

Supplementary Product Disclosure Statement (SPDS)

This document is an **SPDS** that updates and amends the Allianz Global Assistance Agency Travel Insurance Product Disclosure Statement (including Policy Wording) with the preparation date of 10 February 2017 (**PDS**).

This **SPDS** is issued by the insurer Allianz Australia Insurance Limited ABN 15 000 122 850 AFSL 234708 of 2 Market Street Sydney NSW 2000.

This **SPDS** must be read together with the **PDS** and any other SPDS that you are given which updates and amends the **PDS**.

The preparation date of this **SPDS** is 1 November 2018.

Background to the change

From 1 November 2018, the Australian Financial Complaints Authority or 'AFCA' is the new external dispute resolution (EDR) scheme to deal with complaints from consumers in the financial system. It replaces the Financial Ombudsman Service Australia (FOS).

Changes to the PDS

The change to the **PDS** is as follows:

IMPORTANT MATTERS (page 42)

Replace the entire section headed 'DISPUTE RESOLUTION PROCESS' with:

DISPUTE RESOLUTION PROCESS

In this section "**we**", "**our**" and "**us**" means **Allianz** and **Allianz Global Assistance**.

If **you** are dissatisfied with **our** service in any way, contact **us** and **we** will attempt to resolve the matter in accordance with **our** Internal Dispute Resolution procedures.

You can contact **us** using the contact details on the back cover of this **PDS**, or put the complaint in writing and send it to The Dispute Resolution Department, PO Box 162, Toowong, Queensland 4066. To obtain a copy of **our** procedures, please contact **us**.

We are a member of an external dispute resolution scheme which is independent and free to **you**. **We** are bound by determinations made by it in accordance with its relevant terms and rules applicable to **us**. Any complaint or dispute can be lodged with the Australian Financial Complaints Authority (**AFCA**). The contact details for the **AFCA** are:

Australian Financial Complaints Authority

Online: www.afca.org.au

Email: info@afca.org.au

Phone: 1800 931 678

Mail: Australian Financial Complaints Authority, GPO Box 3, Melbourne, Victoria 3001.

This page has been left blank intentionally

Sales and general enquiries

Please contact the distributor

Claims

Phone: 1300 725 154

24 hour Emergency Assistance

Phone: +61 7 3305 7499 (reverse charge from overseas)

Phone: 1800 010 075 (within Australia)

This insurance is arranged and managed by

AWP Australia Pty Ltd

trading as Allianz Global Assistance

ABN 52 097 227 177

AFS Licence No. 245631

74 High Street, Toowong QLD 4066

This insurance is underwritten by

Allianz Australia Insurance Limited

ABN 15 000 122 850

AFS Licence No. 234708

2 Market Street, Sydney NSW 2000

AGAGENATCSPDS 0618

Allianz Global Assistance

Agency Travel Insurance

Supplementary Product
Disclosure Statement

Global Assistance

Allianz 

About this Supplementary Product Disclosure Statement (Supplementary PDS)

This document is an SPDS that updates and amends the Allianz Global Assistance Agency Travel Insurance Product Disclosure Statement (including Policy Wording) with the preparation date 10 February 2017 (PDS) and replaces the Allianz Global Assistance Travel Insurance Supplementary Product Disclosure Statement with the preparation date 8 February 2018.

This SPDS is issued by the insurer Allianz Australia Insurance Limited ABN 15 000 122 850 AFSL 234708 of 2 Market Street Sydney NSW 2000.

This SPDS must be read together with the PDS and any other SPDS that you are given which updates and amends the PDS.

The preparation date of this SPDS is 2 March 2018.

CHANGES TO THE PDS

This SPDS amends the PDS as follows:

Words with special meanings (pages 6 to 9)

Insert new definition of **"Certificate of Insurance"** on page 6:

Certificate of Insurance is the document we give you which confirms that we have issued a Policy to you and sets out details of your cover.

Replace existing definition of **"Hospital"** on page 7 with:

Hospital means an established hospital registered under any legislation that applies to it, that provides in-patient medical care. It does not include any institution used primarily as a nursing or convalescent home, a place of rest, a geriatric ward, a mental institution, a rehabilitation or external care facility or a place for the treatment of alcoholism, drug addiction or substance addiction.

Replace existing definition of **"Medical Adviser"** on page 7 with:

Medical Adviser means a doctor (including a clinical psychologist) or dentist qualified to diagnose the condition or disorder, holding the necessary current certification in the country in which they are currently practising, and who is not you or your Travelling Companion, or a Relative or employee of you or your Travelling Companion.

Replace existing definition of **"Pre-existing Medical Condition"** on pages 8 & 9 with:

Pre-existing Medical Condition means a condition of which you were, or a reasonable person in your circumstances should have been, aware:

1. prior to the time of the policy being issued that is:
 - a chronic or ongoing:
 - medical condition;
 - dental condition; or
 - Mental Illness; or
 - a current pregnancy; or
 - a medical condition connected with your current or past pregnancy; or
 - related to in vitro fertilisation or another form of assisted reproductive treatment or procedure; or
2. in the ten (10) years prior to the time of the policy being issued that involves:
 - your heart, brain, circulatory system or blood vessels; or
 - your respiratory system; or
 - your kidneys, liver or pancreas; or
 - cancer; or
 - back pain requiring prescribed pain relief medication; or
 - surgery involving any joints, the neck, back, spine, brain, skull, abdomen or pelvis requiring at least an overnight stay in Hospital; or
 - diabetes mellitus (type 1 or type 2); or
 - Mental Illness; or
 - signs or symptoms for which you:
 - have not yet sought a professional opinion regarding the cause; or
 - are currently under investigation to define a diagnosis; or
 - are awaiting specialist opinion; or
3. in the two (2) years prior to the time of the policy being issued for which you:
 - have been in Hospital, required an emergency department visit or had day surgery; or
 - have been prescribed a new medication or had a change to your medication regime; or
 - had or required regular review or check-ups; or
 - have required prescription pain relief medication.

Replace existing definition of **"Sick"** or **"Sickness"** on page 9 with:

Sick or **Sickness** means a medical condition (including a Mental Illness), not being an Injury, the symptoms of which first occur or manifest after the date of issue of the Certificate of Insurance.

Your policy cover (page 47)

In **Section 1A - Cancellation Fees & Lost Deposits**, immediately above the heading **1.1 We will pay**, insert paragraphs as follows:

If you think that you may have to cancel your Journey or shorten your Journey you must tell us as soon as possible - for more information see **"Claims processing"** on page 46, as well as pages 73 to 75 or call the contact number (or if Overseas, the 24 hour emergency assistance number) shown on the back cover of this PDS.

If your claim arises from or is related to your fitness to travel, written proof from a Medical Adviser must be provided.

General exclusions applicable to all sections

(pages 70 & 71)

Replace General Exclusion 18 on page 70 with:

18. your claim arises from, is related to or associated with any physical or mental signs or symptoms that you were aware, or a reasonable person in your circumstances would have been aware, of before cover commenced, and:
 - a) you had not yet sought a medical opinion regarding the cause; or
 - b) you were currently under investigation to define a diagnosis; or
 - c) you were awaiting specialist opinion.

Replace General Exclusion 23 on page 71 with:

23. your claim arises from or is in any way related to or connected with:
 - you or any other person being hospitalised or confined to a clinic, where you or that other person (as the case may be) is being treated for addiction to drugs, substances or alcohol, or is using the Hospital or clinic as a nursing, convalescent or rehabilitation place; or
 - a therapeutic or illicit drug, substance or alcohol addiction suffered by you or any other person.

Delete General Exclusion 25 on page 71.

You can lodge your claim online 24 hours a day at:

www.travelclaims.com.au

Sales and general enquiries

Please contact the distributor

Claims

Phone: 1300 725 154

24 hour Emergency Assistance

Phone: +61 7 3305 7499 (reverse charge from overseas)

Phone: 1800 010 075 (within Australia)

This insurance is arranged and managed by

AWP Australia Pty Ltd

trading as Allianz Global Assistance

ABN 52 097 227 177

AFS Licence No. 245631

74 High Street, Toowong QLD 4066

This insurance is underwritten by

Allianz Australia Insurance Limited

ABN 15 000 122 850

AFS Licence No. 234708

2 Market Street, Sydney NSW 2000

Allianz Global Assistance

Agency Travel Insurance

Product Disclosure Statement
(including Policy Wording)

ACAGENATC 032017

Global Assistance

Allianz 

Contents

1	About Allianz Global Assistance
2	About this Product Disclosure Statement
6	Words with special meanings
11	Purchasing this policy
16	Geographical regions
18	Traditional Table of benefits
24	Basic Table of benefits
30	Additional options
32	Pre-existing medical conditions
38	Important matters
47	Your policy cover
68	General exclusions applicable to all sections
73	Claims
76	Wholesaler List

Recommendations for your safety and wellbeing

Before you travel:

- make sure you are familiar with the terms and conditions of your policy as set out in this PDS, your Certificate of Insurance and any endorsements issued to you.
- if you have – or have had – medical conditions, make sure:
 - you have a full check up with your treating doctor,
 - you obtain enough medication for your Journey, and
 - review the “**Pre-existing medical conditions**” section of this Product Disclosure Statement – before you travel, you need to be sure what conditions you have cover for.
- see your local doctor for recommended vaccinations before travelling.
- tell family members about your travel plans.
- give family members a copy of your itinerary and your travel insurance policy.
- check www.smarttraveller.gov.au for travel advice and warnings before you buy your policy.
- obtain all appropriate visas, including transit visas - see www.dfat.gov.au/visas.

Safeguarding your Luggage and Personal Effects

You must take all reasonable precautions to safeguard your Luggage and Personal Effects. If you leave your Luggage and Personal Effects Unsupervised in a Public Place we will not pay your claim.

For an explanation of what we mean by “Luggage and Personal Effects”, “Unsupervised” and “Public Place”, see pages 7 to 10.

About Allianz Global Assistance

Allianz Global Assistance is one of Australia's leading providers of travel insurance and emergency assistance. Previously we were known as Mondial Assistance though we have been part of the Allianz Group for more than ten years.

As Mondial Assistance we helped more than 250 million people every year around the world. As Allianz Global Assistance we expect to dramatically extend our global reach and our local impact in each of the 28 countries where we operate.

Our travel insurance offers specialist emergency medical assistance as the core, fundamental benefit. Our global team of doctors and nurses are able to help travellers if they become ill or are injured while away from home—this is what sets our travel insurance apart.

In Australia, we have a specialist team of doctors, registered nurses, case managers and support personnel who are available to help 24 hours a day, seven days a week. Worldwide, we have more than 500 doctors and medically qualified employees supported by our international network of 400,000 high-quality, certified service providers and 180 international correspondents.

We have an established global network of over 1600 medical specialists, including air ambulance services. Our medical consultants are either members of the International Society of Air Medical Services (Australasia) or the International Society of Travel Medicine and offer services from emergency rescue operations to interpretation services.

And our care extends beyond travellers to their families who often need just as much care and assistance.

We help with:

- emergency medical evacuation and repatriation home
- assessing and managing your medical care while overseas
- providing assistance with travel and accommodation
- locating the nearest embassy or consulate
- accessing interpreters in non-English speaking hospitals
- placing a guarantee of payment for hospital expenses/medical bills
- relaying messages to family members and your employer.

About this Product Disclosure Statement

A Product Disclosure Statement (PDS) is a document required by the Corporations Act 2001 (Cth) and contains information designed to help you decide whether to buy the policy and to compare it with other products you may be considering.

This PDS sets out the cover available and the terms and conditions which apply. Please note that any recommendations or opinions in this document are of a general nature only and do not take into account your objectives, financial situation or needs.

If we are unable to offer you the cover you seek, it will be because the particular product offered is not designed to cover a particular risk or risks including, but not limited to, some geographical regions, some pre-existing medical conditions or some ages.

This PDS, together with the Certificate of Insurance and any written endorsements by us, make up your contract with Allianz. Please retain these documents in a safe place.

About the available plans

You can choose a plan from either our Traditional or Basic range:

Traditional plans

Plan A – Super Plus, Super, Standard, Economy & New Zealand/Indonesia/Fiji

(includes all Sections*);

Plan B - Annual Multi-Journey

(includes all Sections while travelling internationally and Sections 1A, 1B, 1C, 4 & 6 to 16 while travelling within Australia);

Plan C - Domestic

(includes Sections 1A, 1B, 1C, 4, 6, 11, 13, 15 & 16);

Plan D - Medical & Liability

(includes Sections* 2, 3 & 15);

Plan E - Non-Residents

(includes Sections 1A, 2 to 7, 9 & 11 to 16);

Only available to eligible applicants:

Plan F - Domestic Advance Purchase

(includes Section 1A);

Plan G - Non-Medical Cover

(includes Sections# 1A, 1B, 4, 6, 7 & 9 to 16).

** you will not have cover under certain Sections while travelling in Australia - see*

“Geographical regions” pages 16 & 17 for details.

you will not have cover under Sections 7, 9, 10, 12 & 14 while travelling in Australia.

Basic plans

Basic – Super Plus, Super, Standard, Economy & New Zealand/Indonesia/Fiji

(includes all Sections*);

Basic Annual Multi-Journey

(includes all Sections travelling internationally and Sections 1A, 1B, 1C, 4 & 6 to 16 while travelling in Australia);

Basic Domestic

(includes Sections 1A, 1B, 1C, 4, 6, 11, 13, 15 & 16);

Basic Non-Residents

(includes Sections 1A, 2 to 7, 9, 11 to 16);

Only available to eligible applicants:

Basic Non-Medical Cover

(includes Sections# 1A, 1B, 1C, 4, 6, 7, 9 to 16).

** you will not have cover under certain Sections while travelling in Australia - see*

“Geographical regions” pages 16 & 17 for details.

you will not have cover under Sections 7, 9, 10, 12 & 14 while travelling in Australia.

Understanding your policy and its important terms and conditions

To properly understand this policy's significant features, benefits and risks you need to carefully read:

- The benefit limits provided under each plan in the **“Traditional table of benefits”** pages 18 to 23 or the **“Basic table of benefits”** pages 24 to 29, when *We will pay* a claim under each Section applicable to the cover you choose (**“Your policy cover”** pages 47 to 67), any endorsements under **“Additional options”** pages 30 & 31 and **“Pre-existing medical conditions”** pages 32 to 37 (remember, certain words have special meanings – see **“Words with special meanings”** pages 6 to 10);
- **“Important matters”** (pages 38 to 46) - this contains important information on applicable Excesses, the period of cover and extensions of cover, the cooling-off period, your Duty of Disclosure (including how the duty applies to you and what happens if you

breach the duty), our privacy notice and dispute resolution process, the Financial Claims Scheme, when you can choose your own doctor, when you should contact Allianz Global Assistance concerning 24 hour medical assistance, Overseas hospitalisation or medical evacuation, and more;

- When *We will not pay* a claim under each Section applicable to the cover you choose (**"Your policy cover"** pages 47 to 67) and **"General exclusions applicable to all sections"** pages 68 to 72 (which provides details of the general exclusions that apply to all covers and benefits); and
- **"Claims"** (pages 73 to 75) - this sets out important information about how we will pay claims. It also sets out certain obligations that you and we have. If you do not meet them we may refuse to pay a claim.

Applying for cover

When you apply for the policy, we will confirm with you things such as the period of cover, your premium, what cover options and Excess will apply, and whether any standard terms are to be varied (this may be by way of an endorsement).

These details will be recorded on the Certificate of Insurance issued to you.

If we are unable to offer you the cover you seek, it will be because the particular product offered is not designed to cover a particular risk or risks including, but not limited to, some geographical regions, some pre-existing medical conditions or some ages. In such a case if you would like to discuss your options please use the contact details on the back cover of this PDS.

This PDS sets out the cover we are able to provide you with. You need to decide if the benefit limits, type and level of cover are appropriate for you and will cover your potential loss. If you have any queries, want further information about the policy or want to confirm a transaction, please use the contact details on the back cover of this PDS.

About your premium

You will be told the premium payable for your policy when you apply. In calculating the premium, we take into account a number of factors including your destination(s), length of journey, the number of person and age of persons to be covered under the policy and the plan type you select.

The amount of any excess payable, cover for additional options and cover for agreed pre-existing medical conditions is also included in the calculation of your premium.

Your total premium reflects the amount we calculate to cover these factors as well as any relevant government charges, taxes or levies (such as stamp duty or GST) in relation to your policy. These amounts are included in the total amount payable by you as shown in your Certificate of Insurance.

Cooling-off period

If you decide that you do not want this policy, you may cancel it within 14 days after you are issued your Certificate of Insurance and PDS, and you will be given a full refund of the premium you have paid, provided you have not started your Journey or you do not want to make a claim or exercise any other right under the policy.

Who is your insurer?

This policy is underwritten by Allianz Australia Insurance Limited (Allianz) ABN 15 000 122 850 AFS Licence No. 234708.

Who is Allianz Global Assistance?

Allianz Global Assistance is a trading name of AWP Australia Pty Ltd. Allianz Global Assistance has been authorised by Allianz to enter into and arrange the policy and deal with and settle any claims under it as the agent of Allianz, not as your agent. Allianz Global Assistance acts under a binder which means that it can do these things as if it were the insurer. It administers all emergency assistance services and benefits of this insurance. You may contact Allianz Global Assistance in an emergency 24 hours a day, 7 days a week.

