarding On-Piste
- not racing, and
- not participating in a Professional Sport capacity.

Motorcycle/moped riding

If the Insured Person wishes to be covered for this activity during their Journey and hires a motorcycle (including a moped) as the driver or a pillion passenger, the Insured Person will only be covered if:

- the engine capacity is 200cc or less
- whilst in control of a motorcycle or moped the Insured Person holds a valid New Zealand motorcycle licence or New Zealand motor vehicle driver licence, and the Insured Person holds a licence valid in the relevant country
- whilst the Insured Person is a pillion passenger the driver holds a licence valid in the relevant country
- the Insured Person is wearing a helmet
- the Insured Person is not participating in a Professional Sport capacity
- the Insured Person is not racing, and
- the Insured Person is not participating in motocross.

If The Company has purchased Corporate Platinum insurance, cover is available for the use of motorcycles with an engine capacity larger than 200cc. The following conditions apply:

- The Insured Person is over 25 and under 70 years of age at the Relevant Time
- The motorcycle/moped is hired from a licenced operator
- The Insured Person has held a full New Zealand motorcycle licence for the last five years
- Whilst in control of a motorcycle or moped the Insured Person holds a valid New Zealand motorcycle licence and a licence valid in the relevant country
- The Insured Person is the registered owner of a motorcycle in New Zealand that has an engine capacity greater than or equal to the engine capacity of the motorcycle/moped the Insured Person is hiring
- Whilst the Insured Person is a pillion passenger the driver holds a licence valid in the relevant country
- The Insured Person is wearing a helmet
- The Insured Person is not participating in a Professional Sport capacity
- The Insured Person is not racing
- The Insured Person is not participating in motocross.

Note:

- No cover will apply under Section 12 – Personal Liability. This means the Insured Person is responsible to pay costs associated with damage to the motorcycle, moped or property, or injury to another person.
- Insured Persons must have access to a copy of their registration papers and licence so that these can be sent to Our emergency assistance team if Our help is needed.

Travel and health of the Insured Person and their travelling companion

What is an Existing Medical Condition?

Claims directly or indirectly arising from or exacerbated by an Existing Medical Condition or related new infections are specifically excluded from this policy except for these sections:

- Section 2 – Medical Evacuation, Overseas Medical and Dental Expenses
- Section 6 – Travel Disruption
- Section 9 – Alternative Employee/Resumption of Assignment Expenses

“Existing Medical Condition” means:

- a. any disease, illness, medical or dental condition or physical defect for which treatment, medication or advice (including advice for treatment) has been received or prescribed by a Medical Practitioner or in the 12 months immediately prior to the Relevant Time, or
- b. a condition, the manifestation of symptoms of which a reasonable person in the circumstances would be expected to be aware of at the Relevant Time.

“Relevant Time” means the first time at which any part of the Insured Person’s relevant Journey is paid for.

What does this mean?

Section 2 – Medical Evacuation, Overseas Medical and Dental Expenses

If you are travelling overseas and suffer an Injury or Sickness that results from a condition that first presents itself while you are travelling or is an Existing Medical Condition, and you incur reasonable, usual and customary costs for hospital, surgical or other diagnostic or remedial medical and dental treatment given or prescribed by a Medical Practitioner, this policy will cover these costs. There are conditions and exclusions that apply to this cover and these are detailed on page 21.

Section 6 – Travel Disruption

If you have to cancel or amend your travel because of your Injury or Sickness that results from a condition that first presents itself before you travel or while you are travelling or is an Existing Medical Condition, We will pay for either of the non-refundable unused portion of travel or accommodation arrangements and reasonably incurred Additional travel or accommodation expenses. There are conditions and exclusions that apply to this cover and these are detailed on pages 27-29.

Section 9 – Alternative Employee/Resumption of Assignment Expenses

If you are an Employee on authorised business travel and must return Home because of your Injury or Sickness that results from a condition that first presents itself while you are travelling or is an Existing Medical Condition, We will pay the Company for either of the costs to return you Home and the costs for a substitute Employee to complete your original assignment. There are conditions and exclusions that apply to this cover and these are detailed on page 32.

For the sections below, this policy specifically excludes your Existing Medical Condition:

Section 4 – Personal Accident and Sickness

Section 5 – Loss of Income (due to Injury or Sickness)

In addition to medical conditions excluded through the definition of Existing Medical Condition and the relevant section exclusions,

We will not be liable for any losses directly or indirectly arising as a result of:

- travelling against advice from a Medical Practitioner
- any medical or dental conditions for which the Insured Person is travelling to seek advice, treatment or review or to participate in a clinical trial
- where the Insured Person has been diagnosed with a Terminal Illness, but only with respect to the Terminal Illness condition
- conditions involving drug or alcohol dependency, and
- routine, cosmetic medical or dental treatment, even if the Insured Person's Existing Medical Condition is covered.

Travel and health of other people

The health of a non-travelling Close Business Colleague or Relative can be relevant to a claim on this insurance under the following sections:

Section 3 – Additional Expenses

Part 3 – Death, Injury or Sickness of a Relative or Close Business Colleague in New Zealand

Section 6 – Travel Disruption

Loss of Deposits & Cancellation and Curtailment

We can only consider claims by The Company or the Insured Person arising from the health or death of a Relative or Close Business Colleague who is not travelling with the Insured Person if, at the Relevant Time, that person has a Serious Injury or Serious Sickness.

“**Serious Injury or Serious Sickness**” means, a medical condition that requires immediate treatment by a Medical Practitioner or dentist and for which the person on whom the claim depends:

- a. has not received regular medical treatment or medication in the 30 days immediately prior to the date the Insured Person's Journey was booked
- b. has not required hospitalisation or surgery (or was on a waiting list for surgery or hospitalisation) in the six months immediately prior to the date the Insured Person's Journey was booked
- c. did not reside in a nursing home or require similar home care assistance
- d. did not have a Terminal Illness, or
- e. did not have a drug or alcohol addiction.

Claims caused by the health of other people (those people not listed above) are not covered by this policy.

Pregnancy

Pregnancy restrictions

The following restrictions apply to claims arising in any way from the pregnancy of any person:

- Cover is only provided for serious, unexpected pregnancy complications that occur up until the 24th week of pregnancy i.e. up to 23 weeks, six days.
Gestational age is measured in weeks and days and is calculated from the last known date of the Insured Person's menstrual period or calculated from the Insured Person's staging ultrasound
- Childbirth is not covered
- Costs relating to the health or care of a newborn child are not covered, irrespective of the stage of pregnancy when the child is born.

The Cover-More Corporate Travel Insurance app

Insuring your organisation's travel with Us gives you access to the Cover-More Corporate Travel Insurance smartphone app.

To make the most of the services available through Cover-More Corporate Travel Insurance, covered Employees must download and activate the app before any planned travel. A one-time registration process will give all covered Employees access to features prior to and during each insured Journey.

Benefits of Cover-More Corporate Travel Insurance app for The Company:

- The app records actual days and destinations travelled for an accurate travel log
- Saves time reconciling actual travel days
- Provides a service that keeps The Company's Employees and their approved travelling companions informed of travel and security alerts before their Journey starts and while they are travelling
- Cover-More facilitates alert messages to travellers in specific locations when events happen.

Benefits of Cover-More Corporate Travel Insurance app for the Insured Person:

- Access to 24 hour emergency assistance via the app
- Advice and security alerts specific to your destination before and during travel
- Access to Policy details within the app
- Ability to add your travelling companions to the app to ensure they are covered under this Policy.

Claims

In the event of a claim, The Company and/or Insured Person must:

- tell Us what happened as soon as possible
You can contact Our 24 hour emergency assistance team when travelling, or upon the Insured Person's return Home, contact The Company's Intermediary or Us to lodge a claim.
- refer to page 18 for more information about General terms and conditions for claims.

How to make a claim

- Download, print and complete a claim form from covermore.co.nz/claims, and
- Add receipts and other supporting documents to the completed claim form.

Where an event causing Injury, Sickness or disability to the Insured Person occurs, The Company and/or the Insured Person must obtain:

- and follow medical advice, including undertaking treatment, as prescribed from a Medical Practitioner, and
- a certificate from a Medical Practitioner confirming the nature and extent of the Injury, Sickness or disability.

Submit the claim

Send the completed claim form and supporting documents to Us within 60 days of the claim arising.

You can submit the claim by:

- emailing the completed claim form and supporting documentation to claims.corporate@covermore.co.nz, or
- posting the completed claim form and original supporting documents to:
Cover-More Travel Insurance
Claims Department
PO Box 105-203
Auckland City Auckland 1143

We need original documents, so please hold on to the documents as we may request them. If you are posting original documents, keep a copy.

For additional assistance:

Call: 0800 500 225 or +64 9 308 2120

After a claim has been made under this Policy, We have the sole right to act in The Company and/or Insured Person's name and on your behalf to negotiate or settle any claim. If We do this, it will be at Our expense.

The Company and/or the Insured Person must give Us all the help and information We need to administer these claims.

When will I hear back about the claim?

We try to process claims as quickly as possible. You will hear back within 10 working days from the time We receive your claim. We may approve and settle, investigate or decline the claim or request further information.

After your claim is accepted

The Company and/or Insured Person must help Us to make any recoveries. After We have paid a claim under this Policy, either in total or in part, We have the right to take over any legal right of recovery which you have. If We do this, it will be for Our benefit and at Our expense (if you have been fully reimbursed). The Company and/or Insured Person must provide full cooperation.

Claims payable in New Zealand dollars

All amounts payable and claims are paid in New Zealand dollars at the rate of exchange applicable at the time the expenses were incurred. If We agree to pay a claim under this Policy We will base any claim payment on the Goods and Services Tax (GST) inclusive costs (up to the relevant Policy limit).

Progress payments

If We have agreed that a claim is covered by this Policy We will make reasonable progress payments.

Important information

Who is the insurer?

The insurer of this product is Zurich Australian Insurance Limited (ZAIL) ACN 000 296 640, an overseas registered company incorporated in Australia, trading as Zurich New Zealand.

References to “Us”, “We” and “Our” in this Policy Wording refer to Zurich New Zealand.

ZAIL is part of the Zurich Insurance Group, a leading multi-line insurer that serves its customers in global and local markets. Zurich provides a wide range of general insurance and life insurance products and services in more than 210 countries and territories. Zurich’s customers include individuals, small businesses, and mid-sized and large companies, including multinational corporations.

As at the date of issue of this document, ZAIL has an insurer financial strength rating of A+ from S&P Global Ratings Australia Pty Ltd. This rating shows that The Company has strong financial security characteristics. This is reviewed annually and may change from time to time, so please refer to www.zurich.co.nz/content/zurich_nz/about_us/financial-strength to ensure it has not changed.

Standard & Poor’s rating scale for an insurer’s financial strength, together with a summary of Standard & Poor’s description is: AAA (Extremely Strong), AA (Very Strong), A (Strong), BBB (Good), BB (Marginal), B (Weak), CCC (Very Weak), CC (Extremely Weak), R (Regulatory Supervision), NR (Not Rated). Ratings from ‘AA’ to ‘CCC’ may be modified by the addition of a plus (+) or minus (-) sign to show relative standing within the major rating categories. Further information on these ratings is available from www.standardandpoors.com.

An overseas policyholder preference applies. Under Australian law, if ZAIL is wound up, its assets in Australia must be applied to its Australian liabilities before they can be applied to overseas liabilities. To this extent, New Zealand policyholders may not be able to rely on ZAIL’s Australian assets to satisfy New Zealand liabilities.

Who is Cover-More?

Cover-More (NZ) Limited (Cover-More), administers the Policy (including customer service and claims management) and will usually arrange for the issue of the insurance, either directly or through one of Cover-More’s representatives.

Change of terms and conditions

From time to time and where permitted by law, We may change parts of the Policy Wording document. We will issue The Company with an endorsement or other document to update the relevant information, except in limited cases. Any updates, which are not materially adverse to The Company from the view of a reasonable person deciding whether to buy this insurance, can be obtained from The Company’s Intermediary or by calling Us on 0800 500 225.

Duty of disclosure

The Company has a legal duty of disclosure to Us whenever The Company applies for, or alters, this insurance Policy.

What you must tell Us

The Company has a general duty to disclose to Us all material facts. A material fact is one that is relevant to Our decision whether to insure The Company, its Employees, their Spouse/ Partner, Dependent Child(ren) and approved Nominated Persons and, if We do, on what terms.

However, The Company’s duty does not require The Company to disclose anything:

- that reduces the risk to be undertaken by Us
- that is generally well known
- that We know or, in the ordinary course of Our business, ought to know, or
- in respect of which We have waived The Company’s duty.

If you do not tell Us

If The Company does not answer Our questions honestly or does not properly disclose to Us, We may reduce or refuse to pay a claim or may cancel the Policy. If The Company acts fraudulently in answering Our questions or not disclosing to Us, We may refuse to pay a claim or treat the Policy as never having existed.

Your general duty applies to changes

The Company’s general duty applies in full when The Company changes or reinstates the insurance Policy.

Who needs to tell Us

It is important that The Company understands that when The Company is disclosing to Us and answering Our questions, they are doing this for The Company and for anyone else The Company wants to be covered by the Policy.

We respect your privacy

We adhere to the *Privacy Act 1993* when We and Our authorised Intermediaries collect and handle personal information from The Company and Insured Persons under this Policy and others including Medical Practitioners, hospitals, travelling companions and other persons whom We consider necessary.

We collect personal information for the purposes of providing insurance services to The Company, including:

- evaluating The Company’s insurance application
- evaluating any request for a change to any insurance provided
- providing, administering, and managing the insurance services following acceptance of an application, and
- investigating and, if covered, managing claims made in relation to any insurance The Company has with Us or other companies within the same group.

For further information on Our privacy policy refer to covermore.co.nz.

Data sharing consent

To provide a seamless insurance service globally, Cover-More transfers data to Zurich New Zealand, the Insurer. Zurich New Zealand may transfer any data it has received from, and any data it holds on, The Company ('policyholder') to other units of Zurich Insurance Group Ltd, such as branches, subsidiaries, or affiliates, its cooperative partners of coinsurance and reinsurance companies located in the country of the policyholder or abroad.

Cover-More, Zurich New Zealand and such recipients may use, process and store the data, in particular for the purpose of risk evaluation, policy execution, premium setting, premium collection, claims assessment, claims processing, claims payment, statistical evaluation or to otherwise ensure Zurich's global insurance service delivery.

If Cover-More or its agent is acting on your behalf, Zurich New Zealand is authorised to use, process and store your data, received from Cover-More or such agent, and to forward your data to Cover-More or such agent data to execute the Policy, collect premiums and pay claims.

Cover-More or Zurich New Zealand may procure your data from government offices and third parties to assess a claim in the event of loss or damage.

ZAIL's contact details are:

Mail: Zurich New Zealand
PO Box 497
Shortland Street
Auckland 1140

Information about other products

Cover-More may provide information to The Company and the Intermediary regarding other products. If you do not wish to receive this information please contact Cover-More quoting The Company Policy number.

