

# **INTER PARTNER ASSISTANCE S.A.**

Insurance and Reinsurance Company General Agency for Italy

# **MULTI-RISK TRAVEL INSURANCE POLICY**

# **"TRIPY UNDER 30"**

**Policy Summary** 

Last updated in April 2023



Inter Partner Assistance S.A. – Rappresentanza Generale per l'Italia Compagnia di Assicurazioni e Riassicurazioni – Via Carlo Pesenti, 121 – 00156 Roma – Tel.06/42118.1 Sede legale Bruxelles – 7, Boulevard du Régent – Capitale sociale € 130.702.613 interamente versato – Gruppo AXA Partners N. Iscrizione all'Albo Imprese di Assicurazioni e Riassicurazioni I.00014 – Autorizzazione Ministeriale n. 19662 del 19.10.1993 Registro delle Imprese di Roma RM – Numero REA 792129 – Part. I.V.A. 04673941003 – Cod. Fisc. 03420940151



#### DEFINITIONS

**Insured** means the person covered by the insurance.

**Insurance** means the insurance contract.

**Assistance** means the prompt assistance, in cash or services, provided to the Insured in the event of an accident, by contacting the Operations Centre.

**Baggage** means the clothing, sports equipment, personal effects, cameras and equipment and accessories, and the luggage, bags, backpacks containing the said items and equipment and which the Insured takes with him or her on the journey.

Natural Disasters: tornadoes, hurricanes, earthquakes, volcanic eruptions, floods, floods, nuclear explosions and other upheavals of nature.

**Travelling companion** means an insured person who, without being related to the Insured suffering or incurring the damage is nevertheless taking part in the same trip as the Insured.

**Operations Centre** means the organisation set up by Inter Partner Assistance S.A. – General Agency for Italy, at Via Carlo Pesenti 121 - 00156 Roma, comprising human resources and equipment, operating on a 24/7/365 basis, whose task is to: (1) operate the assistance helpline, (2) organise on-the-ground assistance, and (3) generally provide the assistance services set out in the Policy.

**Contractor** means the person taking out the insurance cover. In the case of an individual, the person of age with legal capacity.

**Destination** means the list of countries by destination zone available on the website before signing.

**Domicile** means the address, in the country of origin, where the Insured has established his/her place of business and interests.

**Day treatment** means specialised treatment in an authorised hospital, or other inpatient facility, which does not require an overnight stay, but which nevertheless produces a medical record.

**Event** means an occurrence directly or indirectly causing one or more accidents.

Family: the person bound by a family relationship with the Insured (mandatory list: spouse, cohabiting partner, children, father and mother). Other relatives are included in the definition of family member only if permanently living with the Insured as well as resulting from the family status (mandatory list: brothers, sisters. grandparents, in-laws, genders. brothers-in-law, daughters-in-law. uncles. cousins, grandchildren).

**Italy** means the territory of the Republic of Italy, including the Republic of San Marino and the Vatican City.

**Deductible** means the fixed quantity, expressed as an absolute figure, payable by the Insured in respect of each accident.

**Compensation** means the amount payable by the Company in connection with an accident covered by the policy.

**Event** means the occurrence of an unforeseen, violent and external event that produces clearly identifiable bodily injuries and causes death, permanent disability or temporary disability.

**Healthcare facility** means a university institution, hospital, inpatient care facility, day hospital, outpatient facility, authorised to make diagnoses and provide treatment. The following establishments are not conventionally considered healthcare facilities: spas, health farms, wellness/wellbeing/detox centres and retreats, rehabilitation facilities, longterm/convalescent care facilities, care homes and residential and day-care homes for the elderly

**Pre-existing disease:** the disease that is the expression or direct consequence of chronic or pre-existing pathological situations at the start of the trip

**Sickness** means any alteration of a person's health not due to or caused by an accident..

**Maximum coverage** means the maximum sum, defined in the Policy, guaranteed to be paid by the Company, in connection with an Event.

**Medicinal drugs** means the drugs listed in the Annuario Italiano dei Medicamenti (Italian Yearbook of Medicinal Drugs) and, therefore, does not include: parapharmaceutical and homeopathic products, cosmetics, food supplements, galenical preparations, etc., even if prescribed by a physician.