Updating the PDS

We may need to update this PDS from time to time if certain changes occur where required and permitted by law. We will issue you with a new PDS or a supplementary PDS to update the relevant information except in limited cases.

Where the information is not something that would be materially adverse from the point of view of a reasonable person considering whether to buy this product, Allianz Global Assistance may issue you with notice of this updated information in other forms or keep an internal record of such changes (you can get a paper copy free of charge by calling us).

Preparation date

The preparation date of this PDS is 10 February, 2017.

Words with special meanings

Headings, where appearing, are for reference only and do not affect interpretation.

When the following words and phrases appear in this PDS, your Certificate of Insurance or any other document we tell you forms part of your policy, they have the meanings given below. The use of the singular shall also include the use of the plural and vice versa

"AICD/ICD" means an implantable cardioverter-defibrillator (ICD), also known as an automated implantable cardioverter-defibrillator (AICD).

"arise", "arises" or "arising" means directly or indirectly arising or in any way connected with.

"Carrier" means an aircraft, vehicle, train, tram, vessel or other public transport operated under a licence for the purpose of transporting passengers. This definition excludes taxis.

"Concealed Storage Compartment" means a boot, trunk, glove box, enclosed centre console, or concealed cargo area of a sedan, station wagon, hatchback, van or motorhome.

"Country of Residence" means the country of which you are a permanent resident. If you currently reside in Australia and are eligible for an Australian Medicare Card then, for the purposes of this policy, your Country of Residence is deemed to be Australia.

"Dependant" means your children/grandchildren not in full time employment who are under the age of 21 and travelling with you on the Journey.

"Duo" means you and your Travelling Companion as named on the Certificate of Insurance. Duo cover does not provide cover for any Dependants.

"Epidemic" means a sudden development and rapid spreading of a contagious disease in a region where it developed in a simply endemic state or within a previously unscathed community.

"Excess" means the amount which you must first pay for each claim arising from the one event before a claim can be made under your policy.

"Family" means you, your spouse or partner and your Dependants (where Plan B Annual Multi-Journey or Basic Annual Multi-Journey has been purchased, "Family" can also mean you and your spouse or partner.

"Home" means the place where you normally live in Australia.

"Hospital" means an established hospital registered under any legislation that applies to it, that provides in-patient medical care.

"Individual" means covering you, the person whose name is set out on the Certificate of Insurance. Individual cover does not provide cover for any other person.

"Injure", "Injured" or "Injury" means bodily injury caused solely and directly by violent, accidental, visible and external means, which happens at a definite time and place during your period of cover and does not result from any illness, Sickness or disease.

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

"Journey" means your journey from the time when you leave your Home to go directly to the place you depart from on your travels, and ends when you return to your Home. *Refer to page 12 for the definition of "Journey" for policies purchased after leaving Australia.*

"Luggage and Personal Effects" means any personal items owned by you and that you take with you, or buy, on your Journey and which are designed to be worn or carried about with you. This includes items of clothing, personal jewellery, photographic and video equipment or personal computers, or electrical devices or portable equipment. However, it does not mean any cash, bank notes, currency notes, cheques, negotiable instruments, bicycles, business samples or items that you intend to trade.

"Medical Adviser" means a qualified doctor of medicine or dentist, other than you or your Travelling companion, or a Relative of you or your Travelling Companion, holding the necessary certification in the country in which they are currently practising.

"Mental Illness" means any illness, condition or disorder listed in the current edition of the Diagnostic and Statistical Manual of Mental Disorders.

"Moped" or "Scooter" means any two-wheeled or three-wheeled motor vehicle with an engine displacement of not greater than 50cc.

"Motorcycle" means any two-wheeled or three-wheeled motor vehicle with an engine displacement greater than 50cc.

"Non-Resident" means someone who does not reside in Australia, is travelling to, within and from Australia, and who is not entitled to receive Australian Medicare Benefits.

“Off-piste” means any skiing that is not on groomed terrain or marked slopes that are within the designated ski resort boundaries.

“Open Water Sailing” means sailing more than 10 nautical miles off any land mass.

“Overseas” means in any country other than Australia.

“Pandemic” means a form of an Epidemic that extends throughout an entire continent, even the entire human race.

“Policy” means your travel insurance policy with us covering you and is made up of this Product disclosure Statement, your Certificate of Insurance and any other document we tell you forms part of your Policy. Together these documents make up your contract with us.

“Pre-existing Medical Condition” means a medical condition which you were aware of:

- 1. prior to the time of the policy being issued that involves:**
 - a) your heart, brain or circulatory system/blood vessels, or
 - b) your lungs or a chronic airways disease, or
 - c) cancer, or
 - d) back pain requiring prescribed pain relief medication, or
 - e) surgery involving any joints, the back, spine, brain or abdomen requiring at least an overnight stay in Hospital, or
 - f) Diabetes Mellitus (Type 1 or Type 2); OR
 - 2. in the 2 years prior to the time of the policy being issued:**
 - a) for which you have been in Hospital or emergency department or day surgery, or
 - b) for which you have been prescribed a new medication or had a change to your medication regime, or
 - c) requiring prescription pain relief medication;
- For the purposes of this clause medical condition includes a dental condition; OR
- 3. prior to the time of the policy being issued that is:**
 - a) pregnancy, or
 - b) connected with your current pregnancy or participation in an IVF program; OR
 - 4. for which, prior to the time of the policy being issued:**
 - a) you have not yet sought a medical opinion regarding the cause; or
 - b) you are currently under investigation to define a diagnosis; or
 - c) you are awaiting specialist opinion.

The above definition applies to you, your Travelling Companion, a Relative of you or your Travelling Companion or any other person.

“Public Place” means any place that the public has access to, including but not limited to planes, trains, trams, cruise ships, taxis, buses, air or bus terminals, stations, wharves, streets, museums, galleries, hotels, hotel foyers and grounds, beaches, restaurants, private car parks, public toilets and general access areas.

“Reasonable” means:

- for medical or dental expenses, the standard level of care given in the country you are in not exceeding the level you would normally receive in Australia; or
- or for other expenses such as additional travel and accommodation expenses, a level comparable to the level you have booked for the rest of your Journey;
- or as determined by the courts of Queensland.

“Reciprocal Health Care Agreement” means an agreement between the Government of Australia and the government of another country where Residents of Australia are provided with subsidised essential medical treatment. (Please visit www.dfat.gov.au for details of Reciprocal Health Care Agreements with Australia).

“Relative” means grandparent, parent, parent-in-law, step parent, step parent-in-law, sister, sister-in-law, brother, brother-in-law, spouse, partner, fiancé(e), son, son-in-law, daughter, daughter-in-law, step child, foster child, grandchild, or guardian.

“Rental Vehicle” means a campervan/motorhome that does not exceed 4.5 tonnes, a sedan, hatchback or station-wagon, four wheel drive or mini bus/people mover rented from a licensed motor vehicle rental company.

“Resident of Australia” means someone who currently resides in Australia and is eligible for an Australian Medicare Card.

“Sick” or **“Sickness”** means a medical condition, not being an Injury, which first occurs during your period of cover.

“Single” means you and your Dependants travelling with you.

“Travel Service Provider” means any scheduled service airline, hotel and resort operator, accommodation provider, motor vehicle rental or hire agency, bus line, shipping line or railway company.

“Travelling Companion” means a person with whom you have made arrangements, before your policy was issued, to travel with you for at least 75% of your Journey.

“Unsupervised” means leaving your Luggage and Personal Effects:

- with a person who is not named on your Certificate of Insurance or who is not a Travelling Companion or who is not a Relative of you or your Travelling Companion;
- with a person who is named on your Certificate of Insurance or who is a Travelling Companion or who is a Relative of you or your Travelling companion, but who fails to keep your Luggage and Personal Effects under close supervision; or
- where they can be taken without your knowledge; or
- at such a distance from you that you are unable to prevent them being taken.

Unsupervised includes forgetting or misplacing items of your Luggage and Personal Effects, leaving them behind or walking away from them.

“we”, “our” and “us” means Allianz Australia Insurance Limited.

“Wholesaler” means an entity named as a Wholesaler in the list appearing on pages 76 to 80.

“you” and “your” means the person(s) whose name(s) are set out on your Certificate of Insurance, and if you have a Single or Family cover, your Dependants.

Purchasing this policy

Step 1	Refer to “Purchasing this policy?”	see below
Step 2	Refer to “Age limits”	see below
Step 3	Read the “Pre-existing medical conditions” section	pages 32 to 37
Step 4	Nominate the applicable Geographical Region for your Journey	pages 16 & 17
Step 5	Nominate the duration of your Journey	—
Step 6	Select your plan	pages 18 to 29
Step 7	Select the cover type (Single, Duo, Family or Individual)	pages 15 & 16
Step 8	Select any “Additional options” you would like to include	pages 30 & 31
Step 9	Apply for cover via one of the following (where applicable): <ul style="list-style-type: none">• online• telephone• at one of the distributor’s branches	—

Who can purchase this policy?

Plans A, C, D, F, G, Basic Super Plus, Basic Super, Basic Standard, Basic Economy, Basic New Zealand/Indonesia/Fiji, Basic Domestic & Basic Non-Medical Cover

Cover is only available if:

- you are a Resident of Australia*; and
- you purchase your policy before you commence your Journey; and
- your Journey commences and ends in Australia.[#]

*** For temporary residents living in Australia who are not eligible for a Medicare Card**

Cover is available under Plan A, C, D, Basic Super Plus, Basic Super, Basic Standard, Basic Economy, Basic New Zealand/Indonesia/Fiji or Basic Domestic, however:

- you must purchase your policy in Australia before you commence your Journey; and
- your Journey must commence and end in Australia.

Cover for temporary residents of Australia temporarily travelling Overseas

Cover (excluding any cover for Pre-existing Medical Conditions other than those specifically listed under the heading ‘*Pre-existing medical conditions which may be covered with no additional premium payable*’ on pages 35 to 37) is automatically available to temporary residents of Australia temporarily travelling Overseas and who, at the date the Certificate of Insurance is issued:

- are aged 74 years and under,
- hold a return ticket to Australia,
- have a Home address in Australia to which you intend to return, and
- hold a current Australian visa which will remain valid beyond the period of their Journey.

Under Section 2 “**Overseas Emergency Medical Assistance/ Evacuation**” if you Injure yourself Overseas or become Sick there or die there and it is necessary to repatriate you or your remains, we will at our option pay the lesser of the cost of returning you to your Home in Australia or to the international airport nearest to where you normally live Overseas. At that point, you will be responsible for all further costs, and cover under all Sections of the policy will end.

For Residents of Australia already Overseas

If you are a Resident of Australia, cover is available under Plan A, Basic Super Plus, Basic Super, Basic Standard, Basic Economy or Basic New Zealand/Indonesia/Fiji if you purchase your policy while you are Overseas. However:

- your one-way Journey must commence Overseas and end in Australia.

Policies purchased after leaving Australia

You can purchase your policy after you leave Australia, subject to the following conditions:

- cover commences from the time the policy is issued;
- a waiting period of 48 hours from the Issue Date as stated on your Certificate of Insurance applies to all claims arising from, related to or associated with any Injury or Sickness, regardless of the Section that applies to the claim. This means that you will not be covered for medical expenses, cancellation fees and lost deposits, additional expenses or hospital cash allowance arising from, related to or associated with any Injury or Sickness which happens within this waiting period;
- there is no cover for Pre-existing Medical Conditions other than those specifically listed under the heading ‘**Pre-existing Medical Conditions which may be covered with no additional premium payable**’ on pages 35 to 37; and
- cover ends when you return to your Home or the place you intend to reside in Australia, or on the Return Date set out on your Certificate of Insurance, whichever happens first.
- For policies purchased after leaving Australia, where the word “Journey” appears in this PDS, its definition in “**Words with special meanings**” (page 7) is deleted and replaced with:

“Journey” means your travel from the time when your policy is issued while you are Overseas to the time when you return to your Home or the place you intend to reside in Australia.

Plan B & Basic Annual Multi-Journey

Cover is only available if:

- you are a Resident of Australia; and
- you purchase your policy before you commence your Journey; and
- your Journey commences and ends in Australia.

If you have Family cover under Plan B or Basic Annual Multi-Journey, cover is provided to your spouse (or legally recognised de facto) when they are travelling with you or independently of you. Cover is also provided to your Dependants when they are travelling with you or your spouse (or legally recognised de facto).

Plan E & Basic Non-Residents

Non-Residents Cover

Cover is only available if you are a Non-Resident - which means you:

- are not a Resident of Australia (see page 9 for definition of “**Resident of Australia**”);
- are travelling to, within and from Australia; and
- are not entitled to - or will not during the period of cover be entitled to - receive Medicare benefits (see below).

This policy does not cover any event or occurrence where providing such cover would constitute “health insurance business” as defined under the Private Health Insurance Act 2007 (Cth) or would result in us contravening the Health Insurance Act 1973 (Cth), the Private Health Insurance Act 2007 (Cth) or the National Health Act 1953 (Cth).

Health insurance business as defined under the Private Health Insurance Act 2007 (Cth) includes, but is not limited to, payment of fees or charges for treatment of travellers from countries that have a Reciprocal Health Care Agreement with Australia. At the time of preparing this PDS, Australia has Reciprocal Health Care Agreements with New Zealand, Italy, the Netherlands, Norway, Sweden, Finland, Malta, the Republic of Ireland, the United Kingdom, Belgium and Slovenia.

If you require clarification, please contact your distributor before you apply.

Please note the following conditions apply:

- if a policy is issued after the traveller’s arrival in Australia, a waiting period of 48 hours from the Issue Date as stated on your Certificate of Insurance applies to all claims arising from, related to or associated with any Injury or Sickness, regardless of the Section that applies to the claim.

This means that you will not be covered for medical expenses, cancellation fees and lost deposits, additional expenses or hospital cash allowance arising from, related to or associated with any Injury or Sickness which happens within this waiting period.

- you cannot purchase this cover if the period you are travelling Overseas exceeds the period you will be in Australia.
- there is no cover for Pre-existing Medical Conditions other than those specifically listed under the heading *'Pre-existing medical conditions which may be covered with no additional premium payable'* on pages 35 to 37.
- there is no cover for medical or Hospital expenses in your Country of Residence.
- the policy can be signed by a sponsor who is a Resident of Australia.
- where the word *'Australia'* or *'Australia or New Zealand'* appears in this PDS, the policyholder's Country of Residence is to be substituted, except where it appears in:
 - in **"About this Product Disclosure Statement"** (pages 2 to 5)
 - **"Words with special meanings"** (on pages 6 to 10) under the definitions of:
 - *'Country of Residence'*;
 - *'Non-Resident'*;
 - *'Resident of Australia'*;
 - *'we', 'our' and 'us'*;
 - this section **"Purchasing this policy?"** (pages 11 to 17);
 - in **"Important matters"** (pages 38 to 45):
 - *'Period of Cover'*
 - *'Confirmation of Cover'*
 - *'Jurisdiction and Choice of Law'*
 - *'Dispute Resolution Process'*
 - *'Privacy Notice'*
 - *'Financial Claims Scheme'*;
 - in Section 1A 1.2 j] & k] of **"Your policy cover"** (on page 49);
 - in Section 3.2 d] of **"Your policy cover"** (on page 53);
 - **"General exclusions applicable to all sections"** (pages 68 to 72);
 - in the **"Claims"** section (pages 73 to 75) under:
 - *'Claims are payable in Australian Dollars to you'*; and
 - *'Travel within Australia only'*;
 - on the back cover of this PDS.

Age limits

Age limits are as at the date of issue of your Certificate of Insurance.

Plans A, C, Basic Super Plus, Basic Super, Basic Standard, Basic Economy, Basic New Zealand/Indonesia/Fiji & Basic Domestic

Available to travellers of all ages.

Plans B, D, F & Basic Annual Multi-Journey

Available to travellers aged 74 years and under.

Plan E & Basic Non-Residents

Available to travellers aged 80 years and under.

Plan G & Basic Non-Medical Cover

Available to travellers of all ages who have a Pre-existing Medical Condition or circumstance which is listed under *'Medical conditions/ circumstances which automatically exclude all cover for medical or hospital expenses'* on page 33 of the **"Pre-existing medical conditions"** section. Please contact your distributor for further details.

Your choices

Under this policy, you choose the cover you require based on your travel arrangements.

Whether you choose:

- A Single, Duo, Family or Individual cover
- Plans A, B, C, D, E, F, G, Basic Super Plus, Basic Super, Basic Standard, Basic Economy, Basic New Zealand/Indonesia/Fiji, Basic Annual Multi-Journey, Basic Domestic or Basic Non-Medical Cover

depends on the type of cover you want and are eligible to purchase.