The Fair Insurance Code

Zurich New Zealand is a signatory to the Fair Insurance Code. The Fair Insurance Code is a code of practice that:

- sets minimum service standards for insurance companies
- describes the responsibilities that The Company and its insurance company have to each other, and
- encourages professionalism in the insurance industry.

The Code covers all insurance products except health insurance and life insurance. The Code only applies to individuals and entities with 19 or fewer Employees. Further information about the Code can be obtained from icnz.org.nz.

Resolving complaints

If you think We have let you down in any way, or Our service is not what you expect (even if through one of Our representatives), please tell Us so We can help. If you have a complaint, contact The Company's Intermediary, or:

- Cover-More by phone on 0800 500 225 or email corporate@covermore.co.nz. You will be put in contact with someone who can help resolve your complaint.
- visit covermore.co.nz for details of Our complaints process. We aim to resolve your complaint fairly and promptly. However, if you are not satisfied you can refer the matter to the Insurance & Financial Services Ombudsman (IFSO), an independent body whose services are free to you. As a member We agree to accept the IFSO's decision where We are bound to do so.

You can contact the IFSO by:

Website: ifso.nz

Email: info@ifso.nz

Mail: Insurance & Financial Services Ombudsman
PO Box 10-845 Wellington 6143 NEW ZEALAND

Telephone: 0800 888 202 or +64 (04) 499 7612

Fax: +64 (04) 499 7614



Policy wording

The benefits described in this Policy wording should be read in conjunction with the Policy Schedule, Our contract with The Company (page 3), Significant information to consider (pages 9-10), Travel and health (pages 10-11), Duty of disclosure (page 13), Words with special meaning (pages 15-17), General terms and conditions (pages 18-19) and General exclusions (page 37-38).

THE POLICY IS NOT VALID UNLESS THE SCHEDULE AND CERTIFICATE OF INSURANCE ARE ISSUED TO THE COMPANY.

Subject to the payment of a premium, We will provide the insurance cover detailed in the Schedule of benefits subject to the terms and conditions of this Policy.

Most important

The Policy will only operate if all of the following conditions are satisfied by The Company:

1. The Company is not aware of any circumstance that is likely to give rise to a claim.
2. All Insured Persons are residents of New Zealand and will be returning to their Home or place of business in New Zealand at the completion of each Journey and within the maximum Journey duration shown on the Schedule.
3. The Insured Person is:
 - a. employed by The Company operating within New Zealand and the Insured Person is travelling at the request of, or with the approval of, The Company and for a purpose connected with The Company's business, including Incidental Leisure Travel of up to two weeks,
 - b. an approved Senior Manager of The Company operating within New Zealand. A Journey includes Incidental Leisure Travel of up to two weeks and Pure Leisure Travel of up to six weeks,
 - c. a Spouse, Partner or Dependent Child(ren) of the Employee covered by this Policy, or
 - d. a Nominated Person other than the Employee covered by this Policy.
4. A Journey will include international or domestic travel more than 100km from the Insured Person's Home or business, whichever place is left last.

Words with special meaning

In this Policy wording the following words have meanings as described:

(Words with special meaning for Section 4 – Personal Accident and Sickness are described on page 24 and on page 26 for Section 5 – Loss of Income)

“We”, “Our”, “Us” means Zurich New Zealand.

“Insured Person(s)” means all Employees of The Company with which We have an insurance contract including their Accompanying Spouse/ Partner, Dependent Child(ren) or a business associate with a clear business relationship with The Company travelling as a guest of the Employee for business only, or any other Nominated Person, nominated by The Company and in respect of whom premium has been paid, or agreed to be paid, and agreed by Us as shown in the Schedule.

“The Company” means the principal corporate entity referred to in the Certificate of Insurance and the Schedule.

“Accident” means a single event that:

- a. is caused by sudden, external and visible means (independently of any other cause)
- b. results in Injury, which is both unexpected and undesired by an Insured Person, and
- c. occurs during the Journey.

“Accompanying” means travelling with, or travelling separately from but with the intention to meet, depart from or continue travelling with, another Insured Person who is on a Journey.

“Act of Terrorism” means an act, including but not limited to the use of force or violence, of any person or group(s) of persons, whether acting alone or on behalf of, or in connection with, any organisation(s) or government(s), which from its nature or context is done for, or in connection with, political, religious, ideological, ethnic or similar purposes or reasons, including the intention to influence any government and/or to put the public, or any section of the public, in fear.

“Additional” means the cost of transport and/or accommodation (room rate only) The Company or Insured Person actually uses less the cost of the transport and/or accommodation (room rate only) costs The Company or Insured Person expected to use had the Journey proceeded as planned.

“Alternative Employee Expenses” means reasonable expenses necessarily incurred in sending a substitute person to complete the business activities of the Insured Person.

“Business Property” means office equipment and the replacement value of plans, business papers, specifications, manuscripts and stationery for which the Insured Person is legally responsible and taken on, or acquired during, the Journey.

“Civil War” means a state of armed conflict or rebellion, insurrection, revolution or sedition between different parties belonging to the same country using military-like force to achieve economic, geographic, nationalistic, political, racial, religious or other ends.

“Close Business Colleague” means:

- a. the Insured Person's fellow Employee whose duties and responsibilities directly affect the Insured Person's work, or
- b. a person, who is not a fellow Employee but, where the business relationship of that person with the Insured Person necessitates the Insured Person's immediate return, but does not include any travelling companion.

“Conveyance” means:

- a. any bus, coach, ferry, helicopter, hovercraft, hydrofoil, ship, taxi, tram, monorail, train or any other non-commercial vehicle provided and operated by a carrier duly licensed for the regular transportation of fare-paying passengers, and
- b. any aircraft provided and operated by an airline or an air charter company, which is duly licensed for the regular transportation of fare-paying passengers.

“Dependent Child(ren)” means the Insured Person's Accompanying children or grandchildren travelling with the Insured Person on the Journey, provided they are not in full-time employment, they are financially dependent on the Insured Person and they are under the age of 21 years.

“Detention/Detained” means restraint by way of custody or confinement against the Insured Person's will.

“Electronic Equipment” means any computers (including laptops, notebooks and tablets), portable external hard drives, portable external battery packs, mobile phones, global positioning (GPS) devices, personal music/recording/gaming devices, cameras, drones, wearables and other electronic items of a similar nature as deemed by Us, which are intended for either personal or business use.

“Employee” means any person who has agreed to be employed by The Company and be compensated by salary, wages and/or commissions under a contract of service with The Company.

“Epidemic” means a fast-spreading contagious or infectious disease or illness in an area as documented by a recognised public health authority.

“Excess” means the amount The Company or Insured Person must firstly contribute toward any claim. The Excess amount relevant to each section is specified in the Schedule.

“Existing Medical Condition” means:

- a. any disease, illness, medical or dental condition or physical defect for which treatment, medication or advice (including advice for treatment) has been received or prescribed by a Medical Practitioner in the 12 months immediately prior to the Relevant Time, or
- b. a condition, the manifestation of symptoms of which a reasonable person in the circumstances would be expected to be aware of at the Relevant Time.

“Extortion” means any threat or connected series of threats communicated to The Company or to the Insured Person for the purpose of demanding Ransom Monies to:

- a. kill, physically injure or Kidnap the Insured Person, and/or
- b. divulge any confidential, private or secret information unique to the Insured Person in relation to The Company business, provided that Ransom Monies are not in the possession of the Insured Person at the time of the threat.

“Extortion/Ransom Monies” means a consideration paid for the return of a Kidnap victim or consideration paid to terminate or end an Extortion, to a person believed to be responsible for the Kidnap or Extortion (as the case may be) and includes, but is not limited to, cash, securities, marketable goods or services, property or monetary instruments.

“Hijack” means the seizing of control of a Conveyance on which the Insured Person is a passenger.

“Home” means the Insured Person’s usual place of residence in New Zealand.

“Incidental Leisure Travel” means travel of a private and/or leisure nature taken either side of, or during, an authorised business Journey and is limited to two weeks (14 days) for each Journey.

“Injury” means loss of life or bodily Injury resulting from an Accident occurring during the Journey. Injury does not include Sickness arising out of an Accident.

“Insolvency” means bankruptcy, provisional liquidation, liquidation, appointment of a receiver or administrator, entry into a scheme of arrangement, statutory protection, presentation of a petition for the compulsory winding up of, stopping the payment of debts or the happening of anything of a similar nature under the laws of any jurisdiction.

“Intermediary” means The Company’s insurance broker, agent or adviser.

“International Waters” means waters outside the jurisdiction territory of any country.

“Journey” means any trip undertaken on the business of The Company including any Incidental Leisure Travel and, where approved, Pure Leisure Travel exceeding 100kms from the Insured Person’s Home or business premises and will start from the time of leaving the Insured Person’s Home or business premises (whichever is left last), and continue until the Insured Person’s arrival back at their Home or business premises (whichever is reached first).

Everyday occupational commuting shall not be regarded as a Journey undertaken on the business of The Company.

The maximum duration of any one Journey, is specified in the Schedule.

“Kidnap”, “Kidnapped” or “Kidnapping” means an Insured Person being illegally seized by force and held captive by a previously unknown and unrelated party for the purpose of demanding payment or concessions in return for the Insured Person’s release.

“Luggage” means personal property and/or Business Property including portable Electronic Equipment but excluding electronic data, software, intangible assets, furniture, furnishings, household appliances, mechanically-propelled vehicles, unmanned vehicles or hired items that are taken on the Journey or acquired during the Journey belonging to the Insured Person or The Company, or for which the Insured Person is legally responsible.

“Medical Aids” means equipment such as crutches, bandages, traction equipment, walker boots, heat packs etc that are recommended in the treatment of a bodily Injury by a Medical Practitioner.

“Medical Practitioner” means the Insured Person’s attending doctor or specialist, who is registered or licensed to practise medicine under the laws of the country in which they practise, other than:

- a. the Insured Person
- b. a Relative of the Insured Person
- c. a member of the immediate family of the Insured Person, or
- d. an Employee of The Company.

“Money” means coins, bank notes, postal and money orders, travellers’ and other cheques, prepaid travel money cards, letters of credit, automatic teller machine cards, credit and debit cards, petrol and other coupons in the Insured Person’s possession.

“Natural Disaster” means any event or force of nature that has catastrophic consequences such as avalanche, earthquake, flood, bush fire, cyclone, hurricane, tornado, tsunami and volcanic eruption.

“Nominated Person” means a person who travels as a guest of a Senior Manager on Incidental Leisure Travel or Pure Leisure Travel only and in respect of whom a premium has been paid, or agreed to be paid, and agreed by Us as shown in the Schedule.

A Nominated Person is not:

- a. an Employee of The Company
- b. an Accompanying Spouse or Partner or Dependent Child(ren) of the Employee, or
- c. a business associate with a clear business relationship with The Company.

“Pandemic” means an Epidemic that is expected to affect an unusually large number of people or involves an extensive geographic area.

“Period Of Insurance” means the time the Insured Person commences each Journey until the earliest of the following times:

- a. The time that the Insured Person completes the Journey
- b. The expiry of the maximum Journey duration per Journey shown on the Schedule
- c. 12 months from the contract start date shown on The Company Certificate of Insurance and Schedule.

Cover under Section 6 – Travel Disruption begins from the date The Company enters into a contract with Us or the Relevant Time, whichever is later.

“Permanent” means a period of time lasting 12 consecutive months after the expiry of which We consider there is no reasonable prospect of improvement.

“Policy” means this Policy wording, the current Schedule and any other documents We may issue to The Company that We advise will form part of the Policy (e.g. endorsements).

“Professional Sport” means training for, coaching or competing in any sporting event where the Insured Person is entitled to receive, or is eligible to receive, financial reward, sponsorship, an appearance fee, wage, salary or prize money totalling in excess of \$5,000.

“Public Place” means any place the public has access to including, but not limited to, airports, beaches, hotel foyers and grounds, ports, private car parks, restaurants, shops and streets.

“Pure Leisure Travel” means travel of a private and/or leisure nature undertaken by approved Employees of The Company including their Accompanying Spouse or Partner and Dependent Child(ren) and any Nominated Persons whom have been declared to, and accepted by, Us. This is limited to six weeks (42 days).

“Registered Psychologist or Psychiatrist” means a psychologist registered with the New Zealand Psychologists Board, or a psychiatrist registered with and accredited by the Medical Council of New Zealand. Or, if the Insured Person is overseas, an equivalent regulatory body that governs psychiatrists in the jurisdiction in which the Insured Person seeks medical assistance.

“Relative” means the Insured Person’s Spouse, de facto, parent, grandchild, brother, sister, son-in-law, daughter-in-law, parent-in-law, grandparent, child, step-parent, brother-in-law, sister-in-law, fiancé(e), first cousin, aunt, uncle, niece or nephew.

“Relevant Time” means the first time at which any part of the relevant Journey is paid for.

“Rental Car” means a rented sedan, hatchback or station-wagon (including 4WDs) and other non-commercial Rental Car hired from a licensed motor vehicle rental/hire company for the sole purpose of carrying the Insured Person in accordance with the Rental Car hiring agreement. It will not include any other type of vehicle or vehicle use.

“Rental Car Insurance Excess” means the lower of the Rental Car insurance excess the Insured Person became liable to pay under the Rental Car hiring agreement or the repair costs to the Rental Car if the Rental Car is involved in an Accident, is stolen or sustains malicious damage during the rental period.

“Resumption Of Assignment Expenses” means all reasonable and necessary expenses incurred in returning the Insured Person to re-commence an assignment within 90 days of returning to New Zealand as a result of the claim being admitted under Section 2 – Medical Evacuation, Overseas Medical and Dental Expenses and Section 6.2 – Cancellation and Curtailment.

“Schedule” means the most current Schedule issued by Us to The Company. It includes limits, excesses, special terms imposed, extensions, changes, conditions and exclusions made to suit The Company’s individual circumstances and may amend the Policy.

“Senior Manager” means The Company’s shareholding owners, Chief Executive Officer and direct reports to the Chief Executive Officer.

“Serious Injury or Serious Sickness” means, a medical condition that requires immediate treatment by a Medical Practitioner or dentist and for which the person on whom the claim depends:

- a. has not received regular medical treatment or medication in the 30 days immediately prior to the date the Insured Person’s Journey was booked
- b. has not required hospitalisation or surgery (or was on a waiting list for surgery or hospitalisation) in the six months immediately prior to the date the Insured Person’s Journey was booked
- c. did not reside in a nursing home or require similar home care assistance
- d. did not have a Terminal Illness, or
- e. did not have a drug or alcohol addiction.

“Sickness” means any illness, disease or symptom that first shows itself during the Journey and that requires immediate treatment by a Medical Practitioner or dentist. It does not include a terminal condition suffered by the Insured Person diagnosed prior to the commencement of the Journey or any condition for which a reasonable person in the circumstances would have become aware of, or would have sought medical attention or tests, prior to the commencement of the Journey.

“Specified Item” means personal Luggage and Business Property, Electronic Equipment or Valuables that have been specifically listed with a nominated Sum Insured in the Schedule and for which an agreed additional premium has been paid.

“Spouse or Partner” means a person who is married to the Insured Person or a partner of an Insured Person who has been co-habiting with the Insured Person for a period of at least three continuous months.