**Policy** means the document issued by the Insurer as proof of the Insurance Contract.

**Premium** means the amount payable by the Contractor to the Insurer.

**Forfeiture** means the forfeiture of a right for failing to exercise it within the legally established timeframe.

**Residence** is the place where the Insured lives, as specified in the certificate of residence.

**Hospitalisation** means the admission of a patient either to, (i) a duly authorised hospital or healthcare facility, contemplating at least one overnight stay, or (ii) a day hospital.

**Expiration date** means the date on which the insurance contract ceases to have effect.

**Excess** means the percentage of the loss recoverable hereunder borne by the Insured for each accident.

**Accident** is the occurrence of the – future and unforeseen – insured event for which the insurance cover is taken out.

**Company** is INTER PARTNER ASSISTANCE S.A. General Agent for Italy – Via Carlo Pesenti 121 - 00156 Rome.

**Third party** is any person who is not a "family member".

**Trip** means a trip, holiday or rental as specified in the relevant travel contract or document.

# SPECIAL TERMS AND CONDITIONS OF INSURANCE

# Delimitation of the insurance covers

The insurance is valid for and applies to the sections as follows: Medical travel assistance/costs, Baggage, Third-party liability: destination specified in the policy.

#### Exclusions common to all the sections

This policy does not cover any services in respect of which the Insured does not notify the Operations Centre beforehand.

The cover also excludes any compensation, service, consequence and/or event directly or indirectly descending from:

- armed conflicts, invasion, actions by foreign enemy forces, hostilities, war, civil war, rebellions, revolutions, insurrections, martial law, military or other coups or attempted coups.
- b) acts of terrorism in general, including the use

of any type of nuclear or chemical weapon. This exclusion does not apply for travel assistance and medical expenses;

- c) ionising radiations or radioactive contamination developed by nuclear fuels, or caused by nuclear transmutation or the radioactive, toxic, explosive properties, or other hazardous characteristics of nuclear equipment and the components thereof;
- d) air, water, soil, subsoil pollution and other environmental damage;
- e) expenses for searching for the Insured at sea or in lakes, in the mountains and in deserts;
- f) fraud or negligence by the Insured;
- g) suicide or attempted suicide.

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

### Limitations common to all sections

In the event of multiple claims covered by the policy and caused by the same event that involved more than one policyholder at the same time, the aggregate policy ceiling for all claims cannot exceed  $\notin$  20,000,000.00.

In the event that the total amount of claims exceeds  $\in$  20,000,000.00, the sums to be paid to the Insured will be reduced on a proportional basis, if possible.

#### Scope of the insurance cover

The Company provides the insurance covers as follows:

A. MEDICAL TRAVEL ASSISTANCE & COSTS

- B. REIMBURSEMENT OF PURCHASED GOODS IN THE CASE OF DELAYED BAGGAGE
- C. THIRD-PARTY LIABILITY
- D. COVER STAY
- E. BACK HOME

# A.1. - Scope of cover

The Company will provide the services as follows, on a 24/7 basis, in the event of ill-health or injuries to the Insured during the trip, through the Operations Centre:

The maximum length of the Policy is: • all destinations : 365 days

RAVEL ASSISTANCE	DESTINATION		
The policy limits shown are per Insured, per accident and insurance period, without prejudice to any sub-limits	Zone 1	Zone 2	Zone 3 / Zone 4
isurance period, without prejudice to any sub-innits	The maximum	coverage amounts ar	e shown in euros
a) <b>TELEPHONE MEDICAL CONSULTATION.</b> The Insured may contact the Operations Centre to arrange a telephone consultation in the event of a sudden emergency during the trip.	YES	YES	YES
<b>b) MEDICAL SERVICES IN CASES OF URGENCY.</b> If the medical staff at the Operations Centre believes that the Insured requires immediate medical attention, the Operations Centre will send a general practitioner or, if no general practitioner is immediately available, will arrange for an ambulance to transfer the Insured to the nearest suitable care facility. These services will be paid for by the Company. <i>NB: In the event of an emergency, the Operations Centre cannot stand in for the competent Emergency Services (118), nor incur the related expenses.</i>	YES	NO	NO
c) <b>REFERRAL TO A SPECIALIST.</b> If, based on the Telephone Consultation, it is deemed that the Insured requires specialist attention, the Operations Centre will provide the name of a consultant nearest to the place where the Insured is staying, compatibly with local availability.	NO	YES	YES
<ul> <li>d) TRANSFER - MEDICAL REPATRIATION. If the medical staff at the Operations Centre recommends the transfer of the Insured on medical grounds, based on an analysis of the clinical picture and in agreement with the local treating physician, the Operations Centre will make the necessary arrangements for: <ul> <li>transferring the Insured to the nearest suitable care facility;</li> <li>transferring the Insured from the care facility to his/her home;</li> <li>repatration to Italy, if the Insured's conditions so require and allow; including the relevant assistance during transfer by medical or paramedical personnel.</li> </ul> </li> <li>Medical transport expenses will be paid for by the Company, using the most suitable means of transport, at the sole discretion of the Operations Centre, such as: <ul> <li>an air ambulance, only for repatriation to Italy and provided that the accident occurred in Europe;</li> <li>a commercial airline service, on a stretcher if necessary;</li> <li>first class or wagon lit train service;</li> <li>ambulance, with no mileage limit;</li> <li>other means of transport.</li> </ul> </li> <li>This service does not apply in the case: <ul> <li>of ailments or injuries that, in the opinion of the medical staff at the Operations Centre, can be treated locally, or which are not so serious as to prevent the continuation of the trip;</li> <li>of infectious diseases, if the transport entails the violation of domestic or international health regulations;</li> <li>the Insured, or his/her family members, apply for voluntary discharge from the care facility to which he/she had been admitted, against medical advice.</li> </ul> </li> </ul>	YES	YES	YES
e) URGENT DISPATCH OF MEDICINAL DRUGS. If the Insured is in need of medicinal drugs registered in Italy but which are unavailable locally, or cannot be replaced with local medications deemed equivalent by the medical staff at the Operations Centre, the latter will make arrangements for them to be dispatched in the fastest possible manner, in accordance with the regulations and timeframes governing the transport of medicinal products. The Company will pay for the shipping costs, while the cost of the medicinal products will be charged to the Insured.	NO	YES	YES
<b>f) INTERPRETING SERVICE.</b> If the Insured is admitted to hospital while travelling and has difficulty communicating with the doctors, for language reasons, the Operations Centre will arrange for a local interpreter to attend the Insured, at the Company's cost.	NO	€1.000	€1.000
<b>g) TRANSLATION OF MEDICAL RECORDS.</b> If the Insured requires the translation of his/her medical records, following hospitalisation during the trip, he/she may request their translation into Italian from English, French, Spanish or German. The translation will ne made only with the consent of the Insured, in accordance with the applicable privacy regulations.	NO	YES	YES