Cover Types

You can choose one of the following cover types:

- | | |
|---------------|---|
| Single | Covers you and your Dependants travelling with you (<i>this cover type is not available for Plan G (Non-Medical Cover) or Basic Non-Medical Cover</i>). |
| Duo | Covers you and your Travelling Companion listed as covered on your Certificate of Insurance and intending to travel with you on your Journey. Duo cover does not provide cover for Dependants. We issue one Certificate of Insurance, however, you both have cover as if you are each insured under separate policies with Single benefit limits per insured person (<i>this cover type is not available for Plan B (Annual Multi-Journey), Plan G (Non-Medical Cover), Basic Annual Multi-Journey or Basic Non-Medical Cover</i>). |

- Family

Covers you and the members of your Family travelling with you (see page 12 for further details for Plan B (*Annual Multi-Journey*) or Basic Annual Multi-Journey). The benefit limits for Family cover apply to the total of all claims combined, regardless of the number of persons the claims relate to (*this cover type is not available for Plan G (Non-Medical Cover) or Basic Non-Medical Cover*).
- Individual

Covers you only, and does not provide cover for any other person. Individual cover does not provide cover for Dependants (*this cover type is only available for Plan G (Non-Medical Cover) or Basic Non-Medical Cover*).

Geographical regions

Destination	Plans
Australia and offshore territories (including Lord Howe Island, Norfolk Island, Cocos (Keeling) Island, Christmas Island, Thursday Island)	Plan C Domestic Plan E Non-Residents Plan F Domestic Advance Purchase Basic Domestic Basic Non-Residents
New Zealand, Indonesia & Fiji (excluding cruising to these destinations).	Plan A New Zealand/Indonesia/Fiji Basic New Zealand/Indonesia/Fiji
South-west Pacific & Indonesia (including Pacific cruising)	Plan A Economy Basic Economy
United Kingdom, Ireland & Asia (excluding Japan & Indonesia)	Plan A Standard Basic Standard
Europe, Egypt, Japan & Middle East	Plan A Super Basic Super
The Americas, Africa & Worldwide	Plan A Super Plus Plan B Annual Multi-Journey Plan D Medical & Liability Basic Super Plus Basic Annual Multi-Journey

International Plans (A, B, D, E, Basic Super Plus, Basic Super, Basic Standard, Basic Economy, Basic New Zealand/Indonesia/Fiji, Basic Annual Multi-Journey & Basic Non-Residents)

You must select the plan designated for your destination. If you have a multiple destination itinerary, you should select the plan for the destination where you spend the majority of your Journey Overseas, however, it is recommended that you take the highest prevailing cover.

Please note that under Plans A, B, D, Basic Super Plus, Basic Super, Basic Standard, Basic Economy, Basic New Zealand/Indonesia/Fiji and Basic Annual Multi-Journey, there is only cover under certain Sections while travelling in Australia - see below for details:

Plan A, Basic Super Plus, Basic Super, Basic Standard, Basic Economy & Basic New Zealand/Indonesia/Fiji
 You will only have cover under Sections 1A, 1B, 1C, 4, 6, 11, 13, 15 & 16 while travelling in Australia.

Plan B & Basic Annual Multi-Journey
 You will only have cover under Sections 1A, 1B, 1C, 4, & 6 to 16 while travelling in Australia.

Plan D
 You will only have cover under Section 15 while travelling in Australia.

Travel on Cruise Liners

Travellers on domestic cruises in Australian waters may also purchase Plan A Economy or Basic Economy to ensure cover is available for emergency medical assistance and emergency medical and Hospital expenses incurred onboard a foreign registered cruise vessel. No cover is provided for medical and Hospital expenses incurred in Australia.

If you do not purchase Plan A Economy or Basic Economy, you will not have cover for medical transfer or evacuation (for example, by helicopter) if you need to be transported to the nearest Hospital for emergency medical treatment.

Traditional table of benefits

Following is a table that sets out the cover that is provided under each Plan and the most we will pay for all claims under each Section.

Refer to **“Your policy cover”** pages 47 to 67 for details of what *We will pay* and what *We will not pay*, and which types of cover are provided under each plan. Importantly, please note that exclusions do apply, as well as limits to the cover.

All benefit limits and Excesses throughout this PDS are in Australian Dollars (AUD).

Duo cover

If you are travelling with a friend, both of you can save by purchasing a Duo cover. Cover is for 2 adults - no cover for Dependants (*Duo cover is not available for Plan B (Annual Multi-Journey)*).

If you are travelling in the course of your business, please see page 75 for information on how GST may affect your claims.

Policy section & benefit		PLAN A Super Plus		PLAN A Super		PLAN A Standard	
		single	family	single	family	single	family
*1A	Cancellation Fees & Lost Deposits	unlimited	unlimited	unlimited	unlimited	unlimited	unlimited
1B	Travel Service Provider Insolvency	\$10,000	\$20,000	\$10,000	\$20,000	\$10,000	\$20,000
1C	Wholesaler Insolvency	\$5,000	\$10,000	\$5,000	\$10,000	\$5,000	\$10,000
*2	Overseas Emergency Medical Assistance/ Evacuation	unlimited	unlimited	unlimited	unlimited	unlimited	unlimited
*3	Overseas Emergency Medical & Hospital Expenses	unlimited	unlimited	unlimited	unlimited	unlimited	unlimited
*4	Additional Expenses	\$50,000	\$100,000	\$50,000	\$100,000	\$35,000	\$70,000
*5	Hospital Cash Allowance	\$6,000	\$12,000	\$5,000	\$10,000	\$4,000	\$8,000
*6	Accidental Death	\$25,000	\$50,000	\$25,000	\$50,000	\$15,000	\$30,000
*7	Permanent Disability	\$50,000	\$100,000	\$25,000	\$50,000	\$15,000	\$30,000
*8	Loss of Income	\$10,400	\$20,800	\$10,400	\$20,800	\$5,200	\$10,400
9	Travel Documents, Credit Cards & Travellers Cheques	\$5,000	\$10,000	\$2,500	\$5,000	\$1,500	\$3,000
10	Theft of Cash	\$250	\$250	\$250	\$250	\$250	\$250
*11	Luggage & Personal Effects	\$10,000	\$20,000	\$8,000	\$16,000	\$6,000	\$12,000
*12	Luggage & Personal Effects Delay Expenses	\$500	\$1,000	\$300	\$600	\$250	\$500
*13	Travel Delay Expenses	\$2,000	\$4,000	\$2,000	\$4,000	\$2,000	\$4,000
14	Alternative Transport Expenses	\$5,000	\$10,000	\$3,000	\$6,000	\$2,000	\$4,000
15	Personal Liability	\$5 million	\$5 million	\$5 million	\$5 million	\$1 million	\$1 million
*16	Rental Vehicle Excess/Return of Rental Vehicle	\$8,000	\$8,000	\$4,000	\$4,000	\$4,000	\$4,000

** sub-limits apply - refer to the “Your policy cover” section of this PDS for details (pages 47 to 67)*

Traditional table continues on the following page.

Traditional table of benefits *(continued)*

Policy section & benefit		PLAN A Economy (incl Pacific cruising)		PLAN A New Zealand/ Indonesia/Fiji		PLAN B** Annual Multi-Journey	
		single	family	single	family	single	family
*1A	Cancellation Fees & Lost Deposits	unlimited	unlimited	unlimited	unlimited	unlimited	unlimited
1B	Travel Service Provider Insolvency	\$10,000	\$20,000	\$10,000	\$20,000	\$10,000	\$20,000
1C	Wholesaler Insolvency	\$5,000	\$10,000	\$5,000	\$10,000	\$5,000	\$10,000
*2	Overseas Emergency Medical Assistance/ Evacuation	unlimited	unlimited	unlimited	unlimited	unlimited	unlimited
*3	Overseas Emergency Medical & Hospital Expenses	unlimited	unlimited	unlimited	unlimited	unlimited	unlimited
*4	Additional Expenses	\$15,000	\$30,000	\$15,000	\$30,000	\$50,000	\$100,000
*5	Hospital Cash Allowance	\$2,000	\$4,000	\$2,000	\$4,000	\$6,000	\$12,000
*6	Accidental Death	\$10,000	\$20,000	\$10,000	\$20,000	\$25,000	\$50,000
*7	Permanent Disability	\$10,000	\$20,000	\$10,000	\$20,000	\$50,000	\$100,000
*8	Loss of Income	\$2,600	\$5,200	\$2,600	\$5,200	\$10,400	\$20,800
9	Travel Documents, Credit Cards & Travellers Cheques	\$1,000	\$2,000	\$1,000	\$2,000	\$5,000	\$10,000
10	Theft of Cash	\$250	\$250	\$250	\$250	\$250	\$250
*11	Luggage & Personal Effects	\$5,000	\$10,000	\$5,000	\$10,000	\$10,000	\$20,000
*12	Luggage & Personal Effects Delay Expenses	\$200	\$400	\$200	\$400	\$500	\$1,000
*13	Travel Delay Expenses	\$2,000	\$4,000	\$2,000	\$4,000	\$2,000	\$4,000
14	Alternative Transport Expenses	\$1,500	\$3,000	\$1,500	\$3,000	\$5,000	\$10,000
15	Personal Liability	\$1 million	\$1 million	\$1 million	\$1 million	\$5 million	\$5 million
*16	Rental Vehicle Excess/Return of Rental Vehicle	\$4,000	\$4,000	\$4,000	\$4,000	\$5,000	\$5,000

** sub-limits apply - refer to the "Your policy cover" section of this PDS for details (pages 47 to 67)*

**Plan B – Annual Multi-Journey

- 12 month policy
- Worldwide or Australia only Journeys
- Covers Sections 1A to 16 while travelling internationally and Sections 1A, 1B, 1C, 4 & 6 to 16 while travelling within Australia.
- Maximum period for any one Journey is 37 days for leisure travel or 90 days for business travel. A Journey can be made up of business and/or leisure travel (with the leisure component being up to 37 days), however, the whole Journey cannot exceed a total of 90 days.

- Cover reinstated on the completion of each Journey *(except for Section 15 (Personal Liability) - the amount shown in the Table of Benefits is the most we will pay for all claims combined under Section 15 for the 12 month policy period).*
- Single or Family* cover
"Family" cover includes you and:
 - your spouse or partner; or
 - your spouse or partner and Dependants** see page 12 for details*
- Not available for travellers aged 75 years and over

Traditional table continues on the following page.

Traditional table of benefits *(continued)*

Policy section & benefit		PLAN C Domestic		PLAN D Medical & Liability		PLAN E Non-Residents		PLAN F Domestic Advance Purchase
		<i>single</i>	<i>family</i>	<i>single</i>	<i>family</i>	<i>single</i>	<i>family</i>	<i>per person</i>
*1A	Cancellation Fees & Lost Deposits	\$20,000	\$40,000	—	—	unlimited	unlimited	#Choose cover of \$500, \$1,000, \$1,500 or \$2,500
1B	Travel Service Provider Insolvency	\$10,000	\$20,000	—	—	—	—	—
1C	Wholesaler Insolvency	\$5,000	\$10,000	—	—	—	—	—
*2	Overseas Emergency Medical Assistance/ Evacuation	—	—	unlimited	unlimited	unlimited	unlimited	—
*3	Overseas Emergency Medical & Hospital Expenses	—	—	unlimited	unlimited	unlimited	unlimited	—
*4	Additional Expenses	\$10,000	\$20,000	—	—	\$15,000	\$30,000	—
*5	Hospital Cash Allowance	—	—	—	—	\$1,500	\$3,000	—
*6	Accidental Death	\$5,000	\$10,000	—	—	\$10,000	\$20,000	—
*7	Permanent Disability	—	—	—	—	\$10,000	\$20,000	—
*8	Loss of Income	—	—	—	—	—	—	—
9	Travel Documents, Credit Cards & Travellers Cheques	—	—	—	—	\$1,000	\$2,000	—
10	Theft of Cash	—	—	—	—	—	—	—
*11	Luggage & Personal Effects	\$2,000	\$4,000	—	—	\$3,000	\$6,000	—
*12	Luggage & Personal Effects Delay Expenses	—	—	—	—	\$200	\$400	—
*13	Travel Delay Expenses	\$1,000	\$2,000	—	—	\$2,000	\$4,000	—
14	Alternative Transport Expenses	—	—	—	—	\$1,500	\$3,000	—
15	Personal Liability	\$1 million	\$1 million	\$5 million	\$5 million	\$5 million	\$5 million	—
*16	Rental Vehicle Excess/Return of Rental Vehicle	\$4,000	\$4,000	—	—	\$2,000	\$2,000	—

*sub-limits apply - refer to the “Your policy cover” section of this PDS for details (pages 47 to 67)

you must nominate the benefit limit for this Section from the amounts listed.
Please note that the most we will pay for all claims made under this Section is the amount you have nominated for this Section.

Basic table of benefits

Following is a table that sets out the cover that is provided under each Plan and the most we will pay for all claims under each Section.

Refer to **“Your policy cover”** pages 47 to 67 for details of what *We will pay* and what *We will not pay*, and which types of cover are provided under each plan. Importantly, please note that exclusions do apply, as well as limits to the cover.

All benefit limits and Excesses throughout this PDS are in Australian Dollars (AUD).

Duo cover

If you are travelling with a friend, both of you can save by purchasing a Duo cover. Cover is for 2 adults - no cover for Dependents (*Duo cover is not available for Basic Annual Multi-Journey.*

If you are travelling in the course of your business, please see page 75 for information on how GST may affect your claims.

Policy section & benefit		BASIC Super Plus		BASIC Super		BASIC Standard	
		single	family	single	family	single	family
*1A	Cancellation Fees & Lost Deposits	\$3,000	\$6,000	\$3,000	\$6,000	\$3,000	\$6,000
1B	Travel Service Provider Insolvency	\$3,000	\$6,000	\$3,000	\$6,000	\$3,000	\$6,000
1C	Wholesaler Insolvency	\$500	\$1,000	\$500	\$1,000	\$500	\$1,000
*2	Overseas Emergency Medical Assistance/ Evacuation	unlimited	unlimited	unlimited	unlimited	unlimited	unlimited
*3	Overseas Emergency Medical & Hospital Expenses	unlimited	unlimited	unlimited	unlimited	unlimited	unlimited
*4	Additional Expenses	\$5,000	\$10,000	\$5,000	\$10,000	\$5,000	\$10,000
*5	Hospital Cash Allowance	\$3,000	\$6,000	\$3,000	\$6,000	\$3,000	\$6,000
*6	Accidental Death	\$10,000	\$20,000	\$10,000	\$20,000	\$10,000	\$20,000
*7	Permanent Disability	\$10,000	\$20,000	\$10,000	\$20,000	\$10,000	\$20,000
*8	Loss of Income	\$5,200	\$10,400	\$5,200	\$10,400	\$5,200	\$10,400
9	Travel Documents, Credit Cards & Travellers Cheques	\$500	\$1,000	\$500	\$1,000	\$500	\$1,000
10	Theft of Cash	\$250	\$250	\$250	\$250	\$250	\$250
*11	Luggage & Personal Effects	\$3,000	\$6,000	\$3,000	\$6,000	\$3,000	\$6,000
*12	Luggage & Personal Effects Delay Expenses	\$250	\$500	\$250	\$500	\$250	\$500
*13	Travel Delay Expenses	\$1,000	\$2,000	\$1,000	\$2,000	\$1,000	\$2,000
14	Alternative Transport Expenses	\$2,000	\$4,000	\$2,000	\$4,000	\$2,000	\$4,000
15	Personal Liability	\$1 million	\$1 million	\$1 million	\$1 million	\$1 million	\$1 million
*16	Rental Vehicle Excess/Return of Rental Vehicle	\$2,000	\$2,000	\$2,000	\$2,000	\$2,000	\$2,000

** sub-limits apply - refer to the “Your policy cover” section of this PDS for details (pages 47 to 67)*

Basic table of benefits *(continued)*

Policy section & benefit		BASIC Economy (incl Pacific cruising)		BASIC New Zealand/ Indonesia/Fiji		BASIC Domestic	
		<i>single</i>	<i>family</i>	<i>single</i>	<i>family</i>	<i>single</i>	<i>family</i>
*1A	Cancellation Fees & Lost Deposits	\$3,000	\$6,000	\$3,000	\$6,000	\$3,000	\$6,000
1B	Travel Service Provider Insolvency	\$3,000	\$6,000	\$3,000	\$6,000	\$3,000	\$6,000
1C	Wholesaler Insolvency	\$500	\$1,000	\$500	\$1,000	\$500	\$1,000
*2	Overseas Emergency Medical Assistance/ Evacuation	unlimited	unlimited	unlimited	unlimited	—	—
*3	Overseas Emergency Medical & Hospital Expenses	unlimited	unlimited	unlimited	unlimited	—	—
*4	Additional Expenses	\$5,000	\$10,000	\$5,000	\$10,000	\$5,000	\$10,000
*5	Hospital Cash Allowance	\$3,000	\$6,000	\$3,000	\$6,000	—	—
*6	Accidental Death	\$10,000	\$20,000	\$10,000	\$20,000	\$10,000	\$20,000
*7	Permanent Disability	\$10,000	\$20,000	\$10,000	\$20,000	—	—
*8	Loss of Income	\$5,200	\$10,400	\$5,200	\$10,400	—	—
9	Travel Documents, Credit Cards & Travellers Cheques	\$500	\$1,000	\$500	\$1,000	—	—
10	Theft of Cash	\$250	\$250	\$250	\$250	—	—
*11	Luggage & Personal Effects	\$3,000	\$6,000	\$3,000	\$6,000	\$3,000	\$6,000
*12	Luggage & Personal Effects Delay Expenses	\$250	\$500	\$250	\$500	—	—
*13	Travel Delay Expenses	\$1,000	\$2,000	\$1,000	\$2,000	\$1,000	\$2,000
14	Alternative Transport Expenses	\$2,000	\$4,000	\$2,000	\$4,000	—	—
15	Personal Liability	\$1 million	\$1 million	\$1 million	\$1 million	\$1 million	\$1 million
*16	Rental Vehicle Excess/Return of Rental Vehicle	\$2,000	\$2,000	\$2,000	\$2,000	\$2,000	\$2,000