“Sum Insured” means the amount for which The Company is insured, as specified in the Schedule .

“Terminal Illness” means a medical condition for which a terminal prognosis has been given by a qualified Medical Practitioner and which is likely to result in death.

“Tooth” or “Teeth” means a sound and natural permanent Tooth but does not include first or milk Teeth, dentures, implants and dental fillings.

“Transport Provider” means a properly licensed coach operator, airline, shipping line or railway company.

“Travel Documents” means passports, travel tickets, visas, entry permits and other similar documents in the Insured Person’s possession or control.

“Unattended” means:

- a. the Insured Person did not observe the loss/theft, or
- b. at a distance from the Insured Person such that the Insured Person does not have a good chance of preventing any attempted theft.

“Valuables” means articles made of or containing gold, silver or precious metals, binoculars, jewellery, mobile phones, photographic, audio, video, tablet computer, computer and electronic equipment of any kind (including computer games, portable navigation equipment or media), precious stones, smart phones, drones, telescopes and watches.

“War” means a state of armed conflict between different nations, states or armed groups using military force to achieve economic, geographic, nationalistic, political, racial, religious or other ends.

General terms and conditions

The following general terms and conditions are applicable to all sections of The Company's Policy.

Other terms and conditions relevant to each Section also apply and are explained in each Section.

If The Company does not meet them, We may decline or reduce the claim payment or cancel the Policy.

1. Excess

An Excess may apply to claims made under certain Sections of the Policy. An Excess is the amount that The Company or Insured Person must contribute towards each claim where an Excess is applicable. Any Excess applicable to a Section of the Policy is specified in the Schedule issued to The Company. The Excess applies per claim.

2. Precautions

The Company must take all reasonable care to prevent or minimise loss, damage, Injury, Sickness or liability, including compliance with any law, by-law, ordinance or regulation that concerns the safety of persons or property.

3. Medical examination or post-mortem

We will be entitled at Our expense to have any Insured Person medically examined or in the event of death, a post-mortem examination carried out. We will give the Insured Person, The Company or its legal representative reasonable notice of the medical examination.

4. Claims

- a. The loss or theft of personal Luggage and Business Property, Travel Documents or Money must be reported within 24 hours to the police and (where applicable) the responsible Transport Provider and a written report must be obtained at that time.
- b. The Company and/or Insured Person must take all reasonable steps to prevent or minimise a claim.
- c. The Company and/or Insured Person must not make any offer, promise of payment or admit any liability without Our written consent.
- d. The Company and/or Insured Person must advise Us of any claim or occurrence, which may give rise to a claim, as soon as possible and within 60 days of the Insured Person's return after each Journey.
- e. The Company and/or Insured Person must, at their own expense, supply any documents in support of a claim, which We may request, such as an original police report, a Property Irregularity Report (PIR), receipts, valuations, a repair quote, a death certificate and/or medical certificate.
- f. The Company and/or Insured Person must cooperate fully in the assessment or investigation.
- g. If The Company and/or Insured Person makes or tries to make a false, exaggerated or fraudulent claim or use any false, exaggerated or fraudulent means in trying to make a claim: We will not pay the claim, The Company's cover under this Policy will be voided (without any return of the amount paid), We may report The Company and/or Insured Person to the appropriate authorities and you may be prosecuted.
- h. If We agree to pay a claim under this Policy We will base any claim payment on the Goods and Services Tax (GST) inclusive costs (up to the relevant limits of liability). However, We will reduce any claim payment by any input tax credit The Company and/or Insured Person is, or would be, entitled to for the repair or replacement of insured property or for other items covered by this Policy.

5. If you are able to claim from someone else you must do so

If The Company and/or Insured Person is able to claim against a household insurer, private health fund, hotel, carrier, workers' compensation scheme, travellers' compensation fund, New Zealand's Accident Compensation Scheme or other statutory fund or anyone else for monies otherwise payable under this Policy, The Company and/or Insured Person must do so and the Policy will only cover the balance of the claim.

6. You must help Us to make any recoveries

We have the right to recover from any other party in The Company and/or Insured Person's name, money payable under the Policy or to choose to defend any action brought against The Company and/or Insured Person. The Company and/or Insured Person must provide reasonable assistance to Us.

7. Claims payable in New Zealand dollars

All amounts payable and claims are paid in New Zealand dollars at the rate of exchange applicable at the time the expenses were incurred. If We agree to pay a claim under this Policy We will base any claim payment on the Goods and Services Tax (GST) inclusive costs (up to the relevant Policy limit).

8. Policy interpretation

The Policy shall be interpreted in accordance with New Zealand law. The parties submit to the jurisdiction of the Courts of New Zealand.

9. Emergency assistance

- a. Where a claim is excluded or falls outside the Policy coverage, the giving of emergency assistance will not in itself be an admission of liability.
- b. The medical standards, sanitary conditions, reliability of telephone systems and facilities for urgent medical evacuations differ from country to country. Responsibility for any loss, medical complication or death resulting from any factor reasonably beyond Our control cannot be accepted by Our emergency assistance, Cover-More or Us.

10. Automatic extension of insurance

If during the Period of Insurance, and whilst the Insured Person is on a Journey and their Journey is necessarily extended for up to three calendar months due to an unforeseeable circumstance outside their control, the maximum Journey duration will be automatically extended until the Insured Person is able to travel Home or to their normal place of business in New Zealand by the quickest and most direct route. The maximum Journey duration will not be extended for any other reason.

11. Automatic reinstatement of Sums Insured

In respect of the individual cover applying to any one Employee, the Sums Insured will be reinstated on the completion of each Journey.

12. Cancellation

The Company may cancel this Policy at any time by notifying Us in writing. Notice of cancellation has the effect of cancelling this Policy at 4.00pm on the day We receive The Company's written notice or such later date The Company requests.

We may cancel this Policy by notifying The Company and its Intermediary in writing, if The Company is in breach of any of the terms or conditions, or for any other reason available at law. Where We cancel the Policy by notifying The Company, notice of cancellation has the effect of cancelling this Policy at 4:00pm on the 30th business day, after the day on which notice was sent to The Company.

- a. After cancellation by The Company, We will be entitled to:
 - i. retain or charge The Company an amount based on actual travel days undertaken while the Policy was active

- ii. forfeit any refund that brings the Policy value below Our minimum Policy value, and
 - iii. any tax or duty paid or owing for which We are unable to obtain a refund.
- b. After cancellation by Us, The Company will be:
- i. entitled to a refund on a pro-rata basis in relation to the unexpired Period of Insurance where a deposit premium has been paid to Us, or
 - ii. charged an adjusted premium on the basis of Us deducting the actual travel days undertaken while the Policy was active.

The Company will not receive a refund if a claim has been made, or The Company becomes entitled to make a claim under the Policy, at the time the request for cancellation of the Policy is made by Us or by The Company.

13. Sanctions regulation

Notwithstanding any other terms or conditions under this Policy, We shall not be deemed to provide coverage and will not make any payments nor provide any service or benefit to the Insured Person or The Company or any other party to the extent that such cover, payment, service, benefit and/or activity of the Insured Person or The Company would violate any applicable trade or economic sanctions, law or regulation.

14. Subrogation

The Company and all Insured Persons will, at any time, at Our request and expense, permit Us to take all reasonable steps required to enforce any rights to which We would be entitled, including but not limited to any necessary steps required to prosecute a person or group responsible for any unauthorised acts against an Insured Person and/or The Company.

15. Renewal

This Policy may be renewed with Our consent provided The Company pays, or agrees to pay, the required renewal premium.

The benefits

SECTION 1: Overseas Emergency Assistance

1. Emergency Assistance Services

All Insured Persons have access to Our emergency assistance service when travelling. 24 hours a day, 365 days a year, Our team of doctors, nurses, case managers and travel agents provide the following services:

- **Help to find a medical facility and monitor your medical care**
Advice on the most appropriate medical facility in the Insured Person's location for emergency assistance.
- **Paying bills**
Payment guarantees to hospitals for approved medical services and insurance verification. Becoming ill overseas can be very expensive, so those significant medical expenses can be paid by Us directly to the hospital if a claim is approved.
- **Keeping you travelling or getting you Home**
Our team can assist with an urgent message service and emergency travel planning, as well as the Insured Person's emergency medical evacuation as a direct result of the Insured Person's Injury or Sickness, including accompanying medical staff where necessary.
Our team can decide if and when it is appropriate to move the Insured Person or bring them Home and will coordinate the entire exercise.
- **Our team can arrange for one Relative or Accompanying travelling companion to travel to, or remain with, an Insured Person who has suffered an Injury or Sickness.**
- **Help if passports, Travel Documents or credit cards are lost**
If the Insured Person needs assistance in contacting the issuer of the document, Our emergency assistance team can help.
- **Help to change travel plans**
If the Insured Person's travel consultant is not available to assist with rescheduling in an emergency, Our team can help. Certain services are subject to the claim being approved.
Our team can assist with the Insured Person's evacuation due to political unrest or a Natural Disaster (subject to the terms and conditions of Section 13).
- **Assistance in locating New Zealand Embassies and Consulates**
- **Advice regarding the replacement of lost or stolen Luggage.**

The Insured Person must phone Our emergency assistance service as soon as possible if they are admitted to hospital.

When you call, please have the following information:

- The Company Policy number
- A phone number to call you back on.

Please call DIRECT and TOLL FREE from:

USA 1866 309 2267 **Canada** 1866 773 9318

UK 0808 234 1526 **Australia** 1800 242 579

Charges may apply if calling from a pay phone or mobile phone.

From all other countries or if you experience difficulties with the numbers above, please:

Call direct: +61 (0) 2 8907 5240

Fax: +61 (0) 2 9954 6250

2. Cover-More Corporate Travel Alerts

Cover-More has partnered with Solace Global to provide up-to-date security, health and other useful information about the countries, regions and cities that the Insured Person plans to visit. The Cover-More Corporate Travel Alerts is a service that can be accessed on a smartphone or tablet after a one-off registration process using Your unique identifier.

After successful registration, the Insured Person will have access to:

- pre-travel security information
- real time security alerts pushed to their phone during a Journey, and
- a list of telephone numbers to call Our emergency assistance service for help.

You will need internet access and the smartphone location switched on to access these features on the app.

Conditions

1. Our emergency assistance service must be advised immediately of any potential claim under this section.
2. The Company and/or Insured Person must not attempt to resolve problems encountered without first advising Us and/or Our emergency assistance service.
3. Where Our emergency assistance provides a service in good faith to any person not insured under this Policy, The Company shall reimburse Us for all costs incurred.
4. We reserve Our rights against The Company for any Insured Person who does not make contact with Us and/or Our emergency assistance service and/or prejudices Our ability to minimise costs.

Also refer to: General terms and conditions, pages 18-19.

General exclusions, pages 37-38.

SECTION 2: Medical Evacuation, Overseas Medical and Dental Expenses

1. Medical Evacuation Expenses

If the Insured Person suffers an Injury or Sickness whilst on a Journey, We will pay, up to the Sum Insured shown in the Schedule detailing Medical Evacuation, Overseas Medical and Dental Expenses, for expenses related to the Insured Person's:

- a. evacuation, including necessary expenses incurred for qualified medical staff to accompany the Insured Person, and
- b. repatriation to the most suitable hospital or to New Zealand, provided in each case it is recommended by a Medical Practitioner, and is considered necessary by, and organised through, Our emergency assistance service.

2. Overseas Medical and Dental Expenses

If the Insured Person suffers an Injury or Sickness whilst on a Journey outside New Zealand, We will pay up to a period of 24 months from the date of Injury or Sickness for:

- a. all reasonable, usual and customary medical costs necessarily incurred outside New Zealand for hospital, surgical or other diagnostic or remedial treatment given or, prescribed by, a Medical Practitioner
- b. all reasonable dental treatment costs necessarily incurred outside New Zealand for emergency dental treatment given by a qualified and registered dentist to restore or replace Teeth lost or damaged as a result of Injury, or to resolve the acute, spontaneous and unexpected onset of pain
- c. expenses incurred outside New Zealand to repair, replace or adjust dentures up to a maximum of \$2,500, provided those expenses are as a direct result of the Insured Person's Injury or Sickness, and
- d. ongoing medical and dental expenses in New Zealand up to \$1,500 if the medical or dental emergency occurred overseas.

3. Hospital Incidentals

If, as a direct result of that Injury or Sickness in 2 (a), the Insured Person is hospitalised overseas as an inpatient, We will pay the Insured Person for incidentals such as phone calls and magazines, provided those costs are not insured elsewhere in this Policy. The amount We will pay is limited to \$250 for each complete 24 hour period, provided that the period of confinement is at least 48 hours. The maximum benefit payable is specified in the Schedule.

4. Medical Aids

If, as a direct result of that Injury in 2 (a), We will pay the Insured Person for Medical Aids such as crutches, bandages, walker boots, and heat packs, as prescribed by a Medical Practitioner. The maximum amount We will pay is limited to \$500.

Extensions of cover

1. Continuing Medical Care

Upon the Insured Person's return to New Zealand We will also pay up to \$1,500 for continued medical, surgical and hospital treatment for a period of up to 24 months from the date of Injury or Sickness.

If no treatment was sought overseas, We will also pay up to \$1,500, but the Insured Person must seek treatment within 72 hours of their arrival Home in New Zealand.

Conditions

1. Cover is subject to the written advice of the treating qualified Medical Practitioner and acceptance by Our emergency assistance team.
2. In accepting the services of Our emergency assistance, The Company and the Insured Person acknowledge that the Insured Person's attending physician has the ultimate responsibility for the care and treatment of the Insured Person.

Our emergency assistance service can only provide such assistance as the Insured Person's attending physician(s) believes to be in the interest of the Insured Person.

3. We have the option of returning the Insured Person to New Zealand if the cost of medical and dental expenses overseas are likely to exceed the cost of returning the Insured Person to New Zealand, subject always to medical advice. We also have the option of evacuating the Insured Person to another country.
4. In all cases the cost of evacuation, or to bring the Insured Person back to New Zealand, will only be met if the claim is approved by Us and it was arranged, and deemed necessary, by Our emergency assistance network.
5. If We request that the Insured Person be moved to another hospital, return to New Zealand or be evacuated to another country and The Company or the Insured Person refuses, We will only consider:
 - a. the Insured Person's costs and expenses per Section 2 – Medical Evacuation, Overseas Medical and Dental Expenses (as applicable) incurred up to the time of Our request, and
 - b. the lesser of:
 - i. an amount equivalent to the costs and expenses, per Section 2 – Medical Evacuation, Overseas Medical and Dental Expenses (as applicable) that the Insured Person would have incurred after Our request had the Insured Person moved to another hospital, returned to New Zealand or been evacuated to another country as requested, or
 - ii. the Insured Person's costs and expenses actually incurred after Our request.
6. If the Insured Person is hospitalised We will pay for a shared room. If a shared room is not available We will, at Our discretion and that of Our medical advisers, pay to upgrade the Insured Person to a single room.
7. If the Insured Person does not hold a return airline ticket, an amount equal to the cost of an economy class one-way ticket will be deducted from the claim for repatriation expenses.
8. An Excess of \$5,000 will be applied to each claim relating to an Insured Person aged 75 years or more.