h) TRAVEL EXPENSES OF A FAMILY MEMBER IN THE EVENT OF HOSPITALISATION. If the Insured, travelling alone or with a minor, is admitted to hospital, with an expected recovery period of more than 5 (five) days, the Operations Centre will provide a return ticket to a family member in Italy (by first class rail or on an economy class flight or by any other means of transport, at its sole discretion) to reach him/her.	YES	YES	YES
The travel expenses will include accommodation (incl. breakfast) for the family member.	For a maximum of 7 nights with a limit of <b>€ 700</b>	For a maximum of 7 nights with a limit of <i>€</i> <b>700</b>	For a maximum of 7 nights with a limit of <b>€ 700</b>
<ul> <li>i) EXTENSION OF STAY. If the Insured is unable to travel back to Italy on the scheduled date, because he/she: <ul> <li>has been hospitalised, with an expected recovery period of more than 7 (seven) days;</li> <li>has lost his/her passport, or it has been stolen, as attested in a report made to the competent local authorities;</li> <li>the Company will pay for the accommodation expenses (incl. breakfast) of the Insured and his/her travel companions, if insured.</li> </ul> </li> </ul>	For a maximum of 10 nights with a limit of € 1.000	For a maximum of 10 nights with a limit of € 1.000	For a maximum of 10 nights with a limit of € <i>1.000</i>
<b>j) REPATRIATION OF A CONVALESCING INSURED PERSON TO HIS/HER</b> <b>DOMICILE.</b> If the Insured is discharged from hospital but is objectively unable to make his/her own way back to his/domicile, with the originally planned means of transport, the Company will arrange for his/her medical repatriation, at its own expense.	YES	YES	YES
This cover also applies to any family members and to a travel companion.	€ 500	€ 750	€ 1.500
<b>k) NURSING CARE AFTER REPATRIATION.</b> If the Insured, on the basis of a medical request, requires professional ( <i>nursing or social</i> ) care at home, in the 7 ( <i>seven</i> ) days after his/her return to Italy, he/she may apply to the Operations Centre, which shall make arrangements to provide such care, based on specific partnership agreements, at its own expense.			
I) REPATRIATION OF A DECEASED BODY. If the Insured dies during the trip,		€ 600	
the Operations Centre will arrange for the transportation of the body to the place of burial in Italy. Transportation will be made in accordance with the applicable international regulations, and after having carried out the requisite formalities in the place of death. The Company will pay the transportation costs, but not any funeral, burial or cremation expenses. The Company will also provide a family member with a return ticket to visit the place of death, including accommodation expenses for one night in the nearest hotel.	YES	YES	YES
<b>m) CURTAILMENT OF TRIP.</b> If the Insured has to cut his/her trip short, and return to Italy before the scheduled return date, with a different means of transport, due to the death or hospitalisation of a family member, with an expected recovery date of more than 7 (seven) days, the Operations Centre will make the necessary arrangements and incur the related expenses. This cover also applies to the return of family members or a travel companion, provided that they are insured.	€ 550	€2.000	€2.000
n) URGENT COMMUNICATION. If the Insured needs to communicate urgently with persons living in Italy, and is unable to do so directly, the Company will forward any messages, at its own expense.	YES	YES	YES
<ul> <li>o) ADVANCE FUNDS FOR BASIC NEEDS, IN THE EVENT OF THEFT, MUGGING, ROBBERY OR LOSS OF MEANS OF PAYMENT. If the Insured needs to make unforeseen payments for basic necessities (<i>hotel</i> <i>accommodation, vehicle hire, travel tickets, meals, etc.</i>) and is unable to do so, directly and immediately, due to theft, mugging, robbery or loss of his/her means of payment, the Operations Centre can pay the amounts to the suppliers, based on the relevant bill, within the established limit. The Insured must forward a copy of the report to the local authorities. The cover will become operative once the Operations Centre in Italy receives suitable bank security for repayment. The Insured will in any case pay back the advanced funds within 30 (<i>thirty</i>) days from the payment. This service does not apply:</li> <li>to countries where the Company has no branches or correspondents;</li> <li>when the Insured is unable to provide suitable bank security for repayment, deemed as such by the Company, at its sole discretion;</li> <li>to the cases in which money transfers abroad are considered a violation of either the applicable Italian regulations or those in force in the destination country.</li> <li>p) CREDIT CARD PROTECTION. In the event of the theft or loss of the</li> </ul>	NO	€ 5.000	
Insured's credit cards, the Operations Centre, acting on a specific request, will arrange to put the Insured in contact with the credit card issuers for the necessary credit card blocking formalities. The Insured will then be responsible for perfecting the blocking procedure, according to the rules of the single issuers.	NO	YES	YES

<ul> <li>q) ADVANCE FUNDS FOR LEGAL ASSISTANCE. If the Insured is arrested, or threatened with arrest, and needs legal assistance, the Operations Centre will arrange for a lawyer to assist the Insured, in accordance with the local regulations, and will advance the payment of the lawyer's fees. The Insured will be required to notify the reasons for this request and the amount to be advanced. The cover will become operative once the Operations Centre in Italy receives suitable bank security for repayment. The Insured will in any case pay back the advanced funds within 30 (<i>thirty</i>) days from the payment. This service does not apply:</li> <li>to countries where the Company has no branches or correspondents;</li> <li>when the Insured is unable to provide suitable bank security for repayment, deemed as such by the Company, at its sole discretion;</li> <li>to the cases in which money transfers abroad are considered a violation of either the applicable Italian regulations or those in force in the destination country.</li> </ul>	NO	€1.500
<ul> <li>r) ADVANCE FUNDS FOR BAIL PAYMENT. If the Insured, during the trip, is taken into custody, arrested or threatened with arrest and cannot directly provide the bail money to be released, the Company may pay the bail on the Insured's behalf. The cover will become operative once the Operations Centre in Italy receives suitable bank security for repayment. The Insured will in any case pay back the advanced funds within 30 (<i>thirty</i>) days from the payment. This service does not apply:</li> <li>to countries where the Company has no branches or correspondents;</li> <li>when the Insured is unable to provide suitable bank security for repayment, deemed as such by the Company, at its sole discretion;</li> <li>to the cases in which money transfers abroad are considered a violation of either the applicable Italian regulations or those in force in the destination country.</li> </ul>	NO	€ 5.000
s) TELEPHONE EXPENSES. The Company shall refund the telephone expenses incurred by the Insured to contact the Operations Centre, if supported by appropriate receipts. The Company shall also refund any "international roaming" expenses incurred, in connection with calls to the Operations Centre during assistance.	NO	€ 300