** sub-limits apply - refer to the "Your policy cover" section of this PDS for details (pages 47 to 67)*

Basic table of benefits *(continued)*

Policy section & benefit		BASIC** Annual Multi-Journey		BASIC Non-Residents	
		<i>single</i>	<i>family</i>	<i>single</i>	<i>family</i>
*1A	Cancellation Fees & Lost Deposits	\$3,000	\$6,000	\$3,000	\$6,000
1B	Travel Service Provider Insolvency	\$3,000	\$6,000	—	—
1C	Wholesaler Insolvency	\$500	\$1,000	—	—
*2	Overseas Emergency Medical Assistance/ Evacuation	unlimited	unlimited	unlimited	unlimited
*3	Overseas Emergency Medical & Hospital Expenses	unlimited	unlimited	unlimited	unlimited
*4	Additional Expenses	\$5,000	\$10,000	\$5,000	\$10,000
*5	Hospital Cash Allowance	\$3,000	\$6,000	\$3,000	\$6,000
*6	Accidental Death	\$10,000	\$20,000	\$10,000	\$20,000
*7	Permanent Disability	\$10,000	\$20,000	\$10,000	\$20,000
*8	Loss of Income	\$5,200	\$10,400	—	—
9	Travel Documents, Credit Cards & Travellers Cheques	\$500	\$1,000	\$500	\$1,000
10	Theft of Cash	\$250	\$250	—	—
*11	Luggage & Personal Effects	\$3,000	\$6,000	\$3,000	\$6,000
*12	Luggage & Personal Effects Delay Expenses	\$250	\$500	\$250	\$500
*13	Travel Delay Expenses	\$1,000	\$2,000	\$1,000	\$2,000
14	Alternative Transport Expenses	\$2,000	\$4,000	\$2,000	\$4,000
15	Personal Liability	\$1 million	\$1 million	\$1 million	\$1 million
*16	Rental Vehicle Excess/Return of Rental Vehicle	\$2,000	\$2,000	\$2,000	\$2,000

* sub-limits apply - refer to the “Your policy cover” section of this PDS for details (pages 47 to 67)

**Basic Annual Multi-Journey

- 12 month policy
- Worldwide or Australia only Journeys
- Covers Sections 1A to 16 while travelling internationally and Sections 1A, 1B, 1C, 4 & 6 to 16 while travelling within Australia.
- Maximum period for any one Journey is 37 days for leisure travel or 90 days for business travel. A Journey can be made up of business and/or leisure travel (with the leisure component being up to 37 days), however, the whole Journey cannot exceed a total of 90 days.

- Cover reinstated on the completion of each Journey *(except for Section 15 (Personal Liability) - the amount shown in the Table of Benefits is the most we will pay for all claims combined under Section 15 for the 12 month policy period).*
- Single or Family* cover
“Family” cover includes you and:
 - your spouse or partner; or
 - your spouse or partner and Dependants** see page 12 for details*
- Not available for travellers aged 75 years and over

Additional options

Specified luggage & personal effects cover

This additional option is not available under Plans D, E, F or Basic Non-Residents.

The maximum amount we will pay for all claims combined under Section 11 (*Luggage and Personal Effects*) is shown under the “**Traditional table of benefits**” pages 18 to 23 or the “**Basic table of benefits**” pages 24 to 29 for the plan you have selected.

Please note: for the purposes of this additional option and Section 11:

- “specified items” refers to Luggage and Personal Effects that have been listed as covered on your Certificate of Insurance with a nominated sum insured.
- “unspecified items” refers to Luggage and Personal Effects that have not been specifically listed on your Certificate of Insurance.

Depending on the plan you choose, cover for any unspecified item is limited as set out below:

Plans A, B (Annual Multi-Journey) & G (Non-Medical Cover)

- \$4,000 for personal computers, video recorders or cameras
- \$2,000 for golf clubs
- \$1,000 for mobile phones (including PDAs and any items with phone capabilities)
- \$750 for all other unspecified items

Plans C (Domestic), Basic Super Plus, Basic Super, Basic Standard, Basic Economy, Basic New Zealand/Indonesia/Fiji, Basic Annual-Multi Journey, Basic Domestic & Basic Non-Medical Cover

- \$1,500 for personal computers, video recorders or cameras
- \$1,000 for golf clubs
- \$1,000 for mobile phones (including PDAs and any items with phone capabilities)
- \$750 for all other unspecified items

Additional cover can be purchased for specified items (**excluding jewellery, bicycles and watercraft other than surfboards**) up to a total amount of \$5,000 for all items combined, by paying an additional premium at the time your Certificate of Insurance is issued.

There is no cover for bicycles or watercraft (other than surfboards) under the policy. These items must not be specified and cover will not be provided for them.

Your nominated limit for “*Specified luggage and personal effects cover*” will be shown on your Certificate of Insurance. Receipts and/or valuations must be provided in the event of a claim.

Depreciation and the standard item limits shown above and under Section 11.1 b] will not apply to any specified items.

Removal of Standard Excess

You can remove the standard \$100 Excess by paying an additional premium.

The standard \$100 Excess does not apply to Plan F.

Please contact us for details on additional premiums.

Pre-existing medical conditions

Please read this section carefully.

Unless otherwise agreed, the policy only provides medical and Hospital expenses cover for unforeseen emergency medical events which occurred Overseas. Medical conditions that were pre-existing at or before the time of the policy being issued are not covered, unless they are a condition that we expressly agree to cover.

If you have a Pre-existing Medical Condition that is not covered, we will not pay any claims arising from, related to or associated with that condition. This means that you may have to pay for an Overseas medical emergency which can be very expensive in some countries.

Pre-existing Medical Condition is defined in the section headed **Words with Special Meanings**.

Medical conditions/circumstances which automatically exclude all cover for medical or Hospital expenses

If you have any of the medical conditions/circumstances listed below, we are unable to offer you cover under the policy for any type of medical or Hospital expenses. This means that if you suffer from such a medical condition/circumstance, you will not have medical or Hospital expenses cover for these medical conditions/ circumstances, or for any other medical conditions or circumstances which are not listed below:

- you are awaiting, or you have had, an organ transplant;
- you have been given a terminal prognosis, or have any condition with a life expectancy of under 24 months;
- you require home oxygen therapy, or you will require oxygen for the Journey;
- you have AIDS or an AIDS defining illness; or
- you have chronic renal failure which is treated by haemodialysis or peritoneal dialysis.

If you suffer from any of the above medical conditions/circumstances, then you will still be able to obtain cover under Plan G (*Non-Medical Cover*) or Basic Non-Medical Cover — see benefit table on page 34. If you are covered under either Plan G or Basic Non-Medical Cover, there will be no provision to claim under the following Sections of the policy for any claims arising from, related to or associated with any Injury or Sickness suffered by you:

- Section 1A: Cancellation Fees & Lost Deposits
- Section 4: Additional Expenses

This means that under Plan G or Basic Non-Medical Cover, we will not pay:

- any medical or Hospital expenses; or
- your Journey cancellation or rearrangement costs; or
- any additional or out of pocket expenses (including additional travel and accommodation expenses)

Please contact your distributor for further details.

Table of Benefits		Plan G Non-Medical Cover	Basic Non-Medical Cover
Policy section and benefit types		Individual	Individual
*1A	Cancellation Fees & Lost Deposits	unlimited	\$3,000
1B	Travel Services Provider Insolvency	\$10,000	\$3,000
1C	Wholesaler Insolvency	\$5,000	\$500
*4	Additional Expenses	\$50,000	\$5,000
*6	Accidental Death	\$25,000	\$10,000
*7	Permanent Disability^	\$50,000	\$10,000
9	Loss of Travel Documents, Credit Cards & Travellers Cheques	\$5,000	\$500
10	Theft of Cash	\$250	\$250
*11	Luggage & Personal Effects	\$10,000	\$3,000
12	Luggage & Personal Effects Delay Expenses^	\$500	\$250
*13	Travel Delay Expenses	\$2,000	\$1,000
14	Alternative Transport Expenses	\$5,000	\$2,000
15	Personal Liability	\$5 million	\$1 million
*16	Rental Vehicle Excess/Return of Rental Vehicle	\$8,000	\$2,000

** sub-limits apply - refer to “Your policy cover” on pages 47 to 67 for details.*

^ you do not have cover under these Sections while travelling in Australia.

Conditions which are undiagnosed or awaiting specialist opinion

Please note that we are unable to offer any cover for any medical conditions that you were aware of, or arising from signs or symptoms that you were aware of when this policy was issued, and for which at that time:

- you had not yet sought a medical opinion regarding the cause; or
- you were currently under investigation to define a diagnosis; or
- you were waiting specialist opinion.

You may still purchase a travel insurance policy, or apply for cover of other Pre-existing Medical Conditions, however, there will be no provision to claim under any Section of the policy for any claims arising from, related to or associated with any of the above.

Pre-existing medical conditions which may be covered with no additional premium payable

Cover under the policy may be provided for a Pre-existing Medical Condition if the Pre-existing Medical Condition is described in the list below, provided that you have not been hospitalised (including day surgery or emergency department attendance) for that condition in the 18 months prior to the time of policy issue.

We do not require any further information if your Pre-existing Medical Condition is described in this list, and has not given rise to your hospitalisation (including day surgery or emergency department attendance) in the 18 months prior to the time of the policy being issued:

- 1) Acne
- 2) Asthma – provided:
 - you are under 60 years of age, and
 - you have no other diagnosed lung disease.
- 3) Bunions
- 4) Carpal Tunnel Syndrome
- 5) Cataracts
- 6) Cleft Palate
- 7) Cochlear Implant
- 8) Coeliac Disease
- 9) Congenital Adrenal Hyperplasia

- 10) Congenital Blindness
- 11) Congenital Deafness
- 12) Conjunctivitis
- 13) Dengue Fever
- 14) Diabetes Type 1 or Type 2, or Glucose Intolerance provided:
 - you were diagnosed over 6 months ago, and
 - you have had no complications in last 12 months, and
 - you have had no kidney, eye or neuropathy complications or cardiovascular disease, and
 - you are under 50 years of age.
- 15) Dry Eye Syndrome
- 16) Dupuytren's Contracture
- 17) Ear Grommets, if no current infection
- 18) Eczema
- 19) Gastric Reflux (GORD)
- 20) Glaucoma
- 21) Gout
- 22) Hay Fever
- 23) Hiatus Hernia if no surgery planned
- 24) Hormone Replacement Therapy
- 25) Hypercholesterolaemia (High Cholesterol) provided no cardiovascular disease and/or no Diabetes
- 26) Hyperlipidaemia (High Blood Lipids) provided no cardiovascular disease and/or no Diabetes
- 27) Hypertension provided no cardiovascular disease and/or no Diabetes
- 28) Hypothyroidism, including Hashimoto's Disease
- 29) Lipoma
- 30) Macular Degeneration
- 31) Meniere's Disease
- 32) Rhinitis
- 33) Rosacea
- 34) Sinusitis
- 35) Tinnitus
- 36) Single uncomplicated pregnancy, up to and including 23 weeks, not arising from services or treatment associated with an assisted reproduction program including, but not limited to, in vitro fertilisation (IVF).

Unless you qualify for Plan G (*Non-Medical Cover*) or Basic Non-Medical Cover, the above conditions are available to you regardless of whether you elect not to pay the premium for cover of your Pre-existing Medical Condition(s) or had cover declined for your Pre-existing Medical Conditions.

However, if you have been hospitalised (including day surgery or emergency department attendance) for the Pre-existing Medical Condition in the 18 months prior to the time of policy issue, or your Pre-existing Medical Condition does not meet the description above, then we will require further information from you and cover may be excluded.

Please refer to 'How do I obtain cover for my pre-existing medical condition?' below if your Pre-existing Medical Condition is not described above, or is described but has caused hospitalisation (including day surgery or emergency department attendance) in the 18 months prior to the time of policy issue.

Note that while Pre-existing Medical Conditions not described above will require assessment, there are a range of medical conditions which may not result in any additional premium being charged.

How do I obtain cover for my pre-existing medical condition?

If you think you have a Pre-existing Medical Condition and would like cover for that condition, please contact your distributor.

You cannot apply for cover of Pre-existing Medical Conditions under Plans D, E, F, G, Basic Non-Residents or Basic Non-Medical Cover.

If you have any questions about Pre-existing Medical Conditions, please contact your distributor.

Please note that if you have a Pre-existing Medical Condition and:

- a) you do not apply for cover for that Pre-existing Medical Condition; or
- b) you apply for cover for that Pre-existing Medical Condition and we do not agree to provide cover for that Pre-existing Medical Condition; or
- c) we agree to provide cover for that Pre-existing Medical Condition and you do not pay the relevant additional premium,

we **will not** pay any claims arising from, related to or associated with your Pre-existing Medical Condition.

You cannot apply for cover for any medical conditions/ circumstances which automatically exclude all cover for medical or Hospital expenses as listed under the heading 'Medical conditions/circumstances which automatically exclude all cover for medical or Hospital expenses' on page 33 of this PDS.

PLEASE ALSO READ THE "GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS" ON PAGES 68 TO 72 AND THE SECTION-SPECIFIC EXCLUSIONS ON PAGES 47 TO 67.

Important matters

Under your policy there are rights and responsibilities which you and we have. You must read this PDS in full for more details, but here are some you should be aware of.

Limitation of cover

Notwithstanding anything contained in this PDS we will not provide cover nor will we make any payment or provide any service or benefit to any person or party where providing such cover, payment, service or benefit would contravene or violate any applicable trade or economic sanction or any law or regulation.

Period of cover

You are not covered until we issue a Certificate of Insurance. That Certificate forms part of your policy. The period you are insured for is set out on the Certificate.

All Plans* except Plans D & F

- The cover under Section 1A Cancellation Fees & Lost Deposits, Section 1B Travel Services Provider Insolvency and Section 1C Wholesaler Insolvency begins from the time the policy is issued.
- Cover for all other Sections begins on the date of departure as stated on your Certificate of Insurance.
- Cover ends when you return to your Home, or when we return you to Australia, or on the date of return set out on your Certificate of Insurance, whichever happens first.
- * for Residents of Australia already Overseas who have purchased a policy after leaving Australia (see pages 11 & 12 for list of eligible plans):
 - cover begins from the time the policy issued (*a waiting period of 48 hours from the Issue Date as stated on your Certificate of Insurance applies to all claims arising from, related to or associated with any Injury or Sickness, regardless of the Section that applies to the claim (refer to 'For Residents of Australia already Overseas' pages 11 & 12 for details).*
 - cover ends when you return to your Home or the place you intend to reside in Australia, or on the date of return set out on your Certificate of Insurance, whichever happens first.
Refer to page 12 for the amended definition of "Journey" for these policies.

Under Plan B (Annual Multi-Journey) and Basic Annual Multi-Journey, the maximum period for any one Journey is 37 days for leisure travel

or 90 days for business travel. A Journey can be made up of business and/or leisure travel (with the leisure component being up to 37 days), however, the whole Journey cannot exceed a total of 90 days.

Plan D

- Cover for all Sections begins on the date of departure as stated on your Certificate of Insurance.
- Cover ends when you return to your Home, or when we return you to Australia, or on the date of return set out on your Certificate of Insurance, whichever happens first.

Plan E & Basic non-Residents

- The cover under Section 1A Cancellation Fees & Lost Deposits begins from the time the policy is issued.
- Cover for all other Sections begins on the date of departure as stated on your Certificate of Insurance.
- Cover ends when you return to your Home, or when we return you to Australia, or on the date of return set out on your Certificate of Insurance, whichever happens first.

Plan F

- The cover under Section 1A Cancellation Fees & Lost Deposits begins from the time the policy is issued.
- Cover ends when you return to your Home, or when we return you to Australia, or on the date of return set out on your Certificate of Insurance, whichever happens first.

Cooling-off period

If you decide that you do not want this policy, you may cancel it within 14 days after you are issued your Certificate of Insurance and PDS, provided you have not started your Journey and you do not want to make a claim or to exercise any other right under the policy. You will be given a full refund of the premium you paid when exercising your cooling-off right.

After this period you can still cancel your policy, but we will not refund any part of your premium if you do.

If this insurance has been submitted to fulfil any visa requirements we hold the right to notify any visa authority that this policy has been cancelled under the cooling-off period.

Extension of cover

You may extend your cover free of charge if you find that your return to Australia has been delayed because of one or more of the following:

- a bus line, airline, shipping line or rail authority you are travelling on, or that has accepted your fare or Luggage and Personal Effects, is delayed; or
- the delay is due to a reason for which you can claim under your policy (subject to our written approval).

If the delay is for any other reason other than as stated above, we must receive your request to extend your cover at least 7 days before your original policy expires if you send your request by post.

All other requests to extend your cover must be received prior to your original policy expiry date. Cover will be extended subject to our written approval, and your payment of the additional premium.

Where we have agreed to extend cover, we will issue you with a new Certificate of Insurance. The period of cover on your new Certificate cannot exceed 12 months.