We will not pay for:

1. expenses incurred directly or indirectly from a Journey:
 - a. undertaken against the advice of a Medical Practitioner
 - b. undertaken when the Insured Person is unfit to travel
 - c. where the purpose of the Journey is for the Insured Person to seek medical advice, treatment, or review, or to participate in a clinical trial, or
 - d. taken after a Medical Practitioner informs an Insured Person that they are terminally ill prior to the Relevant Time, but only in respect of the Terminal Illness
2. more than \$1,500 for medical or dental treatment, which is provided in New Zealand
3. expenses incurred directly or indirectly from routine medical, dental, prenatal or optical treatment or consultation

4. expenses incurred directly or indirectly from elective surgery or elective medical and dental treatment
5. expenses incurred directly or indirectly from cosmetic surgery or cosmetic medical and dental treatment
6. dental treatment caused by, or related to, the deterioration and/or decay of Teeth or associated tissue, or involving the use of precious metals
7. private medical treatment in New Zealand when public care or treatment is available
8. private medical treatment overseas where public care or treatment is available under any reciprocal health agreement between the New Zealand and foreign governments unless We agree to the private treatment
9. expenses incurred for any conditions involving drug or alcohol dependency
10. expenses recoverable by The Company and/or Insured Person from any other source, e.g. airlines or other insurance
11. expenses incurred for any medication or ongoing treatment for a condition that commenced prior to booking a Journey and for which the Insured Person has been advised to continue during the Journey
12. expenses incurred 24 months or more after the date the Insured Person suffers an Injury or Sickness, or
13. anything by which the payment by Us would contravene the applicable laws of the country in which the medication or medical treatment is being administered.

Also refer to: General terms and conditions, pages 18-19. General exclusions, pages 37-38.



SECTION 3: Additional Expenses

1. If the Insured Person Becomes Sick or Injured

Cover is subject to the written advice of the treating qualified Medical Practitioner, and acceptance by Our emergency assistance team and acceptance of the claim under Section 2: Medical Evacuation, Overseas Medical and Dental Expenses.

If the Insured Person suffers an Injury, Sickness or disease, We will pay the reasonable Additional accommodation (room rate only) expenses and Additional transport expenses, at the same fare class and accommodation standard as originally booked, incurred by:

- a. the Insured Person. The benefit ceases when the Insured Person is able to continue their Journey, travel Home or on the completion of the Period Of Insurance, whichever is the earlier,
- b. the Insured Person's travelling companion who remains with, or escorts, the Insured Person until the Insured Person is able to continue their Journey, travel Home or on the completion of the Period of Insurance, whichever is the earlier, or
- c. one person (e.g. a Relative) (if the Insured Person doesn't have a travelling companion with them already) who travels to, and remains with, the Insured Person following the Insured Person being hospitalised as an inpatient. The benefit ceases when the Insured Person is able to continue their Journey, travel Home or on the completion of the Period of Insurance, whichever is the earlier.

In the event that the Insured Person is unable to fulfil the contractual obligations under the rental agreement in returning a Rental Car due to any circumstances that gives rise to a claim under any other Section of this Policy, We will also pay the costs incurred for the return of the Rental Car up to a maximum of \$1,000.

2. If the Insured Person Dies

In the event that the Insured Person dies whilst on a Journey, We will reimburse all reasonable expenses to a maximum of \$25,000 for the Insured Person's:

- a. funeral, burial or cremation, or
- b. costs (excluding funeral and interment costs) incurred in transporting the Insured Person's body or ashes and personal property and/or Business Property back to a place nominated by the legal representative of the Insured Person's estate.

3. If a Relative or Close Business Colleague Dies or Becomes Sick or Injured in New Zealand

We will pay reasonable Additional transport expenses at the same fare class as originally booked if the Insured Person is required to return Home due to the Serious Injury, Serious Sickness or unexpected death of a Relative or the Insured Person's Close Business Colleague in New Zealand.

We will not pay for:

1. any costs or expenses incurred prior to the Insured Person being certified by a qualified Medical Practitioner as unfit to travel
2. claims under Section 3.3 arising from an Epidemic, Pandemic or outbreak of an infectious disease or any derivative or mutation of such viruses, or the threat or perceived threat of any of these.

Also refer to: General terms and conditions, pages 18-19.

General exclusions, pages 37-38.

SECTION 4: Personal Accident and Sickness

Limit of Liability

Our total liability for all claims arising under this Section – Personal Accident and Sickness, which arise out of any one event or series of related events, will not exceed the Limit of Liability for Section 4 specified in the Schedule.

Our total liability for all claims arising under this Section – Personal Accident and Sickness, which arise out of any air travel in an aircraft whose flights are not conducted in accordance with fixed schedules to and from fixed terminals, will not exceed the Limit of Liability for Non-Scheduled flights specified in the Schedule.

1. Accidental Death and Lump Sum Benefits

We will pay

If Sums Insured for Part A – Accidental Death and Lump Sum Benefits are specified in the Schedule under Section 4 – Personal Accident and Sickness, We will pay the corresponding amounts shown in the Benefits Table below, in the event that the Insured Person suffers an Injury as a direct result of an Accident and where the Injury occurs:

- a. on a Journey, or
- b. within 12 months of the Accident, and
- c. only as a direct result of the Accident (and not as a consequence of any other cause).

For items 1 to 19, the benefit payable is an amount calculated by applying the benefit percentage to the Accidental Death and Lump Sum Benefit Sum Insured specified in the Schedule.

Benefits Table

Part A – Accidental Death and Lump Sum Benefits

| Injury Type | Benefit Percentage |
|--|--------------------|
| 1 Accidental Death | 100% |
| 2 Permanent Total Disablement | 100% |
| 3 Permanent paraplegia, quadriplegia or incurable paralysis of all Limbs | 100% |
| 4 Permanent and total loss of sight in one or both eyes | 100% |
| 5 Permanent and total loss of use of one or more Limbs | 100% |
| 6 Permanent and incurable insanity | 100% |
| 7 Permanent total loss of: (a) hearing in both ears (b) the lens in both eyes | 100% 100% |
| 8 Permanent and total loss of: (a) the lens in one eye (b) hearing in one ear | 80% 30% |
| 9 Permanent and total loss of use of four fingers and the thumb of either hand | 75% |
| 10 Permanent disfigurement from third degree burns to: (a) 20% of the surface area of the head and neck (b) 40% of the surface area of the remainder of the body | 60% 40% |

| | | |
|----|--|------------------|
| 11 | Permanent and total loss of four fingers of either hand | 50% |
| 12 | Permanent and total loss of use of one thumb (both joints) | 30% |
| 13 | Permanent and total loss of one thumb (one joint) | 15% |
| 14 | Permanent and total loss of one finger: (a) all three joints (b) two joints (c) one joint | 15% 10% 5% |
| 15 | Permanent and total loss of use of all toes of either foot | 15% |
| 16 | Permanent and total loss of use of toes (per toe): (a) both joints of the great toe (b) one joint of the great toe (c) all joints of any toe other than the great toe | 5% 3% 1% |
| 17 | Fractured leg or patella with established non-union | 10% |
| 18 | Shortening of the leg by at least 5cm | 10% |
| 19 | Permanent disablement not otherwise provided for above through Injury Types 2-18 inclusive. Such percentage of the Lump Sum Benefit Sum Insured, which corresponds to the percentage reduction in whole bodily function as certified by at least two Medical Practitioners, one of whom will be the Insured Person's treating Medical Practitioner and the remaining will be appointed by Us. In the event of a disagreement, the amount payable will be decided by a mutually acceptable Medical Practitioner. The maximum amount We will pay is 75% of the Lump Sum Benefit Sum Insured. | 7.5% |

2. Injury Resulting in Surgery

We will pay

In addition to any benefit payable in respect of an Insured Person under Section 2 – Medical Evacuation, Overseas Medical and Dental Expenses cover, if the Insured Person suffers an Injury whilst on a Journey, requiring a surgical procedure listed below, and the:

- surgery is carried out within 12 months of the date of the Injury
- surgery is undertaken outside of New Zealand, and
- Insured Person has a valid claim under Section 2 – Medical Evacuation, Overseas Medical and Dental Expenses for the same procedure, We will pay the corresponding benefit shown below.

Benefits Table

Part B – Injury Resulting in Surgery

| | | |
|----|--|---------|
| 20 | Craniotomy | \$5,000 |
| 21 | Amputation of a Limb | \$5,000 |
| 22 | Fracture of a Limb requiring open reduction | \$2,500 |
| 23 | Dislocation of a joint requiring open reduction | \$1,250 |
| 24 | Any other surgical procedure carried out under a general anaesthetic | \$250 |

This benefit is payable if the Sums Insured for Part B – Injury Resulting in Surgery are specified in the Schedule under Section 4 – Personal Accident and Sickness.

3. Sickness Resulting in Surgery

We will pay

In addition to any benefit payable in respect of an Insured Person under Section 2 – Medical Evacuation, Overseas Medical and Dental expenses cover, if the Insured Person suffers Sickness, whilst on a Journey, requiring a surgical procedure listed below, and the:

- surgery is carried out within 12 months of the date of manifestation when the Insured Person first become aware of the Sickness
- surgery is undertaken outside of New Zealand, and
- Insured Person has a valid claim under Section 2 – Medical Evacuation, Overseas Medical and Dental Expenses for the same procedure, We will pay the corresponding benefit shown below.

Benefits Table

Part C – Sickness Resulting in Surgery

| | | |
|----|--|---------|
| 25 | Open heart surgical procedure | \$5,000 |
| 26 | Brain surgery | \$5,000 |
| 27 | Abdominal surgery carried out under general anaesthetic | \$2,500 |
| 28 | Any other surgical procedure carried out under a general anaesthetic | \$250 |

This benefit is payable if the Sums Insured for Part C – Sickness Resulting in Surgery are specified in the Schedule under Section 4 – Personal Accident and Sickness.

4. Injury Resulting in Fractured Bones

We will pay

If the Insured Person suffers an Injury whilst on a Journey, resulting directly in the fracture of bones, which occur within 12 months of the date of the Injury, We will pay the corresponding benefit shown below.

Benefits Table

Part D – Injury Resulting in Fractured Bones

| | | |
|----|--|---------|
| 29 | Neck, skull or spine (complete fracture) | \$5,000 |
| 30 | Hip | \$3,500 |
| 31 | Jaw, pelvis, leg, ankle or knee (other fracture) | \$2,500 |
| 32 | Cheekbone, shoulder or hairline fracture of skull or spine | \$1,500 |
| 33 | Arm, elbow, wrist or ribs (other fracture) | \$1,250 |
| 34 | Jaw, pelvis, leg, ankle or knee (simple fracture) | \$1,250 |
| 35 | Nose or collar bone | \$1,000 |
| 36 | Arm, elbow, wrist or ribs (simple fracture) | \$500 |
| 37 | Finger, thumb, foot, hand or toe | \$375 |

In the case of an established non-union of any of the above fractures, We will pay an additional \$250. The maximum benefit payable for any one Injury resulting in fractured bones will be \$5,000.

This benefit is payable if the Sums Insured for Part D – Injury Resulting in Fractured Bones are specified in the Schedule under Section 4 – Personal Accident and Sickness.

5. Injury Resulting in loss of Teeth or Dental Procedures

We will pay

If the Insured Person suffers an Injury whilst on a Journey, resulting in the loss of Teeth or requiring dental procedures within 12 months of the date of the Injury, as described below, We will pay the corresponding benefit shown below.

Benefits Table

Part E – Injury Resulting in loss of Teeth or Dental Procedures

| | | |
|----|--|---------|
| 38 | Loss of Teeth or full capping of Teeth | \$5,000 |
| 39 | Partial capping of Teeth, per Tooth | \$500 |

The maximum benefit payable for any one Injury resulting in loss of Teeth or requiring dental procedures will be \$5,000.

The maximum We will pay for any one tooth will be \$500.

This benefit is payable if the Sums Insured for Part E – Injury Resulting in loss of Teeth or Dental Procedures are specified in the Schedule under Section 4 – Personal Accident and Sickness.

Definitions

The following definitions shall apply to these words:

“Accidental Death” means the Insured Person’s death as a result of an Accident.

“Lump Sum Benefit” means the Accidental Death and Lump Sum Benefits Sum Insured amount specified in the Schedule.

“Complete Fracture” means a fracture in which the bone is broken completely across and no connection is left between the pieces.

“Hairline Fracture” means mere cracks in the bone.

“Limb” means the entire arm (being between the shoulder and wrist) or leg (being between the hip and the ankle).

“Other Fracture” means any fracture other than a simple fracture.

“Permanent” means lasting for 12 consecutive months after the expiry of which We consider there is no reasonable prospect of improvement.

“Permanent Total Disablement” means **Temporary Total Disablement** that has lasted for 12 consecutive months and at the expiry of that time is certified by a Medical Practitioner as:

- a. being beyond hope of improvement, and
- b. entirely preventing the Insured Person forever from engaging in any occupation, business, profession or employment for which the Insured Person is reasonably qualified by education, training or experience.

“Salary” means:

- a. in respect of a salaried Insured Person (not otherwise covered below), the average gross weekly income earned from personal exertion before personal deductions and income tax, but excluding bonuses, commissions, overtime payments and other allowances
- b. in respect of a T.E.C. (i.e. total employment cost) or Salary packaged Insured Person, the average gross weekly value of the income package earned from personal exertion (including, but not limited to, wages and/or Salary, motor vehicle and/or travelling allowances, club subscriptions and fees, housing loan or rental subsidy, clothing or meal allowances), before personal deductions and income tax, but excluding bonuses, commissions, overtime payments and other allowances, or

- c. in respect of a self-employed Insured Person, the average gross weekly income earned from personal exertion after the deduction of all business expenses necessarily incurred in earning that income and, in each case, derived during the six calendar months (or over such shorter period as they have been employed or self-employed) immediately preceding the Injury or Sickness giving rise to a claim under this Policy. Where bonuses, commissions, overtime payments and other allowances have been made on a more regular basis than annually and form part of an Insured Person’s total remuneration or Salary package, then these will be included within the Insured Person’s gross weekly income.

“Simple Fracture” means a fracture in which there is a basic and uncomplicated break in the bone and that, in the opinion of a Medical Practitioner, requires minimal and uncomplicated medical treatment.

“Usual Occupation” means the occupation predominantly performed by the Insured Person in the 12 months prior to the Injury or Sickness causing disability.

Extensions of Cover

1. Exposure

If the Insured Person is exposed to the elements as a result of an Accident whilst on a Journey, and within 12 months of the Accident suffers:

- a. from any of the Injury Types in the Benefits Table listed on the previous page, or
- b. Temporary Total Disablement or Temporary Partial Disablement as a direct result of that exposure, the Insured Person’s Injury will be deemed to have occurred on the date of the Accident.

2. Disappearance

If the Insured Person disappears on a Journey, following the disappearance, sinking or wrecking of a Conveyance in which the Insured Person was travelling and the Insured Person’s body has not been found within 12 months after the date of that disappearance, the Insured Person will be deemed to have died as a result of an Injury at the time of the disappearance, sinking or wrecking of the Conveyance.