MEDICAL TRAVEL EXPENSES	M	laximum coverage	
The policy limits shown are per Insured, per accident and insurance period, without prejudice to the sub-limits	Zone 1	Zone 2	Zone 3 / Zone 4
		(in euros)	
DIRECT PAYMENT – Only subject to prior notification of the Operations Centre			
If the Insured is required to incur medical/hospital expenses for any surgical or other treatment that cannot be postponed, during the period of validity of the cover, the Company will pay for the relevant costs locally, through the Operations Centre. This cover will apply until either, (i) the date of discharge from hospital, or (ii) the Insured is able to be repatriated, in the judgement of the Company's medical staff. If the Company is unable to make a direct payment, the expenses incurred will be reimbursed to the Insured, provided that they have been authorised by the Operations Centre, which, in this case too, will be notified in advance during the hospitalisation period. No reimbursement will be forthcoming if the Insured fails to notify the Operations Centre.	€ 10,000	€ 30,000	€ 100,000
A REFUND – Even without prior notification of the Operations Centre, albeit subject to the following limits.			
a) The Company will reimburse any transportation expenses from the place of the event to the A&E department or healthcare facility.	€ 500 € 2,500		500
b) The Company will refund any expenses for medical exams and/or medicinal drugs, provided that they have been incurred based on a medical prescription, outpatient and/or emergency treatments ( <i>including day hospital treatments</i> ), incurred as a result of injuries or ill-health during the trip.	€ 250	ە	750
c) <u>Dental treatment</u> : The Company will reimburse any expenses incurred for urgent dental treatment. <u>Accident-related treatment</u> : In the event of treatment during the trip, the Company will also reimburse any expenses incurred for treatment, provided that they are within 30 days from returning.	NO	€ž	250
d) The Company will reimburse any rehabilitation expenses, including physiotherapy, incurred in connection with an accident or illness while travelling and leading to hospitalisation. The insurance only covers the expenses incurred in connection with the hospitalisation, or the period of convalescence immediately after hospitalisation, and, in any case, prior to the Insured's return home.	NO	€ž	250

# A.2 - Effective start date of the Medical Travel Assistance cover

This cover begins when the trip starts and ends when the trip finishes, but in any case no later than the expiry date of the policy.

The cover will be provided within the limits of capital and of the services available in the place in which the event occurs, provided that it is included among the "destinations" specified in the policy.

#### A.3 - Exclusions (supplementing the common exclusions)

No cover will be provided in the following cases:

a) if the Insured (or the person acting on behalf of the Insured), (i) fails to comply with the instructions provided by the Operations Centre, (ii) requests to be discharged from the healthcare facility he/she has been taken to, against the opinion of the treating physicians, or (iii) refuses medical transport/repatriation. In both cases, the Company will immediately suspend any assistance and the coverage of any further medical expenses accruing from the day after the Insured's refusal of the medical transport/repatriation to Italy;

b) a trip to a country where, at the time of the Insured's departure, certain prohibitions or limitations (of a permanent or temporary nature) had been put into place by the competent public authorities;

c) a trip undertaken for the purpose of undergoing medical/surgical treatments.

d) travel to countries formally advised not by the Ministry of Foreign Affairs and International Cooperation, for Italy, and / or by equivalent competent authority of the country of destination of the trip;

- e) deriving from the exercise of hunting activities;
- f) all activities involving the use of mines, weapons and / or dangerous substances, explosives, access to mines, excavations and / or quarries and land and sea mining;

g) from carrying out the activity of firefighter, pyrotechnician, diver, acrobat, stunt double, stunt performer as well as pilot or crew of aircraft;

h) from the practice of parachuting and downhill.

The guarantee does not operate in the event of non-observance / compliance with the rules provided for vaccines and prophylaxis.