Cover cannot be extended:

- for any Pre-existing Medical Condition, unless it is listed under the heading '*Pre-existing medical conditions which may be covered with no additional premium payable*' on pages 35 to 37, and you have not been hospitalised (including day surgery or emergency department attendance) for that condition in the 18 months prior to application for the extension. This applies even if cover for your Pre-existing Medical Condition was provided under the original policy; or
- for any medical conditions you suffered during the term of your original policy; or
- where you have not advised us of any circumstances that have given (or may give) rise to a claim under your original policy; or
- where at the time of application for the extension you are aged 75 years or over under Plans A, C, D, F, Basic Super Plus, Basic Super, Basic Standard, Basic Economy, Basic New Zealand/Indonesia/Fiji & Basic Domestic Cover; or aged 81 years or over under Plans E & Basic Non-Resident; or
- under Plan B, G, Basic Annual Multi-Journey & Basic Non-Medica.

Confirmation of cover

To confirm any policy transaction (if the Certificate of Insurance does not have all the information you require), call Allianz Global Assistance (see the contact details on the back cover of this PDS).

Jurisdiction and choice of law

This contract of insurance is governed by and construed in accordance with the law of Queensland, Australia and you agree to submit to the exclusive jurisdiction of the courts of Queensland. You agree that it is your intention that this Jurisdiction and Choice of Law clause applies.

General Insurance Code of Practice

We proudly support the General Insurance Code of Practice. The Code sets out the minimum standards of practice in the general insurance industry. For more information on the Code please contact Allianz Global Assistance on 1300 725 154.

Your Duty of Disclosure

Before you enter into this insurance with us, you have a duty of disclosure under the Insurance Contracts Act 1984.

The Act imposes a different duty the first time you enter into a contract of insurance with us to that which applies when you vary, extend, reinstate or replace the contract.

This duty of disclosure applies until the contract is entered into (or varied, extended or reinstated as applicable).

Your duty of disclosure when you enter into the contract with us for the first time

When answering our specific questions that are relevant to our decision whether to accept the risk of the insurance and, if so, on what terms, you must be honest and disclose to us anything that you know and that a reasonable person in the circumstances would include in answer to the questions.

It is important that you understand that you are answering our questions in this way for yourself and anyone else that you want to be covered by the contract.

Your duty of disclosure when you vary, extend, reinstate or replace the contract

When you vary, extend, reinstate or replace the contract with us, your duty is to disclose every matter that you know, or could reasonably be expected to know, is relevant to our decision whether to accept the risk of the insurance and, if so, on what terms.

What you do not need to tell us

Your duty however, does not require disclosure of any matter:

- that diminishes the risk to be undertaken by us; or
- that is of common knowledge; or
- that we know or, in the ordinary course of business as an insurer, ought to know; or
- as to which compliance with your duty is waived by us.

Non-disclosure

If you fail to comply with your duty of disclosure, we may be entitled to reduce our liability under the contract in respect of a claim, cancel the contract or both.

If your non-disclosure is fraudulent, we may also have the option of avoiding the contract from its beginning.

Financial Claims Scheme

In the unlikely event Allianz Australia Insurance Limited were to become insolvent and could not meet its obligations under the policy, a person entitled to claim may be entitled to payment under the Financial Claims Scheme.

Access to the Scheme is subject to eligibility criteria. More information can be obtained from <http://www.fcs.gov.au>.

Dispute resolution process

In this section, “we”, “our” and “us” means Allianz and Allianz Global Assistance.

If you have a complaint or dispute in relation to this insurance, or our services or our representatives, please call us on 1300 725 154 or put the complaint in writing and send it to The Dispute Resolution Department, PO Box 162, Toowong, Queensland 4066. We will attempt to resolve the matter in accordance with our Internal Dispute Resolution process. To obtain a copy of our procedures, please contact us.

A dispute can be referred to the Financial Ombudsman Service Australia (FOS), subject to its terms of reference. The FOS provides a free and independent dispute resolution service for consumers who have general insurance disputes falling within its terms. The contact details for the FOS are:

Financial Ombudsman Service Australia (FOS)

GPO Box 3, Melbourne Victoria 3001

Phone: 1800 367 287

Fax: (03) 9613 6399

Website: www.fos.org.au

Email: info@fos.org.au

Privacy notice

To arrange and manage your travel insurance, we (in this Privacy Notice “we”, “our” and “us” includes AWP Australia Pty Ltd trading as Allianz Global Assistance and its duly authorised representatives) collect personal information including sensitive information from you and those authorised by you such as your family members, Travelling Companions, your doctors, Hospitals, as well as from others we consider necessary including our agents.

Any personal information provided to us is used by us to evaluate and arrange your travel insurance. We also use it to administer and provide the insurance services and manage your and our rights and obligations in relation to those insurance services, including managing, processing and investigating claims.

We may also collect, use and disclose it for product development, marketing, conducting customer research and analytics in relation to all of our products and services, IT systems maintenance and development, recovery against third parties and for other purposes with your consent or where authorised by law.

This personal information may also be disclosed to third parties involved in the above process, such as travel agents and consultants, travel insurance providers and intermediaries, authorised representatives, reinsurers, claims handlers and investigators, cost containment providers, medical and health service providers, overseas data storage and data handling providers, legal and other professional advisers, your agents and our related and group companies including Allianz.

Some of these third parties may be located in other countries such as Thailand, France and India. You agree that while those parties will often be subject to confidentiality or privacy obligations, they may not always follow the particular requirements of Australian privacy laws.

Unless you opt out, we may contact you on an ongoing basis by telephone, mail, electronic messages (including email), online and via other means with promotional material and offers of products or services that we consider may be relevant and of interest to you (including financial and insurance products and roadside assistance services). If you do not want to receive such offers from us (including product or service offerings from us on behalf of our agents, intermediaries and/or our business partners) or do not want us to disclose your personal information to our related and group companies and business partners for marketing purposes, you can opt out at any time by calling us on 1800 023 767.

When you provide personal information about other individuals, we and our agents rely on you to have made or make them aware:

- that you will or may provide their personal information to us;

- of the types of third parties to whom the personal information may be provided to;
- of the relevant purposes we and the third parties we will disclose it to, will use it for;
- of how they can access it; and
- of the other matters in this Privacy Notice.

We rely on you to have obtained their consent on these matters. If you do not, you must tell us before you provide the relevant information.

You can seek access to and correct your personal information by contacting us. You may not access or correct personal information of others unless you have been authorised by their express consent or otherwise under law, or unless they are your children under 16 years of age.

If you have a complaint about your privacy, please contact:

Privacy Officer, Allianz Global Assistance, PO Box 162, Toowong, QLD 4066

or you can contact the Privacy Commissioner at the Office of The Australian Information Commissioner, GPO Box 2999, Canberra, ACT 2601.

For more information about our handling of personal information, including further details about access, correction and complaints, please see our privacy policy available on request or via www.allianz-assistance.com.au.

If you do not agree to the above or will not provide us with personal information, we may not be able to provide you with our services or products or may not be able to process your application nor issue you with a policy. In cases where we do not agree to give you access to some personal information, we will give you reasons why.

Overseas hospitalisation or medical evacuation

For emergency assistance anywhere in the world at any time, Allianz Global Assistance is only a telephone call away. The team will help with:

- medical problems, locating nearest medical facilities, access to a Medical Adviser for emergency medical treatment while Overseas, provision of any written guarantees for payment of Reasonable expenses for emergency hospitalisation while Overseas, your evacuation Home;
- locating nearest embassies and consulates, and
- any messages which need to be passed on to your family or employer in the case of an emergency.

If you are hospitalised you, or a member of your travelling party, MUST contact Allianz Global Assistance as soon as possible. If you do not, then to the extent permissible by law, we will not pay for these expenses or for any evacuation or airfares that have not been approved or arranged by Allianz Global Assistance.

If you are not hospitalised but you are being treated as an outpatient and the total cost of such treatment will exceed \$2,000, you MUST contact Allianz Global Assistance.

Please note that we will not pay for any Hospital or medical costs incurred in your Country of Residence.

You can choose your own doctor

You are free to choose your own Medical Adviser or we can appoint an approved Medical Adviser to see you, unless you are treated under a Reciprocal Health Care Agreement. You must, however, advise Allianz Global Assistance of your admittance to Hospital or your early return to Australia based on written medical advice.

If you do not get the medical treatment you expect, Allianz Global Assistance can assist you, but neither Allianz nor Allianz Global Assistance are liable for anything that results from that.

Excess

Plans A, B, Basic Super Plus, Basic Super, Basic Standard, Basic Economy, Basic New Zealand/Indonesia/Fiji & Basic Annual Multi-Journey

We will not pay the first \$100 for any one event under Sections* 1A, 1B, 1C, 3, 9, 10, 11, 15 & 16.

A NIL Excess applies to all other Sections.

** Refer to the “Traditional table of benefits” on pages 18 to 23 and “Basic table of benefits” on pages 24 to 29 for details of which Sections are available under each plan.*

You can remove the standard \$100 Excess by paying an additional premium (see “Additional options” pages 30 & 31).

Plan C & Basic Domestic

We will not pay the first \$100 for any one event under Sections* 1A, 1B, 1C, 11, 15 & 16.

A NIL Excess applies to all other Sections.

** Refer to the “Traditional table of benefits” on pages 18 to 23 and “Basic table of benefits” on pages 24 to 29 for details of which Sections are available under each plan.*

You can remove the standard \$100 Excess by paying an additional premium (see “Additional options” pages 30 & 31).

Plan D

We will not pay the first \$100 for any one event under Sections 3 & 15.

A NIL Excess applies to Section 2.

You can remove the standard \$100 Excess by paying an additional premium (see **"Additional options"** pages 30 & 31).

Plan E & Basic Non-Residents

We will not pay the first \$100 for any one event under Sections* 1A, 3, 9, 11, 15 & 16.

A NIL Excess applies to all other Sections.

** Refer to the **"Traditional table of benefits"** on pages 18 to 23 and **"Basic table of benefits"** on pages 24 to 29 for details of which Sections are available under each plan.*

You can remove the standard \$100 Excess by paying an additional premium (see **"Additional options"** pages 30 & 31).

Plan F

A NIL Excess applies.

Plan G & Basic Non-Medical Cover

We will not pay the first \$100 for any one event under Sections* 1A, 1B, 1C, 9, 10, 11, 15 & 16.

A NIL Excess applies to all other Sections.

You can remove the standard \$100 Excess by paying an additional premium (see **"Additional options"** pages 30 & 31).

Please Note: If any additional Excess applies to your policy, the amount is shown on the Certificate of Insurance, Medical Terms of Cover Letter or advised to you in writing before the Certificate is issued to you.

In the event of a claim

Immediate notice of an event giving rise to a claim should be given to Allianz Global Assistance (see contact details on the back cover of this PDS).

Please Note: For claims purposes, evidence of the value of the property insured or the amount of any loss must be kept.

Claims processing

We will process your claim within 10 business days of receiving a completed claim form and all necessary documentation. If we need additional information, a written notification will be sent to you within 10 business days.

Your policy cover

This part of the PDS outlines what *We will pay* and what *We will not pay* under each Section in the event of a claim.

You must also check **"General exclusions applicable to all sections"** on pages 68 to 72 for other reasons why we will not pay.

See **"Words with special meanings"** on pages 6 to 10 for the meanings of words that apply throughout this PDS.

You only have cover under a Section if the **"Traditional table of benefits"** or the **"Basic table of benefits"** on pages 18 to 29 shows that there is cover for the Section under the plan you have selected.

The most we will pay for the total of all claims under each Section is shown in the **"Traditional table of benefits"** or the **"Basic table of benefits"** for the plan you have selected. Sub-limits may also apply to particular types of losses or claims.

Section 1A – Cancellation Fees & Lost Deposits

Cover is available under all Plans except Plan D.

(See below & page 49 for details of cover under Section 1A 1.1 c] & e])

1.1 We will pay

- a) We will pay your cancellation fees and lost deposits on travel and accommodation arrangements that you have paid in advance and cannot recover in any other way if your Journey is cancelled or shortened at any time through circumstances neither expected nor intended by you and outside your control.
- b) We will pay the reasonable costs of rescheduling your Journey because something unforeseen and outside of your control occurs. The most we will pay for rescheduling your Journey is the cost of the cancellation fees and lost deposits that would have been payable under Section 1A 1.1 a], c] and d] had your Journey been cancelled.

Cover under 1A 1.1 c] does not apply to Plan F.

- c) We will pay the travel agent's cancellation fees, **up to the amounts set out below**, where all monies have been paid, or the maximum amount of the deposit has been paid, at the time of cancellation. However, we will not pay more than the level of commission or service fees normally earned by the agent, had your Journey not been cancelled. Documentary evidence of the travel agent's fee is required.

The maximum we will pay is as follows:

- \$2,000 for Single cover
 - \$2,000 per person for Duo cover
 - \$4,000 for Family cover
 - \$2,000 for Individual cover
- d) We will pay you for loss of frequent flyer or similar air travel points you used to purchase an airline ticket following cancellation of that airline ticket, if you cannot recover the lost points from any other source. The cancellation must be due to unforeseen circumstances outside of your control. We calculate the amount we pay you by multiplying:
- the cost of an equivalent class airline ticket based on the quoted retail price at the time the ticket was issued, less your financial contribution toward the airline ticket;
- multiplied by:
- the total number of points lost
- divided by the total number of points used to obtain the ticket.

Cover under 1A 1.1 e] only applies to Plans A, B, C, E or G

- e) If a Relative of yours or your Travelling Companion is hospitalised in Australia or New Zealand, or dies in Australia or New Zealand after the policy is issued as a result of a Pre-existing Medical Condition, we will not cover you unless at the time of policy issue you were unaware of the likelihood of such hospitalisation or death. However, the maximum we will pay under this Section is as follows:
- \$2,000 for Single cover
 - \$2,000 per person for Duo cover
 - \$4,000 for Family cover
 - \$2,000 for Individual cover

1.2 We will not pay

- a) We will not pay if you were aware of any reason, before your period of cover commenced, that may cause your Journey to be cancelled, abandoned or shortened.

Nor will we pay if your cancellation fees or lost deposits arise because of:

- b) the death, Injury or Sickness of your, or your Travelling Companion's Relative arising from a Pre-existing Medical Condition, except as specified under Section 1A 1.1 e).

- c) you or your Travelling Companion changing plans.
- d) any business, financial or contractual obligations. This exclusion does not apply to claims where you or your Travelling Companion are made redundant from full-time employment in Australia, provided you or they were not aware that the redundancy was to occur before you purchased your policy.
- e) a tour operator or wholesaler being unable to complete arrangements for any tour because there were not enough people to go on the tour. This exclusion does not apply in relation to prepaid travel arrangements bought separately to reach the departure point for the tour or other travel arrangements.
- f) delays or rescheduling by a bus line, airline, shipping line or rail authority.
- g) the financial collapse or Insolvency of any transport, tour or accommodation provider.
- h) the mechanical breakdown of any means of transport.
- i) an act or threat of terrorism.
- j) the death, Injury or Sickness of any person who resides outside of Australia or New Zealand, who is not listed on your Certificate of Insurance.
- k) where you are a full time permanent employee and your pre-arranged leave is cancelled by your employer unless you are a full time member of the Australian Defence Force or of federal, state or territory emergency services.

You must check "General exclusions applicable to all sections" pages 68 to 72 for other reasons why we will not pay.

Section 1B – Travel Services Provider Insolvency

Cover is available under all Plans except Plans D, E, F & Basic Non-Residents.

1.3 We will pay

We will pay the following if your claim arises as a result of the Insolvency of a Travel Services Provider:

- a) the value of the unused arrangements, less any refunds due to you, if you have to cancel any prepaid transport or accommodation arrangements booked for your Journey. We will also pay the travel agent's cancellation fees, up to the amounts set out below, however, we will not pay more than the level of commission or service fees normally earned by the agent, had your Journey not

been cancelled. Documentary evidence of the travel agent's fee is required.

The maximum we will pay is as follows:

- \$2,000 for Single cover
 - \$2,000 per person for Duo cover
 - \$4,000 for Family cover
 - \$2,000 for Individual cover
- b) the Reasonable cost of rearranging your Journey, prior to or after the commencement of your Journey, provided that this cost is not greater than the cancellation fees or lost deposits which would have been incurred had the Journey been cancelled.
- c) the Reasonable additional hotel accommodation and transportation expenses incurred if you have to return Home.

1.4 We will not pay

- a) We will not pay for any travel or accommodation not booked while you are in Australia.
- b) We will not pay due to the Insolvency of any travel agent, tour wholesaler, tour operator or booking agent.
- c) We will not pay due to the Insolvency of a Travel Services Provider if, at the time the Certificate of Insurance was issued, the Travel Services Provider was Insolvent, or a reasonable person would have reason to expect the Travel Services Provider might become Insolvent.
- d) We will not pay any accommodation expenses incurred after the date you originally planned to return to Australia.

You must check "General exclusions applicable to all sections" pages 68 to 72 for other reasons why we will not pay.

Section 1C – Wholesaler Insolvency

Cover is available under all Plans except Plans D, E, F & Basic Non-Residents.