If the Accidental Death benefit under the Benefits Table is payable because of a disappearance, We will only pay if the legal representatives of the Insured Person’s estate give Us a signed undertaking that these amounts will be repaid to Us, if it is later found that the Insured Person did not die as a result of an Injury.

3. Tuition expenses

Where We pay Temporary Total Disablement or Temporary Partial Disablement benefits, We will also reimburse expenses incurred for tuition or advice for the Insured Person from a licensed vocational school, provided such tuition or advice is undertaken with Our prior written agreement and the agreement of the Insured Person’s Medical Practitioner.

However, We will not cover expenses that can be covered by the Accident Compensation Corporation (ACC) or a private health insurer.

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

Conditions

1. The amount of any benefit payable for Temporary Total Disablement and Temporary Partial Disablement for each Insured Person will be limited to the amount stated in the Schedule and will be reduced by the amount of any:
 - a. periodic compensation benefits payable under any workers' compensation or accident compensation scheme, and
 - b. sick pay received or disability entitlement so that the total amount of any such benefit or entitlement and benefits payable under this Policy shall not exceed the actual Salary of the Insured Person or the limit stated in the Schedule, whichever is the lesser.
2. All benefits for Temporary Total Disablement and Temporary Partial Disablement will be payable monthly in arrears.
3. All benefits under this Section will be payable to The Company or such person or persons and in such proportions The Company shall nominate, unless otherwise specified in the Policy.
4. If, as a result of Injury, the Insured Person is entitled to Temporary Total Disablement or Temporary Partial Disablement benefits and subsequently becomes entitled to a benefit under Injury Types 2 or 3 under the Benefits Table, all benefits payable for Temporary Total Disablement and Temporary Partial Disablement will cease from the date of such entitlement.
5. The benefit payable in respect of an Insured Person under 18 years of age, or aged 75 years and over, for Injury Type 1 (Accidental Death) under the Benefits Table will be \$25,000 unless otherwise agreed to in writing by Us.
6. The benefit payable in respect of an Insured Person under the age of 18 years of age, for Injury Types 2-19 under the Benefits Table will be \$50,000 unless otherwise agreed to in writing by Us.
7. For an Insured Person aged 75 years and over, no benefit is payable for Injury Types 2-19 in the Benefits Table.
8. The Sum Insured in respect of an approved Nominated Person on Incidental Leisure or Pure Leisure Travel for Injury Types 1-19 under the Benefits Table will be \$50,000 unless otherwise agreed to in writing by Us.
9. In the event that the Accidental Death and Lump Sum Benefit Sum Insured, as shown in the Schedule, is linked to the Insured Person's Salary, and the Insured Person is not in receipt of a Salary or wage, the benefit payable will be limited to 50% of the maximum Accidental Death and Lump Sum Benefit Sum Insured as shown in the Schedule against their respective category of Insured Person.

We will not pay for:

1. benefits to the same Insured Person for more than one of Injury Types 1 to 19 in the Benefits Table, in respect of the same Injury. The Injury Type with the highest benefit payable will be paid out with respect of that Injury
2. benefits unless the Insured Person, as soon as possible after the Injury or first becoming aware of any Sickness that is likely to give rise to a claim under this Policy, obtains and follows proper medical advice from a Medical Practitioner
3. more than one of the surgical benefits described in Part B – Injury Resulting in Surgery in respect of any one Injury
4. more than one of the surgical benefits described in Part C – Sickness Resulting in Surgery in respect of any one Sickness
5. any Injury type or Sickness resulting in costs or expenses directly or indirectly related to an Existing Medical Condition

6. dental treatment caused by, or related to, the deterioration and/or decay of teeth or associated tissue; involving the use of precious metals; or involving cosmetic dentistry
7. pregnancy or childbirth except for serious, unexpected pregnancy complications or emergencies arising there from, which occur up until the 24th week of pregnancy i.e. up to 23 weeks, six days, or
8. any Injury type or Sickness where a Journey is undertaken:
 - a. against the advice of a Medical Practitioner
 - b. when the Insured Person is unfit to travel
 - c. where the purpose of the Journey is for the Insured Person to seek medical attention, treatment or review, or to participate in a clinical trial, or
 - d. after a Medical Practitioner informs an Insured Person that they are terminally ill prior to the Relevant Time, but only in respect of the Terminal Illness.

Also refer to: General terms and conditions, pages 18-19. General exclusions, pages 37-38.



SECTION 5: Loss of Income

We will pay

1. Due to Injury

Cover under this Section applies only if Sum Insured for Injury is specified in the Schedule under Section 5 – Loss of Income. We will pay the Insured Person either of the benefits described below when the Insured Person suffers an Injury and is unable to attend their usual place of employment in New Zealand as a direct result of an Accident and where the Injury occurs:

- a. on a Journey
- b. within 30 days of the Accident, and
- c. only as a direct result of the Accident (and not as a consequence of Sickness or disease).

1.1 Temporary Total Disablement as a result of Injury

After the Excess Period of 30 days, while the Insured Person suffers Temporary Total Disablement, We will pay an amount up to the weekly benefits Sum Insured specified in the Schedule, but not exceeding the Insured Person's Salary.

1.2 Temporary Partial Disablement as a result of Injury

After the Excess Period of 30 days, while the Insured Person suffers Temporary Partial Disablement, We will pay an amount up to the weekly benefits Sum Insured specified in the Schedule, less any amount of current earnings as a result of the Insured Person working in a reduced capacity, provided the combined amount does not exceed the Insured Person's Salary.

2. Due to Sickness

Cover under this Section applies only if the Sum Insured for Sickness is specified in the Schedule under Section 5 – Loss of Income. We will pay the Insured Person either of the benefits described below in the event that the Insured Person is diagnosed with a Sickness by a registered Medical Practitioner and is unable to attend their usual place of employment in New Zealand as a direct result of the Sickness and where Sickness occurs on a Journey.

2.1 Temporary Total Disablement as a result of Sickness

After the Excess Period of 30 days, while the Insured Person suffers Temporary Total Disablement, We will pay an amount up to the weekly benefits Sum Insured specified in the Schedule, but not exceeding the Insured Person's Salary.

2.2 Temporary Partial Disablement as a result of Sickness

After the Excess Period of 30 days, while the Insured Person suffers Temporary Partial Disablement, We will pay an amount up to the weekly benefits Sum Insured specified in the Schedule less any amount of current earnings as a result of the Insured Person working in a reduced capacity, provided the combined amount does not exceed the Insured Person's Salary.

Definitions

The following definitions shall apply to these words:

“Excess Period” means the waiting period expressed in days, before We make a payment. The period of days relevant to your Excess Period is specified under Excess Period in the Schedule.

“Salary” means:

- a. in respect of a salaried Insured Person (not otherwise covered below), the average gross weekly income earned from personal exertion before personal deductions and income tax, but excluding bonuses, commissions, overtime payments and other allowances

- b. in respect of a T.E.C. (i.e. total employment cost) or salary packaged Insured Person, the average gross weekly value of the income package earned from personal exertion (including, but not limited to, wages and/or Salary, car and/or travelling allowances, club subscriptions and fees, housing loan or rental subsidy, clothing or meal allowances), before personal deductions and income tax, but excluding bonuses, commissions, overtime payments and other allowances, or
- c. in respect of a self-employed Insured Person, the average gross weekly income earned from personal exertion after the deduction of all business expenses necessarily incurred in earning that income and, in each case, derived during the six calendar months (or over such shorter period as they have been employed or self-employed) immediately preceding the Injury or Sickness giving rise to a claim under this Policy. Where bonuses, commissions, overtime payments and other allowances have been made on a more regular basis than annually and form part of an Insured Person's total remuneration or Salary package, then these will be included within the Insured Person's gross weekly income.

“Temporary Partial Disablement” means the inability of the Insured Person to wholly and continuously engage in a substantial part of the Insured Person's usual occupation, and is under the regular care of, and acting in accordance with the instructions or advice of, a Medical Practitioner.

“Temporary Total Disablement” means the inability of the Insured Person to wholly and continuously engage in the Insured Person's usual occupation, and is under the regular care of, and acting in accordance with the instructions or advice of, a Medical Practitioner.

Extensions of Cover

1. Guaranteed payment

If the Insured Person sustains an Injury or suffers a Sickness for which Temporary Total Disablement benefits are payable, We will immediately pay six weeks' benefits, provided that proper medical evidence is received from a Medical Practitioner certifying that the total period of Temporary Total Disablement will be a minimum of 13 continuous weeks.

Conditions

1. The amount of any benefit payable for Temporary Total Disablement and Temporary Partial Disablement for each Insured Person will be limited to the amount stated in the Schedule and will be reduced by the amount of any:
 - a. periodic compensation benefits payable under any workers' compensation or accident compensation scheme, and
 - b. sick pay or disability entitlement received so that the total amount of any such benefit or entitlement and benefits payable under this Policy shall not exceed the actual Salary of the Insured Person or the limit stated in the Schedule, whichever is the lesser.
2. If as a result of Injury or Sickness, benefits become payable for Temporary Total Disablement or Temporary Partial Disablement and, while this Policy is in force, the Insured Person suffers a recurrence of Temporary Total Disablement or Temporary Partial Disablement from the same or a related cause or causes, the subsequent period of disablement will be deemed a continuation of the prior period unless, between such periods, the Insured Person has worked on a full-time basis for at least six consecutive months, in which case the subsequent period of disablement shall be deemed to have resulted from a new Injury or Sickness and a new Excess Period will be applied.

3. All benefits for Temporary Total Disablement and Temporary Partial Disablement, with the exception of cover provided under 'Guaranteed Payment' on the previous page, will be payable monthly in arrears.
4. Benefits for Temporary Total Disablement and Temporary Partial Disablement for a period of less than one week will be paid for at the rate of one-fifth of the weekly benefit for each day during which disablement continues.
5. All benefits under this Section will be payable to The Company or such person or persons and in such proportions as the The Company nominates to Us.
6. If, as a result of Injury, the Insured Person is entitled to Temporary Total Disablement or Temporary Partial Disablement benefits and subsequently becomes entitled to a benefit under Injury Type 2 (Permanent Total Disablement) or Injury Type 3 (Permanent paraplegia, quadriplegia or incurable paralysis of all Limbs) as listed in the Benefits Table under Part A – Accidental Death and Lump Sum Benefits in Section 4 – Personal Accident and Sickness, all benefits payable for Temporary Total Disablement and Temporary Partial Disablement will cease from the date of such entitlement.

We will not pay for:

1. any claim for Dependent Child(ren)
2. any claim for Nominated Persons
3. benefits payable in excess of the maximum Weekly Benefit Period specified in the Schedule in respect of any one Injury and/or Sickness
4. any amount for Temporary Total Disablement and/or Temporary Partial Disablement during the first 30 days from the commencement date of the Injury or Sickness
5. any amount that exceeds the Insured Person's actual Salary
6. any claims where the Insured Person has not, as soon as possible after the Injury or first becoming aware of the Sickness that is likely to give rise to a claim under this Policy, obtained and followed proper medical advice from a Medical Practitioner
7. any claims for Temporary Total Disablement or Temporary Partial Disablement in respect of any Injury or Sickness which is directly or indirectly related to an Existing Medical Condition, or
8. any claims for Temporary Total Disablement or Temporary Partial Disablement in respect of any Sickness, which is wholly or partly attributable to childbirth or pregnancy, except for unexpected medical complications or emergencies arising there from.

Also refer to: General terms and conditions, pages 18-19.

General exclusions, pages 37-38.

SECTION 6: Travel Disruption

1. Loss of Deposits

We will pay

If, during the Period of Insurance and before the commencement of a Journey, The Company or the Insured Person incurs loss of prepaid travel and accommodation expenses, We will reimburse The Company or the Insured Person the lesser of:

1. the non-refundable unused portion of travel and accommodation expenses paid in advance, or
2. any reasonably incurred Additional travel or accommodation expenses incurred, less any applicable refunds, to make alterations to the original Journey arrangements to travel at another time,

up to the amount shown in the Schedule against Loss of Deposits following necessary cancellation or alteration of the Insured Person's Journey due to:

- a. the Insured Person's unexpected death, Injury or Sickness, which results in the Insured Person being certified by a Medical Practitioner as being unable to commence the Journey
- b. the unexpected death or Serious Injury or Serious Sickness of the Insured Person's non-travelling Relative or Close Business Colleague, or
- b. any other unforeseen circumstances outside The Company or the Insured Person's control, other than those circumstances described in a or b above or specifically described elsewhere in this Policy.

Conditions

1. Any loss of travel and accommodation expenses covered above, which were purchased through the use of frequent flyer or similar reward points, will be reimbursed as follows:
 - a. for points lost following cancellation of your airline ticket, the amount We will pay is calculated as follows:
 - i. the cost of the equivalent class airline ticket, based on the best available advance purchase airfare at the time the claim is processed, less The Company or Insured Person's financial contribution towards the airline ticket, multiplied by
 - ii. the total amount of points lost, divided by
 - iii. the total amount of points used to obtain the airline ticket.
2. Benefits under Loss of Deposits cover in this Section are limited to a maximum of \$5,000 in respect of an Insured Person aged 75 years or more.

2. Cancellation and Curtailment

We will pay

If, during the Period of Insurance and whilst on a Journey, The Company or the Insured Person, incurs a loss of travel and accommodation expenses paid in advance and/or necessarily incurs any reasonable and unbudgeted Additional travel and accommodation expenses, following necessary cancellation, alteration or incompletion of the Insured Person's Journey due to:

- a. the Insured Person's unexpected death, Injury or Sickness, which results in the Insured Person being certified by a Medical Practitioner as being unable to continue the Journey, or

- b. the unexpected death or Serious Injury or Serious Sickness of the Insured Person's non-travelling Relative or Close Business Colleague, We will reimburse The Company or the Insured Person either of the:
 - i. non-refundable unused portion of travel or accommodation arrangements, or
 - ii. reasonably incurred Additional travel or accommodation expenses,
 up to the Sum Insured shown in the Schedule against Cancellation and Curtailment.

Conditions

1. Any loss of travel and accommodation expenses covered above that were purchased through the use of frequent flyer or similar reward points will be reimbursed as follows:
 - a. for points lost following cancellation of an airline ticket, We will pay:
 - i. the cost of the equivalent class airline ticket, based on the best available advance purchase airfare at the time the claim is processed, less your financial contribution towards the airline ticket, multiplied by
 - ii. the total amount of points lost, divided by
 - iii. the total amount of points used to obtain the airline ticket.
2. Benefits under Cancellation and Curtailment cover in this Section are limited to a maximum of \$5,000 in respect of an Insured Person aged 75 years or more.

3. Missed Transport Connection

We will pay

If, during the Period of Insurance and whilst on a Journey, the Insured Person misses a pre-booked public transport connection due to any unforeseen circumstances outside the Insured Person's control, where The Company or the Insured Person has allowed the minimum time between transport connections as stipulated by the Transport Provider and, as a result, the Insured Person has to catch up on their planned itinerary or would be unable to arrive at an officially scheduled meeting, conference, wedding or sporting event that cannot be delayed, We will pay the reasonable extra transport expenses incurred (net of any recoveries that The Company or the Insured Person may be entitled to receive). This will cover the use of alternative public transport to enable the Insured Person to arrive at their destination at the scheduled time, up to the Sum Insured shown in the Schedule against Missed Transport Connection.