#### Furthermore:

# A.3.1- Assistance during travel

The Company will not provide any cover with respect to events consequent to:

- a) the failure to contact the Operations Centre or, in any case, without its prior authorisation;
- b) extreme trips to remote areas that can be reached only by using special emergency/rescue vehicles.

# A.3.2- Medical costs during travel

The Company will not provide any cover with respect to events consequent to:

- a) rehabilitation/physiotherapy treatments differing from those described in section (d) of the Medical Travel Costs;
- b) the purchase, application, maintenance and repair of prosthetic and therapeutic appliances;
- c) mental illness, schizophrenia, manic depression, psychosis, major depression in the acute phase;
- d) the treatment or elimination of physical defects or congenital malformations, for cosmetic applications, spa/slimming treatments, dental treatments (except for those mentioned above following an accident);

- e) voluntary terminations of pregnancy;
- f) the practice of air sports in general and extreme sports, if practised outside a sports organisation and without the requisite safety precautions;
- g) any professional sports activities or which, in any case, feature direct or indirect remuneration;
- h) the purchase and repair of eyeglasses and contact lenses;
- i) follow-up exams in Italy for diseases caught during a trip.
- The cover does not apply to accidents caused by or depending on:
- natural childbirth or caesarian section;
- pregnancy/childbirth related conditions, beyond the 26th week of pregnancy;
- wilful deceit by the Insured;
- the abuse of alcohol or psychotropic drugs, and the use of narcotic and hallucinogenic drugs;
- attempted suicide or suicide.

## A.4 - Provisions and limitations

The Insured releases the physicians that have examined him/her, and the persons involved by the policy conditions, from their obligation to professional secrecy, solely with respect to the events and the Company.

## Furthermore:

# A.4.1- Assistance during

a) Assistance will be provided per event - regardless of the number of people involved - and within the policy limit and any sub-limits;

- b) the assistance will be provided, in accordance with the conditions hereunder, based on the Insured's heath and needs, using the means and facilities the Company deems most suited to the purpose, at its sole discretion;
- c) the Company will not be held liable for the following:
- any delays in or failure to provide the services hereunder for reasons of force majeure, restrictions imposed by the local authorities or provisions contrary to the standards and regulations in force in the country where the services must be provided;
- any mistakes due to incorrect information provided by the Insured or the persons acting on behalf of the Insured;

d) the Company will not be liable for compensation in lieu of the cover due.

#### **B. REIMBURSEMENT OF PURCHASED GOODS IN THE CASE OF DELAYED BAGGAGE**

### B.1 - Territories: the selected Destination as specified in the policy.

B.2 - Scope of cover:

DELAYED AND/OR LOST BAGGAGE The maximum coverage shown is per Insured and event	Maximum coverage	Policy limits
<ul> <li>DELAYED BAGGAGE. In the case of delayed baggage of more than 8 hours (after the scheduled arrival time) by the airline carrier, the Company shall reimburse the following, within the maximum coverage amounts:         <ul> <li>the purchase of necessary goods (such as clothing and personal hygiene products)</li> </ul> </li> </ul>	€ 200	<ul> <li>The warranty covers only one event during the term of validity hereof.</li> <li>The Company shall not reimburse expenses incurred: <ul> <li>in connection with delayed baggage on the return flight to the Insured's usual domicile;</li> <li>after the baggage is returned.</li> </ul> </li> </ul>

#### B.3 - Payment criteria

The Company shall pay the compensation within the maximum coverage per Insured and insurance period.

#### B.4 - Effective start date of coverage

The warranties "Delayed baggage" and "Lost baggage" are effective from the first check-in and terminate before the last check-in.

# **B.5 - Provisions and limitations**

In the case of articles of clothing and personal hygiene products purchased during the trip, the reimbursement shall be made at purchase cost, provided that the relevant receipts are shown.