1.5 We will pay

We will pay the unrecoverable value of any unused prepaid travel or accommodation arrangements provided by or arranged by a Wholesaler, which is lost by you due to the Insolvency of the Wholesaler.

1.6 We will not pay

- a) We will not pay for any travel or accommodation not booked while you are in Australia.

- b) We will not pay due to the Insolvency of any travel agent, booking agent or Travel Services Provider.
- c) We will not pay due to the Insolvency of a Wholesaler if, at the time the Certificate of Insurance was issued, the Wholesaler was Insolvent, or a reasonable person would have reason to expect the Wholesaler might become Insolvent.

Section 2 – Overseas Emergency Medical Assistance/Evacuation

Cover is available under all Plans except Plans C, F, G, Basic Domestic & Basic Non-Medical Cover.

PLEASE NOTE: You will not have cover under this Section while travelling in your Country of Residence.

Allianz Global Assistance will help you with any Overseas medical emergency (see "Overseas hospitalisation or medical evacuation" on page 45). You may contact them at any time 7 days a week.

Allianz Global Assistance will arrange for the following assistance services if you Injure yourself Overseas, or become Sick while Overseas:

2.1 We will pay

- a) Access to a Medical Adviser for emergency medical treatment while Overseas.
- b) Any messages which need to be passed on to your family or employer in the case of an emergency.
- c) Provision of any written guarantees for payment of Reasonable expenses for emergency hospitalisation while Overseas.
- d) Your medical transfer or evacuation if you must be transported to the nearest Hospital for emergency medical treatment Overseas, or be brought back to Australia with appropriate medical supervision.
- e) The return to Australia of your Dependants if they are left without supervision following your hospitalisation or evacuation.

If you die as a result of an Injury or a Sickness during your Journey, we will pay for the Reasonable cost of either a funeral or cremation Overseas and/or of bringing your remains back to your Home. The maximum amount we will pay is \$15,000 for all claims combined.

Please note that we will not pay for any medical costs incurred in your Country of Residence.

2.2 We will not pay

- a) We will not pay for any expenses for medical evacuation, funeral services or cremation or bringing your remains back to Australia unless it has been first approved by Allianz Global Assistance.
- b) We will not pay if you decline to promptly follow the medical advice we have obtained, and we will not be responsible for subsequent medical, Hospital or evacuation expenses.
- c) We will not pay for medical evacuation or the transportation of your remains from Australia to an Overseas country.

You must check “General exclusions applicable to all sections” pages 68 to 72 for other reasons why we will not pay.

Section 3 – Overseas Emergency Medical & Hospital Expenses

Cover is available under all Plans except Plans C, F, G, Basic Domestic & Basic Non-Medical Cover.

PLEASE NOTE: You will not have cover under this Section while travelling in your Country of Residence.

3.1 We will pay

- a) We will reimburse the Reasonable medical or Hospital expenses you incur until you get back to Australia if you Injure yourself Overseas, or become Sick there. The medical or Hospital expenses must have been incurred on the written advice of a Medical Adviser. You must make every effort to keep your medical or Hospital expenses to a minimum.

If we determine that you should return Home to Australia for treatment and you do not agree to do so, we will pay you the amount which we determine would cover your medical expenses and/or related costs had you agreed to our recommendation. You will then be responsible for any ongoing or additional costs relating to or arising out of the event you have claimed for.

We will only pay for treatment received and/or Hospital accommodation during the 12 month period after the Sickness first showed itself or the Injury happened.
- b) We will also pay the cost of emergency dental treatment, **up to the maximum amount shown below for the plan selected**, for dental costs incurred, which the treating dentist certifies in writing is for the relief of sudden and acute pain to sound and natural teeth.

Plans A, B, D & E

- \$1,000 per person
Basic Super Plus, Basic Super, Basic Standard, Basic Economy, Basic New Zealand/Indonesia/Fiji, Basic Annual Multi-Journey & Basic Non-Residents
- \$500 per person

Please note that we will not pay for any medical costs incurred in your Country of Residence.

3.2 We will not pay

We will not pay for expenses:

- a) when you have not notified Allianz Global Assistance as soon as practicable of your admittance to Hospital.
- b) after 2 weeks treatment by a chiropractor, physiotherapist or dentist, unless approved by Allianz Global Assistance.
- c) if you do not take the advice of Allianz Global Assistance.
- d) if you have received medical care under a Reciprocal Health Care Agreement.
- e) for damage to dentures, dental prostheses, bridges or crowns.
- f) relating to dental treatment involving the use of precious metals or for cosmetic dentistry.

You must check “General exclusions applicable to all sections” pages 68 to 72 for other reasons why we will not pay.

Section 4 – Additional Expenses

Cover is available under all Plans except Plans D & F.

(See page 55 for details of cover under Section 4.1 d) & e))

4.1 We will pay

- a) We will reimburse any Reasonable additional accommodation and travel expenses if you cannot travel because of an Injury or Sickness which needs immediate treatment from a Medical Adviser who certifies in writing that you are unfit to travel.

We will also reimburse your Reasonable additional accommodation and travel expenses for you to be with your Travelling Companion if he or she cannot continue their Journey for the same reason.

We will also reimburse the Reasonable accommodation and travel expenses of your Travelling Companion or a Relative of yours or your Travelling Companion to travel to you, stay near you or escort you, if you are in Hospital suffering from a life threatening or other serious condition, or are evacuated for medical reasons. He or

she must travel, stay with you or escort you on the written advice of a Medical Adviser and with the prior approval of Allianz Global Assistance.

- b) If you shorten your Journey and return to Australia on the written advice of a Medical Adviser approved by Allianz Global Assistance, we will reimburse the Reasonable cost of your return to Australia. We will only pay the cost of the fare class that you had planned to travel at and you must take advantage of any pre-arranged return travel to Australia.

- c) If, during your Journey, your Travelling Companion or a Relative of either of you:

- dies unexpectedly;
- is disabled by an Injury; or
- becomes seriously Sick and requires hospitalisation

(except arising out of a Pre-existing Medical Condition), we will reimburse the Reasonable additional cost of your return to Australia. We will only pay the cost of the fare class you had planned to travel at.

Cover under 4.1 d] & e] only applies to Plans A, B, C, E or G

- d) We will reimburse you for airfares for you to return to the place you were when your Journey was interrupted, if you return to your Home because:

- during your Journey, a Relative of yours or your Travelling Companion dies unexpectedly or is hospitalised following a serious Injury or a Sickness (except arising from a Pre-existing Medical Condition); and
- it is possible for your Journey to be resumed; and
- there is more than 14 days remaining of the period of cover, as noted on your Certificate of Insurance; and
- you resume your Journey within 12 months of your return to Australia.

The most we will pay under this benefit is as follows:

- \$3,000 for Single cover
- \$3,000 per person for Duo cover
- \$6,000 for Family cover
- \$3,000 for Individual cover

- e) If, as a result of a Pre-existing Medical Condition, a Relative of yours or your Travelling Companion is hospitalised in Australia or New Zealand or dies in Australia or New Zealand after the policy is issued, and at the time of policy issue you were unaware of the likelihood of such hospitalisation or death, we will pay for the Reasonable additional cost of your return to Australia and/or the

cost of airfares for you to return to the place you were when your Journey was interrupted. The most we will pay for all events under this benefit is as follows:

- \$2,000 for Single cover
- \$2,000 per person for Duo cover
- \$4,000 for Family cover
- \$2,000 for Individual cover

- f) In addition, we will reimburse your Reasonable additional travel and accommodation expenses if a disruption to your Journey arises from any of the following reasons:

- your scheduled or connecting transport is cancelled, delayed, shortened or diverted because of a strike, riot, hijack, civil protest, weather, natural disaster or avalanche.
- you unknowingly break any quarantine rule.
- you lose your passport, travel documents or credit cards or they are stolen.
- an accident involving your mode of transport. You must have written confirmation of the accident from an official body in the country where the accident happened.
- your Home is rendered uninhabitable by fire, explosion, earthquake or flood.

If you do not have a return ticket booked to Australia before you were Injured or became Sick, we will reduce the amount of your claim by the price of the fare to Australia from the place you planned to return to Australia from. The fare will be at the same fare class as the one you left Australia on.

Wherever claims are made by you under this Section and Section 1A (*Cancellation Fees & Lost Deposits*) for cancelled services/facilities or alternative arrangements for the same or similar services/facilities, we will pay for the higher of the two amounts, not both.

WE WILL ALSO PAY FOR THE FOLLOWING REASONS

- g) You are prevented from skiing at a pre-booked ski resort for more than 24 continuous hours during your Journey, because adverse snow conditions cause a total closure of the lift system. However:
1. we will not pay for claims relating to ski resorts that do not have skiing facilities greater than 1,000 metres above sea level.
 2. we will not pay for claims arising outside the period 15 December to 31 March in Northern Hemisphere resorts, and 15 June to 30 September in Southern Hemisphere resorts.

We will pay a daily benefit of \$100 for Single or Individual cover, \$100 per person for Duo cover, or \$200 for Family

cover. The maximum amount we will pay for all claims combined is \$500 for Single or Individual cover, \$500 per person for Duo cover or \$1,000 for Family cover.

- h) We will reimburse you for the costs of hiring alternative ski and/or golf equipment following:
1. accidental loss, theft of, or damage to, ski and/or golf equipment owned by you, for which a claim has been accepted by us under Section 11 (*Luggage & Personal Effects*); or
 2. the misdirection or delay, for a period of more than 24 hours from the scheduled time of arrival at the snow and/or golf destination, of your ski and/or golf equipment.

You must provide all receipts for the ski and/or golf equipment that you hire.

The maximum amount we will pay for all claims combined is \$300 for Single or Individual cover, \$300 per person for Duo cover or \$600 for Family cover.

- i) If you are Injured during your Journey and become disabled as a result of the Injury, and the disablement continues after your return to Australia, we will reimburse you up to \$50 per day in respect of expenses incurred in the provision of house-keeping services that you are unable to perform yourself.

The maximum amount we will pay for all claims combined is \$500 for Single, Family or Individual cover, or \$500 per person for Duo cover.

- j) If you are delayed beyond your original return date due to an event covered by this policy, we will reimburse you up to \$25 for each 24 hour period for additional kennel or cattery boarding fees for domestic cats and dogs owned by you. You must give us a statement confirming the additional fees.

However, we will not pay any kennel or boarding cattery fees incurred outside of Australia.

The maximum amount we will pay for all claims combined is \$500 for Single, Family or Individual cover, or \$500 per person for Duo cover.

- k) We will pay you your prepaid travel and accommodation that you do not use, less any refunds due to you, if you want to cancel your Journey and return Home after the scheduled transport service on which you are travelling is hijacked.

We will pay you a benefit of \$1,000 for each 24 hour period. The maximum amount we will pay for all claims combined is \$2,500 for Single or Individual cover, \$2,500 per person for Duo cover or \$5,000 for Family cover.

4.2 We will not pay

We will not pay:

- a) if you were aware of any reason, before your period of cover commenced, that may cause your Journey to be cancelled, disrupted or delayed.
- b) if you can claim your additional travel and accommodation expenses from anyone else.
- c) if your claim relates to the financial collapse or insolvency of any transport, tour or accommodation provider.
- d) for delays or rescheduling by a bus line, airline, shipping line or rail authority unless it is due to a strike, riot, hijack, civil protest, weather or natural disaster.
- e) if you operate a Rental Vehicle in violation of the rental agreement.
- f) as a result of you or your Travelling Companion changing plans.

You must check “General exclusions applicable to all sections” pages 68 to 72 for other reasons why we will not pay.

Section 5 – Hospital Cash Allowance

Cover is available under all Plans except Plans C, D, F, G, Basic Domestic & Basic Non-Medical Cover.

PLEASE NOTE: You will not have cover under this Section while travelling in your Country of Residence.

5.1 We will pay

We will pay you \$50 for each day you are in Hospital if you are in Hospital for more than 48 continuous hours while you are Overseas.

5.2 We will not pay

- a) We will not pay for the first 48 continuous hours you are in Hospital.
- b) We will not pay if you cannot claim for Overseas medical expenses in Section 3 (*Overseas Emergency Medical & Hospital Expenses*).

You must check “General exclusions applicable to all sections” pages 68 to 72 for other reasons why we will not pay.

Section 6 – Accidental Death

Cover is available under all Plans except Plans D & F.

6.1 We will pay

We will pay the death benefit, to the estate of the deceased, if:

- a) you are Injured during your Journey and you die because of that Injury within 12 months of the Injury; or
- b) during your Journey, something you are travelling on disappears, sinks or crashes and you are presumed dead and your body is not found within 12 months.

The maximum amount we will pay for the death of accompanying Dependants is \$5,000 each, subject to the maximum amount shown in the Table of Benefits for the plan selected (*Single & Family cover only*).

The limit for the death of one person under Family cover who is not an accompanying Dependant is the sum insured for Single cover as per the plan selected.

6.2 We will not pay

You must check “General exclusions applicable to all sections” pages 68 to 72 for reasons why we will not pay.

Section 7 – Permanent Disability

Cover is available under all Plans except Plans C, D, F & Basic Domestic.

PLEASE NOTE: Unless you have chosen Plan B or Basic Annual Multi-Journey, you will not have cover under this Section while travelling in your Country of Residence.

7.1 We will pay

- a) We will pay if you are Injured during your Journey; and
- b) because of the Injury, you become permanently disabled within 12 months of the Injury.

For the purposes of Section 7 ‘Permanently disabled’ means:

- you have totally lost all of the sight in one or both eyes, or the use of a hand or foot at or above the wrist or ankle; and
- the loss is for at least 12 months and, in our opinion after consultation with an appropriate medical specialist, will continue indefinitely.

The maximum amount we will pay for the permanent disability of accompanying Dependants is \$5,000 each, subject to the maximum amount shown in the Table of Benefits for the plan selected (*Single & Family cover only*).

The limit for the permanent disability of one person under Family cover who is not an accompanying Dependant is the sum insured for Single cover as per the plan selected.

7.2 We will not pay

You must check “General exclusions applicable to all sections” pages 68 to 72 for reasons why we will not pay.

Section 8 – Loss of Income

Cover is available under all Plans except Plans C, D, E, F, G, Basic Domestic, Basic Non-Residents & Basic Non-Medical Cover.

PLEASE NOTE: Unless you have chosen Plan B or Basic Annual Multi-Journey, you will not have cover under this Section while travelling in your Country of Residence.

8.1 We will pay

If you are Injured during your Journey and become disabled within 30 days because of the Injury, and the disablement continues for more than 30 days after your return to Australia, we will pay you \$400 per person, per week for a period of up to 26 weeks. We will only pay if you cannot do your normal or suitable alternative work and you lose all your income.

8.2 We will not pay

- a) We will not pay for the first 30 days of your disablement from the time you return to Australia.
- b) We will not pay for the loss of income of Dependants.

You must check “General exclusions applicable to all sections” pages 68 to 72 for other reasons why we will not pay.

Section 9 – Travel Documents, Credit Cards & Travellers Cheques

Cover is available under all Plans except Plans C, D, F & Basic Domestic.

PLEASE NOTE: Unless you have chosen Plan B or Basic Annual Multi-Journey, you will not have cover under this Section while travelling in your Country of Residence.

9.1 We will pay

- a) We will reimburse you the replacement costs (including communication costs) of any travel documents, including passports, credit cards or travellers cheques you lose or which are stolen from you during your Journey.

- b) We will also cover loss resulting from the fraudulent use of any credit card held by you, following the loss of the card during your Journey. We will only cover those amounts not covered by any guarantee given by the bank or issuing company to you as the cardholder covering such losses.

9.2 We will not pay

To the extent permissible by law, we will not pay if:

- a) you do not report the theft within 24 hours to the police and, in the case of credit cards and travellers cheques, to the issuing bank or company in accordance with the conditions under which the cards or cheques were issued.
- b) you cannot provide us with a written statement from the police or the issuing bank or company as required by a) above.

You must check “General exclusions applicable to all sections” pages 68 to 72 for other reasons why we will not pay.

Section 10 – Theft of Cash

Cover is available under all Plans except Plans C, D, E, F, Basic Domestic & Basic Non-Residents.

PLEASE NOTE: Unless you have chosen Plan B or Basic Annual Multi-Journey, you will not have cover under this Section while travelling in your Country of Residence.

10.1 We will pay

We will pay for cash, bank notes, currency notes, postal orders or money orders stolen from your person during your Journey.

10.2 We will not pay

To the extent permissible by law, we will not pay if:

- a) if you do not report the theft within 24 hours to the police or an office of the bus line, airline, shipping line or rail authority you were travelling on when the theft occurred. You can prove that you made a report by providing us with a written statement from whoever you reported it to.
- b) if the cash, bank notes, currency notes, postal orders or money orders were not on your person at the time they were stolen.

You must check “General exclusions applicable to all sections” pages 68 to 72 for other reasons why we will not pay.

Section 11 – Luggage & Personal Effects

Cover is available under all Plans except Plans D & F.

(See below for details of cover under Section 11.1 d))

PLEASE NOTE: for the purpose of this Section:

- “specified items” refers to Luggage and Personal Effects that have been listed as covered on your Certificate of Insurance with a nominated sum insured.
- “unspecified items” refers to Luggage and Personal Effects that have not been specifically listed on your Certificate of Insurance.