Conditions

1. If The Company or the Insured Person claims under this benefit, The Company or the Insured Person is not entitled to make a claim under any other benefit in this Section or any other Section of this Policy for the same incident.

Extensions of Cover

1. Travel Delay

If the Insured Person's pre-booked transport is temporarily delayed whilst on a Journey for at least six hours due to an unforeseeable circumstance outside the Insured Person's control, We will reimburse the Insured Person up to \$400 for reasonable Additional transport and accommodation (room rate only) expenses. We will also reimburse up to these limits again for each full 24 hour period that the delay continues beyond the initial six hour delay.

The maximum benefit limit for this section is shown in the Schedule against Travel Delay under Section 6 – Travel Disruption.

2. Fire, earthquake or flood benefit

We will pay the reasonable Additional transport expenses at the same fare class as originally booked for the Insured Person's early return to New Zealand if the Insured Person's Home is destroyed by fire, earthquake or flood while the Insured Person is on their Journey.

3. Other circumstances

We will pay the Insured Person or The Company reasonable accommodation (room rate only) and Additional transport expenses, at the same fare class and accommodation standard as originally booked, incurred on the Journey due to an unforeseeable circumstance outside the Insured Person or The Company's control. This may have resulted from:

- a. disruption of the Insured Person's transport because of riot, strike or civil commotion occurring after the commencement of the Journey, provided the Insured Person acts reasonably in avoiding Additional transport and accommodation expenses
- b. loss of passport or Travel Documents, except involving government confiscation or articles sent through the mail
- c. a quarantine regulation that the Insured Person unknowingly breaches
- d. a collision of the Conveyance in which the Insured Person is travelling, or
- e. the Insured Person's Scheduled transport being delayed for at least 12 hours due to severe weather conditions.

Conditions

1. The Insured Person or The Company must claim from the Transport Provider first, and provide Us with written confirmation from the Transport Provider of the cause and period of the delay and the amount of compensation offered by them. The Insured Person or The Company must also provide Us with receipts for Additional accommodation (room rate only) expenses incurred.

We will not pay for:

1. any costs incurred when the Insured Person is travelling:
 - a. against the advice of a Medical Practitioner
 - b. when unfit to travel
 - c. to seek medical advice, treatment or review, or to participate in a clinical trial, or
 - d. after a Medical Practitioner informs an Insured Person that they are terminally ill prior to the Relevant Time, but only in respect of the Terminal Illness
2. any costs recoverable by The Company and/or the Insured Person from any other source, e.g. airlines or other insurance
3. Transport Provider caused cancellations, delays or rescheduling other than when caused by weather, mechanical failure or strike
4. costs arising directly or indirectly out of:
 - a. cancellation, curtailment or diversion of scheduled public transport services, including by reason of strikes or other industrial action, if there had been warning before the date the Journey was booked that such events were likely to occur
 - b. Transport Provider caused delays or cancellations where the expenses are recoverable from the Transport Provider
 - c. any business or financial or contractual obligations of The Company, the Insured Person or any other person
 - d. disinclination or change in plans on the Insured Person's part or of any other person to travel

- e. the inability of any tour operator or wholesaler to complete arrangements for any Journey or tour due to a deficiency in the required number of persons to commence any Journey or tour
 - f. the refusal, failure or inability of any person, company or organisation, including but not limited to any Transport Provider, hotel, car rental agency, tour or cruise operator, travel wholesaler, booking agent or other provider of travel or tourism-related services, facilities or accommodation, to provide services, facilities or accommodation, by reason of their own financial default or the financial default of any person, company or organisation with whom or with which they deal
 - g. cancellation, curtailment or amendment of a Journey resulting directly or indirectly from not having the appropriate passport, entry visa or work permit documentation required by any foreign government or foreign power
 - h. Additional transport and accommodation expenses, which are payable under another Section or benefit of this Policy, or
 - i. Civil War in circumstances where the Civil War was in existence or there had been a published warning that such events were likely to occur prior to the Insured Person booking their Journey, or
5. claims under Section 6, Extensions of Cover, Part 3. Other Circumstances arising from an Epidemic, Pandemic or outbreak of an infectious disease or any derivative or mutation of such viruses, or the threat or perceived threat of any of these.

**Also refer to: General terms and conditions, pages 18-19.
General exclusions, pages 37-38.**

SECTION 7: Luggage, Travel Documents and Money

Your belongings

When you are at Home or your business, you look after your belongings. When you travel it should be no different. Unfortunately, many claims We see for loss or theft are caused by people being careless with their belongings.

If the Insured Person does not take good care of their belongings We may not be able to pay the claim. Not all belongings are covered by the Policy.

What does this mean?

- Keep Valuables with you (where security regulations allow you to do so) rather than checking them in with the Transport Provider.
- Do not leave Valuables in a motor vehicle at any time. “Valuables” means articles made of or containing gold, silver or precious metals; binoculars; jewellery; mobile phones; photographic, audio, video, drones, tablet computer, computer and electronic equipment of any kind (including computer games, portable navigation equipment or media), precious stones; smart phones; telescopes and watches.
- A maximum limit of \$2,000 applies to all other items left during the day in the boot of a locked motor vehicle. Also, do not leave items in a motor vehicle overnight as they are not covered.
- Report any loss or theft to the police within 24 hours as an original police report is required for any claim involving loss or theft.

Additionally, We require the relevant report from the related party. For example, an Airline Property Irregularity Report (PIR) is also required if the Insured Person’s items were lost or stolen when travelling with an airline.

1. Loss, Theft or Damage of Luggage and Property, Money and Travel Documents

We will pay

If, whilst on a Journey, the Insured Person:

- a. sustains loss of, theft of or damage to Luggage, Electronic Equipment, Money or Travel Documents, We will, after deducting reasonable depreciation (where applicable and as determined by Us), replace, provide a replacement voucher, repair or pay the Insured Person the monetary value of the item up to the corresponding Sum Insured shown in the Schedule for Luggage, Electronic Equipment, Money or Travel Documents against Section 7 – Luggage, Travel Documents and Money, or
- b. accidentally loses or suffers theft of Money from their person, or from a locked safe, We will reimburse the Insured Person for the lost or stolen Money up to the Sum Insured shown in the Schedule under Money against Section 7 – Luggage, Travel Documents and Money.

We may, at Our sole discretion, choose to repair, replace, or pay the Insured Person or The Company the monetary value of the articles claimed under this section.

Our payment will not exceed the original purchase price of an item, with a limit for any one item, set or pair of items including attached and unattached accessories for portable Electronic Equipment, camera and video camera equipment.

For example a camera, camera accessories, lenses and tripod (attached or not) are considered one item. A necklace and pendant are considered one item.

The maximum limit per insured item of personal Luggage and Business Property is shown in the Schedule. The limit can be increased by up to \$10,000 per single item if the item is separately specified and the appropriate additional amount paid.

2. Delayed Luggage Allowance

We will pay

If, whilst on a Journey, the Insured Person's Luggage is delayed, misdirected or temporarily mislaid by any Transport Provider for more than eight consecutive hours, We will reimburse any reasonable expenses incurred by the Insured Person in purchasing essential replacement clothing and toiletries, up to the corresponding Sum Insured shown in the Schedule for Delayed Luggage Allowance against Section 7 – Luggage, Travel Documents and Money.

We will only pay for purchases made before the Insured Person's Luggage is returned to them.

Extensions of cover

1. Automatic Reinstatement of Sum Insured

In the event that a claimable loss, or damage to the Insured Person's personal Luggage and Business Property is incurred, We will allow the Insured Person one automatic reinstatement during the same Journey, of the Sum Insured stated in the Schedule against Section 7 – Luggage, Travel Documents and Money.

2. Increase Luggage Limits

The Company may increase the per item limit by specifying individual items for personal Luggage and Business Property and paying an additional amount to increase cover for items that are valued at more than the limit shown against Section 7 – Luggage, Travel Documents and Money.

The maximum amount by which The Company may increase the total limit for personal Luggage and Business Property is shown in the Schedule for Increase Luggage Limit against Section 7 – Luggage, Travel Documents and Money. For specified items, the additional amount payable is 5% of the item value. The Excess for each Specified Item above the personal Luggage and Business Property item limit is 10% of the item's nominated value.

Receipts and/or valuations must be provided as proof of value of the items in the event of a claim.

Conditions

1. The Insured Person must take all reasonable precautions for the safety and supervision of all personal Luggage and Business Property, Electronic Equipment, Travel Documents and Money.
2. The Insured Person must report all loss or damage attributable to theft, vandalism or loss or damage by Transport Providers to the local police or appropriate authority as soon as possible after the discovery of the loss, so that a written report is available at the time of making any claim.
3. In the event that a payment is made under this Section in respect of any property, We will be entitled to take and keep possession of such property for which a claim has been paid and to deal with it in any manner We see fit.
4. In respect of delayed Luggage allowance, the original receipts for the items purchased and written confirmation of the length of delay from the Transport Provider must be produced in support of any claim. If the Insured Person's Luggage is not ultimately returned to the Insured Person any amount claimable under Section 7.2 Delayed Luggage Allowance will be deducted from any entitlement under Section 7.1 Loss, Theft or Damage.
5. The maximum amount We will indemnify The Company or the Insured Person in respect of loss arising from the unauthorised or fraudulent use of Money or Travel Documents is \$3,000.

6. The maximum amount We will pay for any one item, set or pair of items is shown in the Schedule for Luggage, Business Property, Electronic Equipment Travel Documents and Money against Section 7 – Luggage, Travel Documents and Money.
7. The maximum amount payable in respect of an approved Nominated Person for loss of, theft of or damage to, Luggage, Electronic Equipment, Money or Travel Documents whilst on Pure Leisure or Incidental Leisure Travel shall be \$5,000, unless otherwise agreed to by Us in writing.
8. If the Electronic Equipment is a mobile phone or tablet device, We will only pay the cost of the replacement phone and not any contractual obligations that may exist.
9. An Excess of \$250 will apply for each claim for the loss of, theft of or damage to, Electronic Equipment, unless otherwise specified in the Schedule against Electronic Equipment.
10. The Insured Person must report any loss or theft of a mobile phone to the service provider to have the device blocked using The International Mobile Station Equipment Identity (IMEI) number, and provide confirmation the device has been blocked from the service provider when submitting a claim.
11. An Excess of 10% of the item's value will apply for each loss of a Specified Item.

We will not pay for:

1. any loss, damage or expenses in respect of Luggage, Business Property, Electronic Equipment, Money or Travel Documents:
 - a. due to confiscation by customs or any other lawful authority where the Insured Person's use, and/or possession of such item/s is unlawful, or
 - b. recoverable by The Company and/or the Insured Person from any other source, e.g. airlines or other insurance
2. any loss, damage or expenses, in respect of Luggage, Business Property, Valuables and Electronic Equipment:
 - a. shipped under any freight agreement or sent by postal or courier services
 - b. to vehicles or their accessories (except keys)
 - c. to any goods intended for trade or sale
 - d. to information stored on any electronic device or other media, including digital photos, downloaded files, electronic applications, programmed data, software or any other intangible asset
 - e. caused by atmospheric or climatic conditions, wear and tear, vermin or any process of cleaning, repairing, restoring or alteration
 - f. caused by an electrical or mechanical breakdown
 - g. due to scratching or breaking of fragile or brittle articles
 - h. left Unattended in a Public Place
 - i. left Unattended in any motor vehicle unless stored in the boot and forced entry is gained, or
 - j. left Unattended in any motor vehicle between 10pm and 6am (even if in the boot)
3. any loss, damage or expenses in respect of Electronic Equipment:
 - a. where theft or attempted theft occurs whilst such Electronic Equipment is left Unattended, unless securely locked inside a building or securely locked out of sight inside a motor vehicle (unless The Company and/or the Insured Person has no option other than to leave the equipment Unattended due to an emergency medical, security or evacuation situation), or

- b. where loss or damage occurs whilst carried in or on any aircraft, aerial device, bus, waterborne vessel or craft, unless they accompany the Insured Person as personal cabin Luggage.

This exclusion will not apply in circumstances where the Insured Person is prohibited from carrying the Electronic Equipment as personal cabin Luggage by the Transport Provider, provided that, where the Insured Person is prohibited, the Electronic Equipment is locked securely within the Insured Person's checked Luggage

- 4. any loss, damage or expenses in respect of Money and Travel Documents:
 - a. arising out of devaluation of currency or shortages due to errors or omissions during monetary transactions
 - b. in respect of cheques, bank notes, postal and money orders, credit cards, or coupons unless reported to the issuing authority as soon as reasonably practicable after the discovery of the loss or damage, or
 - c. in respect of loss of coins and bank notes in excess of the amount allowed by any applicable currency regulations at the time of the commencement of the Journey
- 5. any loss, damage or expenses in respect of Valuables:
 - a. placed in the care of a Transport Provider, or
 - b. left Unattended in any motor vehicle at any time (even if in the boot)
- 6. any loss, damage or expenses in respect of drones (including attached and unattached accessories) whilst in use
- 7. any loss, damage or expenses in respect of surfboards or waterborne craft of any description. This exclusion does not apply if the item is lost, stolen or damaged while in the custody of the Transport Provider, or
- 8. any loss, damage or expenses in respect of sporting equipment whilst in use.

Also refer to: General terms and conditions, pages 18-19. General exclusions, pages 37-38.

SECTION 8: Rental Car Insurance Excess Waiver

We will pay

1. Rental Car Insurance Excess Waiver

We will reimburse the Insured Person or The Company for any Excess, deductible or claim below the Excess that would have been payable, up to the Sum Insured, shown in the Schedule against Section 8 – Rental Car Insurance Excess waiver, that either the Insured Person or The Company is legally liable to pay in respect of loss of, or damage to, a Rental Car during a Journey, where the Insured Person:

- a. hires a Rental Car
- b. is the nominated driver on the Rental Car agreement, and
- c. has comprehensive motor vehicle insurance for the Rental Car for the hire period.

2. Personal Car Excess Waiver

If, during the Period of Insurance and whilst on a Journey, the Insured Person suffers:

- 1. theft of their personal car, or
- 2. damage to their personal car whilst driving it for business purposes, We will reimburse the Insured Person, for:
 - a. the prescribed Excess paid under the Insured Person's comprehensive car policy of insurance, relative to the loss or damage to their personal car and which is not legally recoverable from any other source
 - b. the actual costs paid for any repairs to the car should they be less than the prescribed Excess applicable under the Insured Person's comprehensive car policy of insurance, relative to the damage to their personal car and which is not legally recoverable from any other source
 - c. any substantial cumulative loss of any no claim bonus, in the year the claim is made, not otherwise recoverable occurring as a result of the loss or damage to the Insured Person's personal car, or
 - d. the cost of hiring a similar car up to \$500 per week, in the event that the Insured Person has lost total use of the their personal car.

The maximum amount We will pay in respect to any one event involving the Insured Person's personal car is up to:

- i. \$2,000 for a. and b. above as a combined maximum limit, and
- ii. \$2,500 for c. and d. in addition to any claims made under a. and/or b.