# C. THIRD-PARTY LIABILITY

**C.1 - Territories:** the selected Destination as specified in the policy.

C.2 - Scope of cover:

THIRD-PARTY LIABILITY The maximum cover amounts shown are per Insured, event and insurance period	Maximum coverage For injury or damage to persons, property and animals	Policy limits
<ul> <li>THIRD-PARTY LIABILITY. The Policy covers any sums the Insured is required to pay for civil liability under the law, as compensation (principal, interest and expenses), with respect to damage involuntarily caused to third parties, in the case of death, personal injuries and damage to property or animals, as a result of an accidental event occurring during the term of the policy and regarding the Insured's private - and not professional - life. The warranty also covers any injury or damage caused by:</li> <li>the Insured's bicycles and motorless vehicles/craft no more than 6.5 metres long, golfcars;</li> <li>the use, by the Insured, of horses and other saddle animals, with the owner's consent;</li> <li>the practice, by the Insured, of amateur sports and leisure activities, including competitions, and camping activities.</li> </ul>	€ 100,000	Regarding injury or damage to animals and property compensation is provided with the application of a policy limit of €150 per event.

# C.3 - In the event of an accident occurring (see also art. C.5)

The Insured, or any other person acting on his/her behalf, must:

a) notify

- the Company, in accordance with the policy. Failure to do so may entail the total or partial loss of the right to compensation (art. 1915 of the Civil Code);
- all the insurers, in the case the Insured has taken out various policies covering the same risk, specifying the names of all the other insurerrs (art. 1910 of the Civil Code);

b) make available to the Company all the documents that may be useful for the investigation and verification of the claim.

## C.4 - Exclusions

The following kinds of damage are not covered by this policy:

- damage due to malicious actions performed or attempted by the Insured;
- damage related to the practice of a profession;
- damage during hunting;
- burglary;
- damage while driving motor vehicles on public streets, or other streets which are, to all intents and purposes, made or considered to be equal to or the same as public streets, or the use of motor-powered boats or aircraft;
- damage from firearms and firearm ammunition;
- damage to other goods or property handed over to the Insured for safekeeping or in his/her possession for any reason whatsoever.

# C.5 - Handling of third-party liability claims

The Company shall handle claims both in and out of court and whether of a civil or criminal nature, in the name of the Insured, by appointing, if necessary, attorneys-at-law and exprrts and exploiting all the rights and legal remedies available to the Insured. The Insured shall collaborate in the handling of the said claims and shall appear personally in court if the procedures so require. The Company shall be entitled to exercise the right of recourse against the Insured for any harm suffered as a result of the Insured's failure to comply with the obligations above. The expenses incurred in connection with any legal actions brought by the damaged party against the Insured shall be paid by the Company within the limit of one fourth of the insured sum. However, if the damaged party is entitled to receive compensation in excess of the insured capital, the court-related expenses shall be apportioned between the Company and the Insured in proportion to their interest.

The Company shall not recognise any expenses incurred by the Insured for lawyers or experts appointed by it and not designated by the Company, and shall not pay any fines or penalties or expenses incurred in connection with any criminal proceedings.

# D. COVER STAY (OPTIONAL WARRANTY - IS VALID AND OPERATING ONLY IF IT HAS BEEN RECALLED ON THE INSURANCE CERTIFICATE AND THE RELATIVE PREMIUM HAS BEEN PAID)

# FOR THIS WARRANTY, THE EXCLUSIONS AND DELIVERY METHODS PROVIDED FOR THE TRAVEL ASSISTANCE POLICY SECTION APPLY, IF RELEVANT.

COVER STAY	<b>Compensation limits</b>
<ul> <li>OBJECT OF THE INSURANCE</li> <li>In the event of the Insured's medical stop, ordered by the competent authority for security reasons: <ul> <li>upon arrival at the airport of the country of destination or transit;</li> <li>or during the course of the trip or stay for the purpose of carrying out health checks;</li> <li>or in case of declared quarantine with forced stay on the spot; the Company will bear any major essential and indispensable costs for food and hotel accommodation incurred by the Insured for forced stay on site and for travel tickets to return.</li> <li>If, on the other hand, the medical detention concerns an adult, any accompanying person, who is not detained, is excluded from this coverage. The Company reserves the right to ask the Insured for any refunds obtained from tourism service providers and / or carriers.</li> </ul> </li> </ul>	Maximum: € 2,500.00 per insured and 25,000.00 per policy If the medical detention concerns a minor, without an adult companion, this guarantee is intended to be provided in favor of an adult companion, even if not insured, with a sub-limit of Euro 1,000.00.