11.1 We will pay

- a) We will pay the repair cost or value of any Luggage and Personal Effects which, during the Journey, are stolen or accidentally damaged or are permanently lost.

When calculating the amount payable we will apply depreciation due to age, wear and tear for each item.

The amount of such depreciation will be determined by us. No depreciation will be applied to goods purchased duty free prior to your departure, or goods purchased during your Journey.

We will not pay more than the original purchase price of any item. We have the option to repair or replace the Luggage and Personal Effects instead of paying you.

- b) The maximum amount we will pay for any item (i.e. the item limit) is:

Plans A, B & G

- \$4,000 for personal computers, video recorders or cameras
- \$2,000 for golf clubs
- \$1,000 for mobile phones (including PDAs and any items with phone capabilities)
- \$750 for all other unspecified items

Plans C, E, Basic Super Plus, Basic Super, Basic Standard, Basic Economy, Basic New Zealand/Indonesia/ Fiji, Basic Annual-Multi Journey, Basic Domestic, Basic Non-Residents & Basic Non-Medical Cover

- \$1,500 for personal computers, video recorders or cameras
- \$1,000 for golf clubs
- \$1,000 for mobile phones (including PDAs and any items with phone capabilities)
- \$750 for all other unspecified items

A pair or related set of items, for example (but not limited to):

- a camera, lenses (attached or not), tripod and accessories;
- a matched or unmatched set of golf clubs, golf bag and buggy;
- a matching pair of earrings;

are considered as only one item for the purpose of this insurance, and the appropriate single item limit will be applied.

- c) In addition to the limit shown in the Table of Benefits for this Section, we will also pay up to a maximum of \$5,000 (or such other lower amount which you have previously selected) for all items combined, that you have specified under “**Specified luggage & personal effects cover**” and paid an additional premium for. The standard item limits shown in 11.1 b) above do not apply to the specified items listed on your Certificate of Insurance.

Cover under 11.1 d) only applies to Plans A, B, C, E or G

- d) Luggage and Personal Effects left in a motor vehicle are only covered during daylight hours and must have been left in a Concealed Storage Compartment of a locked motor vehicle, and forced entry must have been made.

However, the limits set out below, as per the plan selected, will apply (*this limitation of cover applies to all items even if you have purchased “Specified luggage and personal effects cover”*):

Plans A, B, E, G

- \$200 for each item; and \$2,000 in total for all stolen items

Plan C

- \$200 for each item; and \$1,000 in total for all stolen items

No cover applies if Luggage and Personal Effects are left unattended in the passenger compartment of a motor vehicle at any time, or if the Luggage and Personal Effects have been left in a motor vehicle overnight.

11.2 We will not pay

To the extent permissible by law, we will not pay a claim in relation to your Luggage and Personal Effects if:

- a) you do not report the loss, theft or misplacement within 24 hours to the police or an office of the bus line, airline, shipping line or rail authority you were travelling on when the loss, theft or misplacement occurred. You must prove that you made such report by providing us with a written statement from whoever you reported it to.
- b) your jewellery, mobile phone, camera, video camera, personal computer, computer equipment or their accessories are checked in to be held and transported in the cargo hold of any aircraft, ship, train, tram or bus (including any loss from the point of check-in until receipt of the said goods).
- c) the loss, theft or damage is to, or of, bicycles.
- d) the loss, theft or damage is to, or of, cash, bank or currency notes, cheques or negotiable instruments.

- e) the loss, theft or damage is to, or of, items left behind in any hotel or motel room after you have checked out, or items left behind in any aircraft, ship, train, tram, taxi or bus.
- f) the loss, theft or damage is to, or of, watercraft of any type (other than surfboards).
- g) the Luggage and Personal Effects were being sent unaccompanied or under a freight contract.
- h) the loss or damage arises from any process of cleaning, repair or alteration.
- i) the loss or damage arises from ordinary wear and tear, deterioration, atmospheric or weather conditions, insects, rodents or vermin.
- j) the Luggage and Personal Effects were left Unsupervised in a Public Place.
- k) the Luggage and Personal Effects were left unattended in a motor vehicle, unless they were left in a Concealed Storage Compartment of a locked motor vehicle.
- l) the Luggage and Personal Effects were left overnight in a motor vehicle, even if they were left in a Concealed Storage Compartment of a locked motor vehicle.
- m) the Luggage and Personal Effects have an electrical or mechanical breakdown.
- n) the Luggage and Personal Effects are fragile, brittle or an electronic component is broken or scratched - unless either:
 - it is the lens of spectacles, binoculars or photographic or video equipment; or
 - the breakage or scratch was caused by a crash involving a vehicle in which you are travelling.
- o) you are entitled to be reimbursed by the bus line, airline, shipping line or rail authority you were travelling on when the loss, theft, misplacement or damage occurred. However, if you are not reimbursed the full amount of your claim, we will pay the difference between the amount of your loss and what you were reimbursed, up to the limit of your cover (allowing for depreciation due to age, wear and tear).
- p) the loss or damage is to, or of, sporting equipment while in use (including surfboards).

You must check “General exclusions applicable to all sections” pages 68 to 72 for other reasons why we will not pay.

Section 12 – Luggage & Personal Effects Delay Expenses

Cover is available under all Plans except Plans C, D, F & Basic Domestic.

PLEASE NOTE: Unless you have chosen Plan B or Basic Annual Multi-Journey, you will not have cover under this Section while travelling in your Country of Residence.

12.1 We will pay

We will reimburse you if any items of your Luggage and Personal Effects are delayed, misdirected or misplaced by the Carrier for more than 12 hours, and in our opinion it was reasonable for you to purchase essential items of clothing or other personal items.

Your claim must contain written proof from the Carrier who was responsible for your Luggage and Personal Effects that they were delayed, misdirected or misplaced.

We will deduct any amount we pay you under this Section for any subsequent claim for lost Luggage and Personal Effects (Section 11).

12.2 We will not pay

We will not pay if you are entitled to compensation from the bus line, air line, shipping line or rail authority you were travelling on for the relevant amount claimed.

However, if you are not reimbursed the full amount, we will pay the difference between the amount of your expenses and what you were reimbursed, up to the limit of your cover.

You must check “General exclusions applicable to all sections” pages 68 to 72 for other reasons why we will not pay.

Section 13 – Travel Delay Expenses

Cover is available under all Plans except Plans D & F.

13.1 We will pay

We will reimburse the cost of your Reasonable additional meals and accommodation expenses if a delay to your Journey, for at least 6 hours, arises from circumstances outside your control.

We will pay up to \$200 at the end of the initial 6 hour period. In addition, we will pay up to \$200 for each full 24 hour period that the delay continues beyond the initial 6 hour delay.

13.2 We will not pay

We will not pay if a delay to your Journey arises from any of the following reasons:

- a) the financial collapse or Insolvency of any transport, tour or accommodation provider;
- b) an act or threat of terrorism,

Nor will we pay if:

- c) you can claim your additional meals and accommodation expenses from anyone else.

You must check “General exclusions applicable to all sections” pages 69 to 73 for other reasons why we will not pay.

Section 14 – Alternative Transport Expenses

Cover is available under all Plans except Plans C, D, F & Basic Domestic

PLEASE NOTE: Unless you have chosen Plan B or Basic Annual Multi-Journey, you will not have cover under this Section while travelling in your Country of Residence.

14.1 We will pay

We will pay your Reasonable additional travel expenses to reach a wedding, funeral, conference, sporting event or prepaid travel/tour arrangements on time if your scheduled transport is cancelled, delayed, shortened or diverted, and that means you would not arrive on time.

14.2 We will not pay

- a) We will not pay if the cancellation, delay, shortening or diversion of your scheduled transport arises from the financial collapse or Insolvency of any transport, tour or accommodation provider.
- b) We will not pay if your claim arises from an act or threat of terrorism.

You must check “General exclusions applicable to all sections” pages 68 to 72 for other reasons why we will not pay.

Section 15 – Personal Liability

Cover is available under all Plans except Plan F.

15.1 We will pay

We will pay for any amount you become legally liable to pay if the claim arises directly or indirectly from, or is in any way connected with, or is for:

- death or bodily injury, and/or
- physical loss of, or damage to, property,

occurring during your Journey which is caused by an accident or a series of accidents attributable to one source or originating cause.

We will also pay your Reasonable legal expenses for settling or defending the claim made against you.

You must not admit fault or liability for the claim, or incur any legal costs without our prior written approval.

15.2 We will not pay

We will not reimburse you for anything you have to pay because of a legal claim against you for causing bodily injury, death or loss or damage to, or of, property, if the claim arises out of or is for:

- a) bodily injury to you, your Travelling Companion or to a Relative of you or your Travelling companion or to an employee of either of you;
- b) damage to property belonging to you, or in your care or control, or belonging to, or in the care or control of, a Relative of you or your Travelling Companion, or to an employee of either of you;
- c) the ownership, custody or use of any aerial device, watercraft or mechanically propelled vehicle;
- d) the conduct of a business, profession or trade;
- e) any loss, damage or expenses which are covered or should have been covered under a statutory or compulsory insurance policy, statutory or compulsory insurance or compensation scheme or fund, or under Workers' Compensation Legislation, an industrial award or agreement, or Accident Compensation Legislation;
- f) any fine or penalty, or aggravated, punitive, exemplary or liquidated damages;
- g) disease that is transmitted by you;
- h) any relief or recovery other than monetary amounts;

- i) a contract that imposes on you a liability which you would not otherwise have;
- j) assault and/or battery committed by you or at your direction; or
- k) conduct intended to cause bodily injury, property damage or liability with reckless disregard for the consequences of you or any person acting with your knowledge, consent or connivance.

You must check "General exclusions applicable to all sections" pages 68 to 72 for other reasons why we will not pay.

Section 16 – Rental Vehicle Excess/Return of Rental Vehicle

Cover is available under all Plans except Plans D & F.

16.1 We will pay

- a) We will reimburse the Rental Vehicle insurance excess or the cost of repairing the Rental Vehicle, whichever is the lesser, if during the Journey, the Rental Vehicle is involved in a motor vehicle accident while you are driving, or is damaged or stolen while in your custody. You must provide a copy of the repair account and/or quote.

This cover does not take the place of Rental Vehicle insurance and only provides cover for the excess component up to the applicable benefit limit.

- b) We will also pay up to \$500 for the cost of returning your Rental Vehicle to the nearest depot, if your attending Medical Adviser certifies in writing that you are unfit to do so during your Journey.

16.2 We will not pay

We will not pay a claim involving the theft or damage to your Rental Vehicle if the claim arises from you operating or using the Rental Vehicle:

- a) in violation of the rental agreement;
- b) while affected by alcohol or any other drug in a way that is against the law of the place you are in; or
- c) without a licence for the purpose that you were using it.

You must check "General exclusions applicable to all sections" pages 68 to 72 for other reasons why we will not pay.

General exclusions applicable to all sections

To the extent permitted by law we will not pay under any circumstances if:

- 1) You do not act in a responsible way to protect yourself and your property and to avoid making a claim.
- 2) You do not do everything you can to reduce your loss as much as possible.
- 3) Your claim is for consequential loss of any kind, including loss of enjoyment.
- 4) At the time of purchasing the policy, you were aware of something that would give rise to you making a claim under this policy.
- 5) Your claim is for a loss which is recoverable by compensation under any workers compensation or transport accident laws, government sponsored fund, plan, or medical benefit scheme, or any other similar type of legislation required to be effected by or under a law.
- 6) Your claim arises from errors or omissions in any booking arrangements, or failure to obtain the relevant visa, passport or travel documents.
- 7) your claim arises from the refusal, failure or inability of any person, company or organisation (including but not limited to any airline, or other transportation provider, hotel, car rental agency, tour or cruise operator, travel wholesaler, booking agent or other provider of travel or tourism related services, facilities or accommodation), to provide services, facilities or accommodation, by reason of their own Insolvency or the Insolvency of any person, company or organisation with whom or with which they deal except as provided under Section 1B (*Travel Services Provider Insolvency*).
- 8) Your claim arises because you act illegally or break any government prohibition or regulation including visa requirements.
- 9) Your claim arises from a government authority confiscating, detaining or destroying anything.

- 10) Your claim arises from being in control of a Motorcycle unless:
 - you are licensed to drive a Motorcycle under a current Australian motorcycle licence or a current International Driving Permit, or
 - you are a passenger travelling on a Motorcycle that is in the control of a person who holds a current motorcycle licence valid for the country you are travelling in.
- 11) Your claim arises from being in control of a Moped or Scooter unless:
 - you are licensed to drive a Moped or Scooter under a current Australian motorcycle or drivers licence, or a current International Driving Permit; or
 - you are a passenger travelling on a Moped or Scooter that is in the control of a person who holds a current motorcycle or drivers licence valid for the country you are travelling in.
- 12) Your claim arises from, is related to or associated with:
 - an actual or likely Epidemic or Pandemic; or
 - the threat of an Epidemic or Pandemic.

Refer to www.who.int and www.smartraveller.gov.au for further information on Epidemics and Pandemics.
- 13) Your claim arises because you did not follow advice in the mass media or any government or other official body's warning:
 - against travel to a particular country or parts of a country; or
 - of a strike, riot, bad weather, civil protest or contagious disease (including an Epidemic or Pandemic);

and you did not take appropriate action to avoid or minimise any potential claim under your policy (including delay of travel to the country or part of the country referred to in the warning).

Refer to www.who.int and www.smartraveller.gov.au for further information.
- 14) Your claim arises from any act of war, whether war is declared or not, or from any rebellion, revolution, insurrection or taking of power by the military.
- 15) Your claim arises from a nuclear reaction or contamination from nuclear weapons or radioactivity.
- 16) Your claim arises from biological and/or chemical materials, substances, compounds or the like used directly or indirectly for the purpose to harm or to destroy human life and/or create public fear.

- 17) Your claim arises directly or indirectly from, or is in any way connected with any Pre-existing Medical Condition of any person including you, your Travelling Companion or a Relative of you or your Travelling Companion except as provided under Section 1A 1.1 e] (page 49) and Section 4.1 e] (page 55). This exclusion will not apply:
 - a) if you satisfy the provisions as set out under the heading *'Pre-existing medical conditions which may be covered with no additional premium payable'* (as set out on pages 35 to 37), or
 - b) as provided in your Medical Terms of Cover letter and from the time any additional premium that applies has been received by us for Pre-existing Medical Conditions for which you must apply for cover and for which approval has been given by us. Special conditions, limits and Excesses may apply if we notify you in writing.
- 18) Your claim arises from, is related to or associated with any signs or symptoms that you were aware of before cover commenced, but:
 - a) you had not yet sought a medical opinion regarding the cause; or
 - b) you were currently under investigation to define a diagnosis; or
 - c) you were awaiting specialist opinion.
- 19) Your claim is in respect of travel booked or undertaken even though you know you are unfit to travel, travel against medical advice, travel to obtain medical treatment or you arrange to travel when you know of circumstances that could lead to the Journey being disrupted or cancelled.
- 20) Your claim arises from any Injury or Sickness where a metastatic or terminal prognosis was made prior to the issue of the Certificate of Insurance.
- 21) Your claim arises from, or is in any way connected with, complications from elective surgery.
- 22) Your claim arises out of pregnancy, childbirth or related complications, unless it is a single uncomplicated pregnancy (up to and including 23 weeks), or we have agreed in writing to provide cover. In any event we will not pay medical expenses for:
 - regular antenatal care;
 - childbirth at any gestation; or
 - care of the newborn child.
- 23) Your claim involves a hospital where you are being treated for addiction to drugs or alcohol, or are using it as a nursing, convalescent or rehabilitation place.
- 24) Your claim involves the cost of medication in use at the time the Journey began, or the cost for maintaining a course of treatment you were on prior to the Journey.
- 25) Your claim arises from, or is in any way related to, Mental Illness.
- 26) Your claim arises from suicide or attempted suicide.
- 27) Your claim arises directly or indirectly from, or is in any way connected with, a sexually transmitted disease or virus, unless we have agreed in writing to provide cover as set out in your Medical Terms of Cover letter and you have paid any additional premium that applies.
- 28) You were under the influence of any intoxicating liquor or drugs, except a drug prescribed to you by a Medical Adviser, and taken in accordance with their instructions.
- 29) Despite Allianz Global Assistance's advice otherwise following your call to them, you received private hospital or medical treatment where public funded services or care is available in Australia or under any Reciprocal Health Care Agreement.
- 30) Your claim arises from any medical procedures in relation to AICD/ICD insertion during Overseas travel. If you, your Travelling Companion or a Relative of you or your Travelling Companion (as listed on your Certificate of Insurance) requires this procedure, due to sudden and acute onset which occurs for the first time during your period of cover and not directly or indirectly related to a Pre-existing Medical Condition, we will exercise our right to organise a repatriation to Australia for this procedure to be completed.
- 31) Your claim arises from or is any way related to the death or hospitalisation of any person aged 85 years and over, who is not listed on the Certificate of Insurance, regardless of the country in which they may live.
- 32) Your claim arises directly or indirectly from or is in any way connected with any event or occurrence where providing such cover would constitute "health insurance business" as defined under the Private Health Insurance Act 2007 or would result in us contravening the Health Insurance Act 1973 (Cth), the Private

Health Insurance Act 2007 (Cth) or the National Health Act 1953 (Cth).