Extension of cover

Increase Rental Car Insurance Excess waiver

The Rental Car Insurance Excess waiver that is automatically provided is shown in the Schedule. This amount can be increased by up to \$3,000 by paying an additional premium as follows:

| | | | | | | |
|-----------------------------|-------|---------|---------|---------|---------|---------|
| Extra cover | \$500 | \$1,000 | \$1,500 | \$2,000 | \$2,500 | \$3,000 |
| Extra amount payable | \$25 | \$50 | \$75 | \$100 | \$125 | \$150 |

Conditions

It is the Insured Person or The Company's responsibility to provide the final loss/repair report to substantiate the claim.

In the event of a claim in respect of the Insured Person's personal car, they must supply Us with:

1. receipts (or copies) for the amount of the claim or Excess paid and the name of the firm who carried out the repairs on the Insured Person's personal car, and
2. a letter from the Insured Person's car insurer stating the amount of the Excess paid and the dollar amount of any no claim bonus forfeited (stating that the no claim bonus has dropped from e.g. 60% to 40% is insufficient. The actual amount of money involved is also required including a copy of the last insurance renewal notice applicable to the Insured Person).

We will not pay for:

1. any use of the Rental Car or the Insured Person's personal car that is in violation of the terms of the rental agreement or applicable comprehensive car insurance policy
2. the Insured Person being in charge of a Rental Car or their personal car whilst under the influence of legally intoxicating alcohol and/or drugs (unless taken or administered on medical advice) in excess of that permitted by law at the time and place of the incident
3. the illegal or criminal use of a Rental Car or the Insured Person's personal car by The Company or the Insured Person
4. the use of the Rental Car or the Insured Person's personal car on any roadway that is inaccessible to two-wheel-drive vehicles
5. the use of the Rental Car or the Insured Person's personal car by the Insured Person without holding a valid local or recognised international licence for the country the car is being operated in
6. any Rental Car or personal car that is not comprehensively insured, or
7. administration costs or loss of use penalties.

Also refer to: General terms and conditions, pages 18-19.

General exclusions, pages 37-38.

SECTION 9: Alternative Employee/Resumption of Assignment Expenses

We will pay

If, during the Period of Insurance, The Company necessarily incurs Alternative Employee Expenses or Resumption of Assignment Expenses as the direct result of:

- a. an Insured Person unexpectedly dying or suffering an Injury or Sickness whilst on a Journey, or
- b. a claim being admitted under Section 6.2 – Cancellation and Curtailment

We will reimburse The Company for such expenses up to the Sum Insured shown in the Schedule against Alternative Employee/Resumption Of Assignment Expenses.

Conditions

1. Expenses will be limited to an economy class air flight (or business if that was the class of ticket used by the Insured Person on the original Journey) and other reasonable incidental expenses incurred in such transportation of the Insured Person.
2. If a benefit is paid for Alternative Employee Expenses, then no benefit shall be payable for Resumption of Assignment Expenses for the same event.
3. The alternative Employee will, for the purpose of this Policy, be deemed entitled to benefits under this Policy whilst on the replacement Journey, subject to the terms and conditions of the Policy and provided the alternative Employee complies with requirements of the duty of disclosure.

We will not pay for:

1. any costs incurred when the Insured Person is travelling:
 - a. against the advice of a Medical Practitioner
 - b. when unfit to travel
 - c. to seek medical advice, treatment or review, or to participate in a clinical trial, or
 - d. after a Medical Practitioner informs an Insured Person that they are terminally ill prior to the Relevant Time, but only in respect of the Terminal Illness
2. any expenses under this Section if we have repatriated an Insured Person under Section 13 – Political Unrest and Natural Disaster Evacuation
3. any expenses that The Company or the Insured Person had paid, budgeted for or incurred prior to the commencement of a Journey as part of the original travel budget allocation for that Journey.

Also refer to: General terms and conditions, pages 18-19.

General exclusions, pages 37-38.

SECTION 10: Kidnap and Ransom

We will pay

If, whilst on a Journey, the Insured Person is Kidnapped, We will reimburse the The Company for Extortion/Ransom Monies paid up to the Sum Insured shown in the Schedule against Section 10 – Kidnap and Ransom. We will also pay The Company for:

1. loss due to destruction, disappearance, seizure or usurpation of Extortion /Ransom Monies while being delivered to a person demanding those monies by anyone who is authorised by The Company or Insured Person to have custody thereof, provided that the Kidnapping or Extortion that gave rise to the delivery is insured under this Section
2. the amount paid by The Company for other expenses resulting directly from a Kidnapping or Extortion occurring during the Period of Insurance. Other expenses are the following:
 - a. Reasonable payment made by The Company to a person providing information that leads to the arrest of the individuals responsible for a Kidnap or Extortion insured under Section 10 – Kidnap and Ransom
 - b. Reasonable and customary loan costs incurred by The Company from a financial institution providing money to be used for payment of Extortion/Ransom Monies
 - c. Reasonable and customary travel and accommodation costs incurred by The Company or an Insured Person as a result of a Kidnap or Extortion
 - d. The payments in paragraphs a, b and c above shall be inclusive of, and not in addition to, the benefit amount shown in the Schedule against Section 10 – Kidnap and Ransom
 - e. Salary paid by The Company to an Insured Person or on behalf of an Insured Person who is the victim of a Kidnap or Extortion:
 - i. for up to 60 days after the release of the Insured Person from a Kidnap
 - ii. until discovery of the death of the Insured Person
 - iii. for up to 180 days after The Company receives the last credible evidence that the Insured Person is still alive, or
 - iv. for up to 60 months from the date of the Kidnap, if the victim has not been released.
 - f. Payments made by The Company for a temporary replacement Employee hired to perform the duties of a Kidnap victim for the duration of a Kidnap and upon release, for a further 30 day period, but does not include payments made more than 60 months from the date of the Kidnap
 - g. Personal financial loss suffered by the Insured Person
 - h. Travel costs of a Kidnap victim to join their family upon release and the travel costs of an Employee to replace the Kidnap victim. Travel costs will be at the economy fare and We will only pay one fare per Insured Person and replacement person per Kidnap
 - i. Reasonable and customary fees and expenses of a qualified interpreter assisting The Company or an Insured Person in the event of a Kidnap or Extortion
 - j. Any other reasonable and customary expenses incurred by The Company with Our prior approval in resolving a Kidnap or Extortion insured under this Section
3. the reasonable costs of retaining independent security consultants to investigate the Kidnapping, negotiate the Insured Person's release and pay any ransom or Insured Person's recovery, provided that We have given Our prior written consent to the use of such consultants

4. the reasonable costs (other than The Company's own internal costs) incurred for engaging image and/or public relations consultants, and/or costs associated with the release of information through the media, to help protect and/ or positively promote The Company's business and corporate image, up to a maximum of \$10,000 for any one Kidnapping. Costs must be incurred within 15 days of, and be directly in connection with, such Kidnapping
5. the cost of trauma counselling, which is provided by a Registered Psychologist or Registered Psychiatrist (who is not an Insured Person or their Relative) to an Insured Person who was the victim of a Kidnapping, where the treatment is provided outside New Zealand and certified as necessary by a Medical Practitioner for the wellbeing of the Insured Person. The maximum amount We will pay is up to \$500 per visit, up to a maximum of \$5,000 per Insured Person.

The payments in paragraphs 1, 2 and 3, above, shall be inclusive of, and not in addition to, the benefit amount shown on the Schedule against Section 10 – Kidnap and Ransom.

Limit of Liability

Our total liability for all claims under this Section arising out of any one event, or series of related events, will not exceed the Limit of Liability for Section 10 specified in the Schedule.

Conditions

1. The Company and each Insured Person will make a reasonable effort not to disclose the existence of this insurance.
2. The maximum aggregate amount payable under this Section is limited to the Sum Insured shown in the Schedule for Section 10 – Kidnap and Ransom.
3. A joint kidnap of more than one Insured Person will be considered a single kidnap.

We will not pay for:

1. any loss resulting from the surrender of Money or property as the result of a face-to-face encounter involving the use or threat of force or violence, unless such monies or property are Extortion/Ransom Monies being stored or transported for the purpose of paying an Extortion or Kidnap demand
2. any loss from the Kidnap or Extortion of an Insured Person permanently residing or staying for more than 180 consecutive days in the country where the Kidnap or Extortion occurs
3. any fraudulent or dishonest act committed by The Company, an Insured Person or any person The Company authorises to have custody of Extortion/Ransom Monies
4. any claim if, prior to the issue of the policy, the Insured Person, The Company or a related body corporate has:
 - a. had Kidnap insurance declined, cancelled or issued with special conditions in the past
 - b. suffered a Kidnapping or attempted Kidnapping in the past, or
 - c. been subject to an extortion demand
5. any claim arising from any Kidnapping occurring in an "Avoid non-essential travel" area or "Do not travel" area as listed on the Safe Travel website (safetravel.govt.nz)
6. any legal liability for damages and costs, and any legal expenses incurred as a result of any suit, legal claim or proceedings brought by any person and arising out of a Kidnapping or the manner in which it is responded to or dealt with, or
7. any losses or expenses arising from the interruption of, or interference with, business activity.

**Also refer to: General terms and conditions, pages 18-19.
General exclusions, pages 37-38.**

SECTION 11: Hijack and Detention

We will pay

1. an allowance as specified in the Schedule for each 24 hour period that, whilst on a Journey, the Insured Person is Detained as a result of a Hijack of a means of Public Transport or is Detained by any government, state or other lawful authority, for any reason (other than any Detention attributable to the insured Person breaking the law of any country or state), and
2. any of the Insured Person's personal legal costs incurred as a result of being Detained, up to a maximum specified in the Schedule.

**Also refer to: General terms and conditions, pages 18-19.
General exclusions, pages 37-38.**

SECTION 12: Personal Liability

We will pay

If, whilst on a Journey, the Insured Person becomes legally liable to pay damages in respect of either:

1. bodily Injury including death or illness to any person, or
2. loss of, or damage to, tangible property and such Injury or damage is Accidental, We will indemnify the Insured Person up to the Limit of Liability shown in the Schedule against Section 12 – Personal Liability:
 - a. against such damages, and
 - b. any legal costs and expenses, which are recoverable by a claimant from the Insured Person and/or incurred with Our written consent in the investigation or defence of any claim as a direct result of the Accidental event, as part of the amount shown on the Schedule against Section 12 – Personal Liability.

Conditions

1. No admission, offer, promise, payment or indemnity will be made without Our written consent.
2. We will be entitled to take over and conduct in the Insured Person's name the defence or settlement of any claim and We will have full discretion in the handling of any proceedings.
3. We may, at any time, pay to the Insured Person, in connection with any claim or series of claims arising from the one original cause, the Limit of Liability shown in the Schedule against Section 12 – Personal Liability (after deducting any amount(s) already paid as compensation) or any lesser amount for which such claim(s) can be settled. Upon such payment being made, We will be under no further liability in connection with such claim(s), except for paying costs and expenses recoverable or incurred prior to the date of such payment.

We will not pay for:

1. liability the Insured Person must pay to any person arising in the course of the Insured Person's employment, contract of service, voluntary work, work experience, apprenticeship or consultancy with the Insured Person
2. Injury to any person who is the Insured Person's travelling companion, Relative or any other Relatives ordinarily residing with the Insured Person
3. loss of, or damage to, property belonging to or held in trust by, or in the custody or control of, The Company or Insured Person, or any of The Company's Employees
4. Injury, loss or damage caused directly or indirectly by, through or in connection with, any mechanically-propelled vehicle (with the exception of golf buggies and motorised wheelchairs), drone, firearm, aircraft or watercraft
5. Injury, loss or damage to property caused by or arising from:
 - a. the nature of products sold by The Company or Insured Person
 - b. advice furnished by The Company or Insured Person, or
 - c. the conduct of The Company or Insured Person's business, trade or profession
6. any liability assumed under contract unless such liability would have arisen in the absence of such contract
7. aggravated, exemplary or punitive damages or the payment of any fine or penalty
8. any sexually transmitted or transmissible disease, or infection or virus of any sort emanating from a sexually transmitted or transmissible disease
9. any willful, malicious or unlawful act or omission



10. loss of, or damage to, property owned by the Insured Person or any of the Insured Person's travelling companions, Relatives or other Relatives ordinarily residing with the Insured Person, or
11. loss of, or damage to, personal or Business Property in the control of the Insured Person or the Insured Person's Relatives or other Relatives ordinarily residing with the Insured Person.

Also refer to: General terms and conditions, pages 18-19.

General exclusions, pages 37-38.

SECTION 13: Political Unrest and Natural Disaster Evacuation

If, whilst on a Journey:

1. the Insured Person is recommended to leave the country in which they are travelling by officials in that country due to political unrest
2. the New Zealand Government issues a travel warning through its Ministry of Foreign Affairs and Trade that recommends certain categories of persons, which categories include the Insured Person, should leave that country due to political unrest
3. the Insured Person is expelled from or declared 'persona non grata' in that country
4. there is wholesale seizure, confiscation or expropriation of the Insured Person's property, plant or equipment in that country, or
5. a major Natural Disaster has occurred in the country the Insured Person is in, necessitating their immediate evacuation to avoid risk of Injury or Sickness to themselves, We will pay the cost of the Insured Person's:
 - a. return to their Home or the nearest place of safety using the most reasonably available method of transport, which has been pre-approved by Our emergency assistance service, or
 - b. reasonable accommodation costs for up to 14 days if the Insured Person is unable to return Home.

Limit of Liability

Our total liability for all claims arising under this Section, which arise out of any one event or series of related events, will not exceed the Aggregate specified in the Schedule against Section 13 – Political Unrest and Natural Disaster Evacuation.

Conditions

1. If the Insured Person is required to leave the country they are travelling in, Our emergency assistance service must be contacted beforehand to confirm cover. Where possible, Our emergency assistance service will make the travel arrangements and, in all cases, We will decide where to send the Insured Person.
2. Where We have repatriated the Insured Person under this Section there is no cover under Alternative Employee/ Resumption Of Assignment in Section 9.

We will not pay for:

any claim arising directly or indirectly from:

1. the Insured Person violating the laws or regulations of the country the Insured Person is travelling in
2. any failure on the Insured Person's part to produce or maintain necessary immigration, work, residence or similar visas, permits or other documentation
3. debt, Insolvency, commercial failure, repossession of property by a titleholder or any other financial cause
4. failure to honour any contractual obligation or bond or to obey any conditions in a license

5. the Insured Person being a national of the country from which they are to be evacuated
6. the political unrest or Natural Disaster that resulted in the Insured Person's evacuation being in existence prior to the Insured Person entering the country
7. the political unrest or its occurrence being foreseeable to a reasonable person before the Insured Person entered the country
8. political unrest in circumstances where there had been published warning prior to the Insured Person entering the country that such events were likely to occur, or
9. any expenses that The Company or the Insured Person had paid, budgeted for or incurred as part of the original travel budget allocation for that Journey, such as cost of meals.

Also refer to: General terms and conditions – pages 18-19.

General exclusions – pages 37-38.