#### **Exclusions** (in addition to common exclusions)

a) willful misconduct or gross negligence of the Insured;

b) trips undertaken to countries in which medical detention was already known;

c) if the destination is to be or is declared to be under quarantine during the trip. This exclusion does not apply if the Insured or a travel companion is infected by the pathology for which the quarantine has been declared;

d) costs not covered by the guarantee;

e) losses following the insured's waiver of the continuation / reprotection of the interrupted trip offered by the travel organizer.

# E.BACK HOME (OPTIONAL WARRANTY - IS VALID AND OPERATING ONLY IF IT HAS BEEN RECALLED ON THE INSURANCE CERTIFICATE AND THE RELATIVE PREMIUM HAS BEEN PAID)

# THIS WARRANTY IS VALID AND OPERATING ONLY IF IT HAS BEEN RECALLED ON THE INSURANCE CERTIFICATE AND THE RELEVANT PREMIUM HAS BEEN PAID.

If the Insured is unable to continue the trip according to the itinerary initially planned due to:

- failure or insolvency of travel services by the travel organizer;
- natural disasters (tornadoes, hurricanes, earthquakes, volcanic eruptions, floods, floods, nuclear explosions and other upheavals of nature);
- epidemic or pandemic (declared by any governmental body), of seriousness and virulence such as to result in high mortality or to require restrictive measures
  in order to reduce the risk of transmission to the civilian population.

The Operations Center organizes:

- moving to another accommodation or
- · coming back home to the insured country of origin and residence.

#### Limit: € 1,500.00 per insured and € 5,000 per policy

### 3- HOW TO REQUEST ASSISTANCE

The Insured, or any other party acting on his/her behalf, shall immediately contact the Operations Centre, providing his/her personal details, the policy number and the type of assistance required, also specifying the following:

# Medical travel assistance and costs following hospitalisation

- a temporary contact number;
- information regarding the hospital (name and telephone number, ward, name of the doctor assisting the patient);
- contact details of any family members/travel companions accompanying the Insured.

#### 4- HOW TO MAKE A CLAIM

In connection with each claim, the Insured, or other party acting on his/her behalf, shall report the event to the Company within 30 days from returning home, and regardless of the type of report made (i.e. whether made in writing or online) providing all the documents that may be of use in handling the claim, in particular:

• the policy number;

- the receipt of payment of the trip and the relevant itinerary;
- the personal details and tax code of the payee (pursuant to Law 248/2006);
- name and address of the Bank, IBAN code, SWIFT code, in the case of a foreign account;
- name of the account holder, if different from the name of the person concerned;
- place, date and time of the event, as well as the circumstances and causes thereof.

The Insured shall also provide for the reimbursement of:

#### Medical expenses:

any records produced locally (medical records, A&E report, medical certificate stating the diagnosis) and related receipts of the medical expenses incurred, in the original.

# Delayed and/or lost baggage

- a copy of the Property Irregularity Report (PIR);
- a copy of the ticket showing the complete itinerary and of the baggage claim tag;
- the airline company's reply stating the time and date of the delayed or lost baggage, and the compensation paid by it;
- the original receipts and a list of any basic necessities purchased.

# Third-party liability

- a compensation request in writing from the damaged party, specifying the amount of the claim.
- any witness accounts.

#### Cover Stay

The insured must send the following documentation:

- place, day and time of the event as well as the circumstances and causes that determined it;
- documentation certifying the medical detention ordered by the Authority;
- travel contract;
- any re-routing travel document showing the higher cost paid or a new travel document issued;
- refund document for airport taxes, or alternatively declaration of non-flown, issued by the air carrier;
- bills for expenses related to forced residence (hotel expenses, meals);
- documentation certifying any refunds recognized by service providers;
- All documents relating to expenses (invoices, travel documents, etc.) must be in the name of the Insured.

#### **5- IMPORTANT INFORMATION**

# IF NEEDED - 24/7 OPERATIONS CENTRE

Helpline + 39 06 42115820

# CLAIMS

#### Claims must be reported as follows:

The Insured shall notify the claim via the website<u>www.axapartners.it</u> enter "Denuncia sinistro" and follow the instructions at "Istruzioni per la denuncia

Alternatively, the Insured can download the claim notification form at "Modulo di denuncia" from the site <u>www.axapartners.it</u> and send it together with all the useful documentation to:

Inter Partner Assistance S.A. - Travel - Ufficio Sinistri Casella Postale 20175 Via Eroi di Cefalonia 00128 Spinaceto – Roma