- 33) Your claim arises because you hunt, race (other than on foot), engage in Open Water Sailing, play polo, go mountaineering or rock climbing using ropes or climbing equipment (other than for hiking), from skiing Off-piste, from professional sport of any kind, or from parachuting or hang gliding.
- 34) Your claim arises because you dive underwater using an artificial breathing apparatus, unless you hold an open water diving licence recognised in Australia or you were diving under licensed instruction.
- 35) Your claim arises from travel in any air-supported device, other than as a passenger in a fully licensed aircraft operated by an airline or charter company. This exclusion does not apply to regulated or licensed ballooning.

Claims

How to make a claim

You must give us notice of your claim as soon as possible calling us on 1300 725 154. If there is a delay in claim notification, or you do not provide us with sufficient detail to process your claim, we can reduce your claim by the amount of prejudice we have suffered because of the delay.

You must give us any information we reasonably ask for to support your claim at your expense, such as but not limited to, police reports, valuations, medical reports, original receipts or proof of ownership. You must co-operate with us at all times in relation to the provision of supporting evidence and such other information as we may reasonably require.

- For medical, Hospital or dental claims – contact Allianz Global Assistance as soon as possible.
- For loss or theft of your Luggage and Personal Effects – report it immediately to the police and obtain a written notice of your report.
- For damage or misplacement of your Luggage and Personal Effects caused by the airline or any other operator or accommodation provider – report the damage or misplacement to an appropriate official and obtain a written report, including any offer of settlement that they may make.
- Submit full details of any claim in writing within 30 days of your return.

Claims are payable in Australian dollars to you

We will pay all claims in Australian dollars. We will pay you unless you tell us to pay someone else. The rate of currency exchange that will apply is the rate at the time you incurred the expense.

Depreciation

Depreciation will be applied to claims for Luggage and Personal Effects at such rates as reasonably determined by us.

You must not admit fault or liability

In relation to any claim under this policy, you must not admit that you are at fault and you must not offer or promise to pay any money or become involved in litigation without our approval.

You must help us to recover any money we have paid

If we have a claim against someone in relation to the money we have to pay or have paid under this policy, you must do everything you can to help us do that in legal proceedings. If you are aware of any third party that you or we may recover money from, you must inform us of such third party.

If you can claim from anyone else, we will only make up the difference

If you can make a claim against someone in relation to a loss or expense covered under this policy and you do not get paid the full amount of your claim, we will make up the difference. You must claim from them first.

Other insurance

If any loss, damage or liability covered under this policy is covered by another insurance policy, you must give us details of such insurance. If you make a claim under the other insurance policy and you are paid the full amount of your claim, you cannot make a claim under this policy.

If you make a claim under the other insurance policy and you are not paid the full amount of your claim, we will make up the difference, up to the amount this policy covers you for. We may seek contribution from your other insurer. You must give us any information we reasonably ask for to help us make a claim from your other insurer.

Subrogation

We may at our discretion, undertake in your name and on your behalf, control and settlement of proceedings for our own benefit, to recover compensation or secure indemnity from any party in respect of anything covered by this policy. You are to assist and permit to be done, all acts and things as required by us for the purpose of recovering compensation or securing indemnity from other parties to which we may become entitled or subrogated, upon us paying your claim under this policy, regardless of whether we have yet paid your claim, and whether or not the amount we pay you is less than full compensation for your loss. These rights exist regardless of whether your claim is paid under a non-indemnity or an indemnity clause of this policy.

Recovery

We will apply any money we recover from someone else under a right of subrogation in the following order:

- 1) to us, our administration and legal costs arising from the recovery
- 2) to us, an amount equal to the amount that we paid to you under the policy
- 3) to you, your uninsured loss (less your Excess)
- 4) to you, your Excess

Once we pay your total loss we will keep all money left over. If we have paid your total loss and you receive a payment from someone else for that loss or damage, you must pay us the amount of that payment up to the amount of the claim we paid you.

If we pay you for lost or damaged property and you later recover the property or it is replaced by a third party, you must pay us the amount of the claim we paid you.

Business travellers – how GST affects your claim

If you are entitled to claim an input tax credit in respect of a cost for which a claim is made, or would be entitled to an input tax credit if you were to incur the relevant cost (i.e. in replacing a lost or stolen item), the amount we would otherwise pay will be reduced by the amount of that input tax credit.

Travel within Australia only

If you are entitled to claim an input tax credit in respect of your premium, you must inform us of the amount of that input tax credit (as a percentage) at the time you first make a claim. If you fail to do so, you may have a liability for GST if we pay you an amount under this policy.

Fraud

Insurance fraud places additional costs on honest policyholders. Fraudulent claims force insurance premiums to rise. We encourage the community to assist in the prevention of insurance fraud.

You can help by reporting insurance fraud by calling Allianz Global Assistance on 1800 453 937. All information will be treated as confidential and protected to the full extent under law.

Wholesaler List

AAT Kings Tours Pty Ltd ABN 97 079 722 464;	Club Mediterranee (Australia) Pty Ltd ABN 73 001 302 012;
A.C.N. 075 309 116 Pty Ltd ABN 95 075 309 116 trading as Group Events Pty Ltd	Concierge Travel Group Pty Limited ABN 92 002 144 130
Abercrombie & Kent (Australia) Pty. Ltd. ABN 55 005 422 999;	trading as Elegant Resorts and Villas;
Academy Travel Pty Ltd ABN 69 150 402 841;	Contiki Holidays (Australia) Pty Ltd ABN 18 002 525 340;
Active Travel Pty Ltd ABN 33 008 605 721 trading as	Cruise Marketing Group Pty Ltd ABN 15 105 444 380
Northern Territory H olidays and Tailwinds Bicycle Touring;	trading as Cruise Marketing Group and Seven Oceans Cruising Pty Ltd
Adventure Associates Pty Ltd ABN 52 146 147 926;	The Trustee for the Dziadkiewicz Trust ABN 54 907 026 274
Adventure Destinations Pty Ltd ABN 24 126 175 193;	trading as Contours Travel;
The Trustee for the A D Unit Trust ABN 70 839 740 186 trading as	Dhamala Enterprises Pty Ltd ABN 26 147 310 969 trading as Himalayan Experience;
Adventure Destinations;	Dial and Travel Pty Ltd ABN 79 146 754 743 trading as Ormina Tours;
Adventure World Travel Pty Limited ABN 69 122 505 631;	Encompass Africa Pty Ltd ABN 54 135 089 879;
Aegean Tours Pty Ltd & Bali Assets Pty Ltd Partnership trading as	The Trustee for Hauraki Holdings Unit Trust ABN 51 328 832 827
Asiaquest Tours ABN 80 745 382 672;	trading as Entire Travel Connection;
African Wildlife Safaris Pty Ltd ABN 18 006 516 285 trading as	Equity Consulting Services Pty Ltd ABN 29 104 629 647
African Wildlife Safaris and Natural Focus Safaris;	trading as Enjoy Australia Tours and Equity Travel;
Air Adventure Australia Pty Ltd ABN 57 005 474 859;	Escapes Direct Pty Ltd ABN 29 167 339 059;
All About Asia Pty Ltd ABN 62 053 647 591 trading as	Susan E ROBERTS ABN 75 687 969 547 trading as Especially Australian;
Philippine Fun Holidays and All About Asia;	Events Worldwide Pty Ltd ABN 77 061 223 998;
All Link International Pty Ltd ABN 49 094 277 522;	Exciting Destinations Pty Limited ABN 28 112 971 838 trading as Inca Tours;
ATI Tours Pty Ltd ABN 20 109 484 326;	Exotic Destinations Pty Ltd ABN 17 075 947 910;
Australia New Zealand Central Reservations Office Pty Limited	Expedia Inc ABN 25 138 063 573;
ABN 16 073 214 490 trading as ANZCRO;	The Trustee for the 50 Degrees North Unit Trust ABN 37 437 434 292 trading as 50
Australian Online Travel Pty Ltd ABN 17 105 135 331 trading as Sunlover Holidays;	Degrees North;
Australian Pacific Touring Pty Ltd ABN 44 004 684 619;	Four Corners Travel Group Pty Ltd ABN 95 004 712 734
Bali Travel Service (Vic) Pty Ltd ABN 76 005 461 094 trading as	trading as India Tours & Travel Specialists and African Travel Specialists;
Bali Tours Indonesian Specialists;	Francis Travel Representation Pty Limited ABN 96 064 965 064
Baltic and Eastern Europe Travel Pty Ltd ABN 55 060 841 974	trading as Travel Industry Club;
trading as Eastern Europe Travel;	G.E.T. Educational Tours Pty Ltd ABN 96 004 488 886;
David Albert & Kylie BANTOFT Family Partnership ABN 93 367 366 822	Gate 1 Australia Pty Ltd ABN 74 169 034 575;
trading as Norfolk Select Marketing;	The Trustee for the Australian Basketball Digest Trust ABN 49 927 572 479
Beyond Travel Group Pty Ltd ABN 73 115 510 926;	trading as Global Athlete Travel;
Bluesun2 Pty Ltd ABN 64 110 673 571;	Greece and Mediterranean Travel Centre Pty Ltd ABN 70 102 271 830;
Blue Travel Pty Ltd ABN 40 070 160 002;	H.D.R. International Pty Ltd ABN 26 095 434 978 trading as South America Tourism;
Cindy J BOBBERA ABN 63 456 608 243 trading as Ciao Travel;	Hayllar Music Tours Pty Ltd ABN 73 167 706 176;
Buffalo Tours Australia Pty Ltd ABN 84 132 428 641;	Health and Fitness Travel Pty Ltd ABN 83 160 770 990;
Bunnik Travel Pty Ltd ABN 38 077 203 466;	H.I.S. Australia Pty Ltd ABN 81 011 037 577 trading as Travel Japan by H.I.S.;
Chimu Adventures Pty Ltd ABN 65 110 269 380;	Holiday Marketing Pty Ltd ABN 84 066 954 381 trading as Beachcomber Tours;
China Bestours (Aust) Pty Ltd ABN 64 103 494 168 trading as CBT Holidays;	The John Ford Family Trust ABN 48 627 741 255 trading as Ibertours;
Circuit Travel Pty Ltd ABN 12 001 268 257 trading as Globus Family of Brands;	Icon Holidays Pty Ltd ABN 19 112 422 910
2Max Investments Pty Ltd ABN 20 002 789 559 trading as The Classic Safari Company;	trading as Icon Holidays and Midland Travel & Cruise;

Imperial China Tours Pty Ltd ABN 21 070 223 166;
 Insight Vacations Pty Limited ABN 36 002 640 057;
 Intrepid Travel Pty. Ltd. ABN 35 007 172 456 trading as Intrepid Travel;
 Japan Australia Travel Service Pty Ltd ABN 27 148 942 714;
 JTB Australia Pty Limited ABN 99 003 218 728 trading as Japan Travel Bureau and JTB;
 Kernot International Travel Pty Ltd ABN 72 115 478 101 trading as CIT Holidays;
 Keygate Holdings Pty Ltd ABN 46 088 941 682 trading as Asia Escape Holidays;
 Kirra Tours Limited Partnership ABN 66 501 715 897 trading as Kirra Tours;
 Antonina KISLIAKOV ABN 57 788 260 227 trading as Gateway Travel;
 Kyrenia Travel Service Pty Ltd ABN 91 002 932 336 trading as Sun Island Tours;
 L & D Corporate Pty Ltd ABN 83 106 792 590
 trading as Interasia Tours and Interglobal Tours;
 The Trustee for the Jenden Family Trust ABN 83 195 130 834
 trading as Latitude Group Travel Pty Ltd;
 Leisure Options Pty Ltd ABN 86 140 597 511;;
 The MDM Marketing Group Pty Ltd ABN 48 003 007 467
 trading as MDM Events Group;
 M.E.C. Corporation Pty Ltd ABN 48 101 827 052
 trading as Womens Own Adventure;
 The Trustee for the Maestro Travel Unit Trust ABN 61 560 019 616
 trading as The Maestro Group;
 Magic Tours International Pty Ltd ABN 74 071 920 360
 trading as Eastern Eurotours;
 Majestic International Travel Service Pty Ltd ABN 52 005 586 121
 trading as Holidays on Location;
 Mantra Wild Pty Ltd ABN 24 145 490 400;
 Micro-Cruising Pty Ltd ABN 79 163 309 000;
 Mulligan Enterprises Pty Ltd ABN 74 137 376 535 trading as Made Easy Tours;
 New Horizons Holidays Pty Ltd ABN 11 003 480 368;
 Nexus Holidays Pty Ltd ABN 34 124 885 356 trading as Vista Holidays;
 Npire Travel Pty Ltd ABN 52 169 563 428;
 Omkara Life Pty Ltd ABN 12 285 547 127 trading as Omkara Retreats;
 Omniworld Group Pty Ltd ABN 62 161 311 959
 trading as New Land Tours, Epoch Travel and Lewan OZ;
 Orfimar Pty Ltd ABN 32 098 803 742 trading as Fairy Chimneys Travel;
 Peregrine Adventures Pty. Ltd. ABN 54 006 831 974;
 Pinpoint Travel Group Pty Ltd ABN 70 003 745 999;
 Potter & Co. Pty Ltd. ABN 21 600 226 800 trading as
 The Africa Safari Co.;
 Susan POTTER ABN 20 290 083 627 trading as
 The Africa Safari Co;
 The Trustee for The PST Trust ABN 79 611 703 437 trading as
 Premium Sport Tours;
 Qantas Holidays Limited ABN 24 003 836 459;

Redmud (Australia) Pty Ltd ABN 13 124 924 072;
 RJBM Holdings Pty Limited ABN 47 118 876 467 trading as
 Beyond Tourism Travel;
 Scenic Tours Pty Ltd. ABN 85 002 715 602 trading as Scenic Tours;
 Sewah International Pty Ltd ABN 31 003 354 087 trading as Nordic Travel;
 Skimax Pty Ltd ABN 55 077 838 674;
 Snobus Pty Ltd ABN 30 071 585 281 trading as Snobus Ski Tours and Snowscene;
 Social Solutions WA Pty Ltd ABN 46 163 536 105 trading as Discovery Holidays WA;
 Stella Travel Services (Australia) Pty Ltd ABN 84 003 237 296
 trading as Travel Indochina;
 Stonestreets Travel Pty Ltd ABN 88 075 505 547;
 South America Travel Centre Pty Ltd ABN 96 069 240 606;
 Southern Cross Safaris Australia Pty Ltd ABN 83 126 019 538
 trading as Bench International;
 Specialist Holidays Pty Limited ABN 32 134 691 580;
 Sundowners Travel Centre Proprietary Limited ABN 11 005 066 348
 trading as Sundowners Overland;
 Swagman Outback Safaris Pty Ltd ABN 91 006 873 445 trading as Swagman Tours;
 Tailor Made Travelling Pty Ltd ABN 94 144 546 734;
 Tempo Holidays Pty Ltd ABN 51 007 331 213;
 The Impulse Travel Group Pty Limited ABN 92 100 392 345
 trading as Above & Beyond Holidays;
 The Perfect Travel Group Pty Ltd ABN 59 123 428 624;
 Top Deck Tours Pty Ltd ABN 30 107 934 841;
 Total Holiday Options Pty Ltd ABN 28 143 805 234;
 Touchdown Tours Pty Ltd ABN 42 066 236 020
 trading as Touchdown Tours and Cosmos Tours;
 Trade Travel Pty Ltd ABN 91 061 591 375
 trading as Beyond Expectations School Tours and Coastlink Tours;
 Trafalgar Tours (Aust.) Pty Ltd ABN 73 000 717 715;
 Transformational Journeys Pty Ltd ABN 68 160 109 946 trading as Touch of Spirit Tours;
 Travel & Living Pty Limited ABN 51 105 498 066
 trading as Discover Asia and McLachlan Tours;
 Travel Makers Pty Ltd ABN 26 114 388 082 trading as Travel Makers;
 Travelplan Australia Pty Ltd ABN 96 001 024 344;
 Travel and Tourism Marketing Consultants Pty Ltd ABN 62 060 419 169
 trading as Timeless Tours & Travel;
 Travel the World Pty Limited ABN 69 001 429 250 trading as Tauck World Discovery;
 Trazpound Pty Ltd ABN 65 002 335 686 trading as On Course Tours & Travel;
 Ultimate Travel Group Pty Ltd ABN 24 003 926 369;
 Uniworld River Cruises (Australia) Pty Ltd ABN 31 149 428 348;
 Peter VENN & Danielle VENN Family Partnership ABN 40 946 035 914
 trading as Tiki Tours;
 The Trustee for the Venture Holidays SA Unit Trust ABN 40 101 240 036
 trading as Venture Holidays;

Victor Tours (SA) Pty Ltd ABN 40 091 698 074 trading as Victor Tours;
Vivid Expeditions Pty Ltd ABN 42 158 316 959 trading as Eclipse Travel;
Wendy Wu Tours Pty. Limited ABN 87 082 688 202;
Wildlife Safari (Australia) Pty Ltd ABN 89 053 908 964;
Workers Educational Association of South Australia Inc ABN 33 260 463 794;
World Challenge Expeditions Pty Ltd ABN 69 104 769 584;
World Expeditions Travel Group Pty Ltd ABN 98 001 424 568;
World Trade Travel Pty. Limited ABN 45 061 891 263 trading as
Helen Wong Tours.