SECTION 14: Additional Benefits

The following additional benefits are available only to an Insured Person(s) covered under the **Corporate Gold** and **Corporate Platinum** plans.

To verify which type of cover you have, contact The Company Intermediary or Cover-More on 0800 500 225.

The Corporate Travel Insurance Policy plan is also shown in the Schedule of benefits.

1. Court Attendance

In the event a court requires the Insured Person to attend court in connection with an event that has resulted in a valid claim under Section 12 – Personal Liability, We will pay the Insured Person \$100 per day for each day the Insured Person attends court in relation to that event, up to a maximum of \$1,000 per insured person.

2. Independent Financial Advice

If the Insured Person sustains an Injury for which benefits are payable under Section 4 – Personal Accident and Sickness, for Injury Types 1–9 under the Benefits Table, We will, in addition to paying the benefit, and at the Insured Person's request, pay for professional financial advice in respect of the payment of the benefit. Such advice will be provided by an independent financial adviser who is not the Insured Person's Relative or any other Relative, and who is authorised and regulated by the Financial Markets Authority New Zealand (FMA) to provide such financial advice. The maximum amount We will pay is \$5,000.

3. Spouse or Partner Accidental Death Benefit

If, whilst the Insured Person is on a Journey, their Spouse or Partner (who is not travelling with the Insured Person) suffers an Accidental Death, We will pay the Insured Person a Lump Sum benefit of \$25,000.

4. Dependent Child Assistance

a. Education Fund Supplement

If, whilst on a Journey, the Insured Person suffers an Accidental Death and is survived by Dependent Child(ren), We will pay to the Insured Person's estate \$5,000 for each surviving Dependent Child subject to a maximum benefit amount of \$15,000 in respect of any one family.

b. Orphaned Benefit

If the Insured Person and their Spouse or Partner both suffer an Accidental Death resulting from the same event, and the Insured Person is survived by Dependent Child(ren), We will pay to the Insured Person's estate, in addition to any benefit payable under Education fund supplement, \$10,000 for each surviving Dependent Child subject to a maximum benefit amount of \$30,000 in respect of any one family.

5. Partner Retraining

If, whilst on a Journey, the Insured Person suffers Accidental Death or Permanent Total Disablement, We will pay up to \$10,000 towards the actual costs incurred for the training or retraining of their Spouse or Partner:

- a. for the purpose of obtaining gainful employment
- b. to improve their employment prospects, or
- c. to enable them to improve the quality of care they can provide to the Insured Person, provided that:
 - i. the Spouse or Partner is aged under 65 years at the commencement of such training
 - ii. the training is provided by a recognised institution with qualified skills to provide such training, and
 - iii. all such expenses are incurred within 24 months from the date the Insured Person suffered the Injury for which the claim depends.

6. Corporate Image Protection

If, whilst on a Journey, the Insured Person or group of Insured Persons suffer an Injury, and in Our opinion this is likely to result in a valid claim for payment of benefits for:

- a. Accidental Death, or
- b. Permanent Total Disablement,

We will reimburse The Company for reasonable costs (other than The Company's own internal costs) incurred for engaging an image and/or public relations consultant(s); and/or costs associated with the release of information through the media.

Costs must be incurred within 15 days of, and directly in connection with, such Injury, to protect and/or positively promote The Company's business and corporate image.

The maximum amount We will pay is \$15,000 in respect of any one event and is subject to The Company giving Us a signed undertaking that any amount paid to The Company will be repaid to Us, if it is later found that a valid claim did not or will not eventuate.

7. Home and/or Car Modification

If, whilst on a Journey, the Insured Person suffers an Injury that results in a Lump Sum benefit of 100% being payable (other than for Accidental Death), We will also pay up to \$10,000 for costs necessarily incurred to modify the Insured Person's Home and/or car, or costs associated with relocating the Insured Person to a suitable home provided that the modifications and/or relocation are certified to be necessary by a Medical Practitioner.

8. Unexpired Membership

If, whilst on a Journey, the Insured Person suffers an Injury which results in benefits being payable for:

- a. a Lump Sum benefit of 100% (other than for Accidental Death), or
- b. Temporary Total Disablement or Temporary Partial Disablement for which a Medical Practitioner certifies will continue for a minimum period of 26 weeks, and in either case, is certified by a Medical Practitioner as preventing the Insured Person from continuing participation in any sport for which the Insured Person has paid a membership, association or registration fee, We will pay the Insured Person a pro-rata refund of such fees paid for the current season up to an aggregate amount of \$500.

9. Replacement of Keys and Locks

In the event of a valid claim under Section 7 – Luggage, Travel Documents and Money where the Insured Person has lost their identification and keys at the same time, We will reimburse the Insured Person up to \$1,000 for the actual costs incurred for the replacement of keys and locks to the Insured Person's Home, work and/or car.

10. Home Burglary Insurance Excess Waiver

If, whilst on a Journey, the Insured Person's Home, which is completely unoccupied for the duration of the Journey, is burgled, We will reimburse the Insured Person any prescribed Excess paid under the Insured Person's Home contents insurance policy up to a maximum of \$1,000.

11. Identity Theft Protection

In the event the Insured Person is the victim of Identity Theft as a result of their documents having been stolen whilst on a Journey, We will indemnify the Insured Person for reasonable legal expenses incurred with Our prior written consent, up to a maximum of \$15,000:

- a. to pursue closure of any disputed areas, accounts or credit facilities
- b. for re-submitting applications for loans, grants, other credit or debit instruments that are rejected solely as a result of the lender receiving incorrect information as the result of Identity Theft

- c. for notarising affidavits or other similar Documents, amending or rectifying records in regard to the Insured Person's true name or identity as the result of Identity Theft
- d. to defend any suit brought against the Insured Person by a creditor or collection agency or other entity acting on behalf of a creditor for non-payment of goods or services or default on a loan as the result of Identity Theft, or
- e. to remove any civil judgment wrongfully entered against the Insured Person as a result of Identity Theft.

Definitions

The following definitions shall apply to these words:

“Documents” means papers or other items containing references to the Insured Person's identity including, but not limited to, the following:

- passport
- driver's licence
- credit, debit and bank cards
- share certificates
- birth certificate
- bank and/or building society account details
- insurance documents
- utilities account details
- membership numbers of professional bodies.

“Identity Theft” means the theft of personal data or documents relating to the Insured Person's identity, which results:

1. in fraudulent use to obtain Money, goods or services, or
2. in the Insured Person incurring expenses to:
 - a. stop further fraudulent use
 - b. replace such Documents
 - c. restore the Insured Person's credit rating and bank / mortgage / loan accounts, and
 - d. amend or rectify records regarding the Insured Person's true name or identity.

We will not pay for:

any loss, damage or expenses in respect to Identity Theft for:

1. any item, which has been purchased by fraudulent use of the Insured Person's identity
2. any loss arising from any business pursuits or the theft of a commercial identity
3. any loss or liability arising from the use of any car bought, leased or hired by fraudulent use of the Insured Person's identity, where civil or criminal action is, or has been, taken against the Insured Person
4. authorised charges that the Insured Person has disputed based on the quality of goods or services
5. theft of the Insured Person's identity by a Relative or Close Business Colleague
6. authorised account transactions or trades that the Insured Person has disputed, or is disputing, based on the execution (or non-execution) of electronic transfers, trades or other verbal or written instructions or directions
7. any incident of Identity Theft that does not occur within 12 months from the date the Insured Person's documents were stolen whilst on a Journey
8. any incident of Identity Theft for which the Insured Person has not lodged a report with the police and/or cannot provide a copy of the police report, or
9. any costs or expenses in connection with any claim not agreed to in advance by Us.

Also refer to: General terms and conditions, pages 18-19.

General exclusions, pages 37-38.

General exclusions

We will not under any section pay for:

1. claims for costs or expenses incurred outside the Period of Insurance
2. claims involving consequential loss of any kind including, but not limited to, loss of enjoyment or any financial loss not specifically covered in the Policy
3. claims directly or indirectly arising from loss, theft or damage to property, or death, Sickness or bodily Injury if the Insured Person fails to take reasonable care or put themselves in a situation where a reasonable person could foresee that loss, theft or damage to property, or death, Sickness or bodily Injury might happen
4. claims arising from any deliberate, illegal or criminal acts committed by, or on behalf of, the Insured Person, The Company, or any other person acting with the Insured Person or The Company's consent or at the Insured Person or The Company's direction; or if the Insured Person or The Company has not been honest and frank with all answers, the accuracy of information, statements and submissions made in connection with the insurance application or claim
5. any benefits where death, Injury, Sickness, disability or liability arises from or is caused directly or indirectly from:
 - a. an Insured Person's suicide, attempted suicide, or deliberately self-inflicted Injury or Sickness
 - b. the transmission of any sexually transmittable disease or virus
 - c. claims involving air travel other than as a passenger on a fully licensed passenger carrying aircraft operated by an airline or an air charter company
 - d. participating in a Professional Sport
 - e. radioactivity, or the use, existence or escape of any nuclear fuel, nuclear material or nuclear waste, or
 - f. War, Civil War, invasion, insurrection, revolution, use of military power or usurpation of government or military power in New Zealand or any country where these events were in existence or there had been a published warning that such events were likely to occur prior to the Insured Person booking their Journey
6. claims arising from any government intervention, prohibition, regulation or restriction or court order
7. claims directly or indirectly arising from errors or omissions by The Company, the Insured Person or any other person in a booking arrangement
8. claims directly or indirectly arising from circumstances The Company or the Insured Person knew of, or a reasonable person in their circumstances would know or foresee, at the Relevant Time, that could lead to the Journey being delayed, abandoned or cancelled
9. any loss directly or indirectly arising as a result of:
 - a. travelling when medically unfit to do so
 - b. travelling against the advice of a Medical Practitioner
 - c. conditions for which the Insured Person is travelling to seek medical advice, treatment or review, or to participate in a clinical trial
 - d. an Existing Medical Condition that is not covered by this Policy, or
 - e. routine or cosmetic medical or dental treatment, even if the Insured Person's Existing Medical Condition is covered by this Policy

10. claims in respect of travel booked or undertaken after the Insured Person's Terminal Illness was diagnosed
 11. claims directly or indirectly arising from the Insured Person having elective medical or dental treatment or surgery, a cosmetic procedure or body modification (including tattoos and piercings) during the Journey
 12. claims directly or indirectly arising from pregnancy of the Insured Person or any other person after:
 - a. the start of the 24th week of pregnancy, or
 - b. where the problem arising is not an unexpected serious medical complication
 13. claims directly or indirectly arising from childbirth or the health of a newborn child whatever the proximate cause of the claim is. This exclusion applies irrespective of the stage of pregnancy at which the child is born
 14. any Goods and Services Tax (GST) liability or any fine, charge or penalty the Insured Person is liable for because of a failure to fully disclose to Us their input tax credit entitlement for the Sum Insured shown in the Schedule
 15. losses for which insurance or the payment is prohibited by law
 16. claims arising from the failure of any travel agent, tour operator, accommodation provider, airline or other Transport Provider, car rental agency or any other travel or tourism services provider to provide services or accommodation due to their Insolvency or the Insolvency of any person, company or organisation they deal with
 17. claims involving the Insured Person travelling (during the Journey) in International Waters in a private sailing vessel or a privately registered vessel
 18. claims involving participation by the Insured Person or the Insured Person's travelling companion in hunting; racing (other than on foot); polo playing; hang gliding; off-piste snow skiing or snowboarding; rodeo riding; BASE jumping; motocross; freestyle BMX riding; running with the bulls; mountaineering or rock climbing using guides, ropes, rock climbing equipment or oxygen; scuba diving unless the Insured Person holds an Open Water Diving Certificate or is diving with a qualified diving instructor
 19. claims arising from participating in a Professional Sport
 20. claims involving participation by the Insured Person or the Insured Person's travelling companion (during the Journey) in motorcycling if:
 - a. the motorcycle/moped has an engine capacity of more than 200cc (unless Corporate Platinum insurance has been purchased)
 - b. the motorcycle or moped was not hired
 - c. whilst in control of a motorcycle or moped the Insured Person does not hold a valid New Zealand motorcycle licence or New Zealand motor vehicle driver licence, and the Insured Person holds a licence valid in the relevant country
 - d. whilst the Insured Person is a pillion passenger the driver does not hold a licence valid in the relevant country
 - e. whilst in control of the motorcycle/moped or as a passenger the Insured Person is not wearing a helmet
 - f. the Insured Person is participating in a Professional Sport capacity
 - g. the Insured Person is racing, or
 - h. the Insured Person is participating in motocross.
- In addition to the above, if the motorcycle/moped has an engine capacity of more than 200cc and Corporate Platinum insurance has been purchased, We will not pay for claims involving participation by the Insured Person (during the Journey) in motorcycling if the Insured Person:
- i. is under 25 years or over 70 years of age at the Relevant Time
 - ii. has not held a full New Zealand motorcycle licence for the last five years, or
 - iii. is the registered owner of a motorcycle in New Zealand that has an engine capacity greater than or equal to the engine capacity of the motorcycle/moped the Insured Person is hiring
21. any claims if the Insured Person is a Nominated Person aged 70 years or over at the time the loss occurs
 22. any claims covered by:
 - a. the New Zealand Accident Compensation Corporation
 - b. any workers' compensation legislation
 - c. any transport Accident legislation
 - d. any government-sponsored fund, plan or medical benefit scheme, or
 - e. any other insurance policy required to be effected by or under law.

We will only pay the difference between what was payable under (a.-e.) and what The Company or the Insured Person would be otherwise entitled to recover under the Policy, where permissible under Law, or
 23. claims directly or indirectly arising due to any travel made in a country for which an "Avoid non-essential travel" or "Do not travel" travel warning is issued by the New Zealand Government on the New Zealand Ministry of Foreign Affairs and Trade (MFAT) website at safetravel.co.nz, if the warning was issued prior to the booking of the Insured Person's travel arrangements, unless The Company and the Insured Person have received prior approval by Cover-More in writing.

When to contact us

Claims and other non-emergency assistance

Please submit your claim form within 60 days of completing your Journey. Refer to the claims procedures outlined on page 12 of this booklet.

If you need further help:

Call: from New Zealand 0800 500 225

Call: from overseas +64 9 308 2120

Fax: (09) 300 7370

Email: corporate@covermore.co.nz

When you must call the emergency number

You must call the emergency assistance number as soon as physically possible if:

- the Insured Person is admitted to hospital, or
- subject to medical advice, the insurer has the option of returning the Insured Person to New Zealand or evacuating the Insured Person to another country if the cost of the Insured Person's overseas medical and Additional expenses is likely to exceed the cost of returning the Insured Person to New Zealand.

24 hour emergency assistance

If you need emergency assistance during the Journey please call DIRECT and TOLL FREE from:

Canada 1866 773 9318 **UK** 0808 234 1526

USA 1866 309 2267 **Australia** 1800 242 579

From all other countries or if you experience difficulties with the numbers above:

Call direct: +61 (0) 2 8907 5240

Fax: +61 (0) 2 9954 6250

IMPORTANT: Please ensure all Employees carry an Emergency Assistance Card whenever they travel

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TRAVEL INSURANCE

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