

DOCUMENTS TO THE PROOF OF INSURANCE FOR POLICY NO: 5249

Valid only in combination with the insurance premiums and descriptions of benefits indicated on the insurance certificate or the travel / booking confirmation. The agreed insurance is documented on the insurance certificate and / or the travel / booking confirmation.

Complete Protection incl. Travel Health Insurance AVB 21

COVERAGE	WHEN IT APPLIES: COVERAGE SUMMARY	MAXIMUM BENEFIT
Travel Cancellation Insurance	You have to cancel <i>your trip</i> before <i>you</i> depart. Incl. cancellation in case of terrorist attacks Deductible (only for rates with a deductible): With rates that include a deductible <i>you</i> will personally bear 20 % of the reimbursable loss; at least 25 € per loss event per person or property	see Proof of Insurance
Travel Interruption Insurance	Your travel plans are interrupted while <i>you</i> are on <i>your trip</i>. Incl. cancellation in case of terrorist attacks Deductible (only for rates with a deductible): With rates that include a deductible <i>you</i> will personally bear 20 % of the reimbursable loss; at least 25 € per loss event per person or property	see Proof of Insurance
Travel Delay Insurance	Your travel plans are delayed while <i>you</i> are on <i>your trip</i>. Maximum reimbursement per 24-hour period of delay (minimum required delay: 4 hours): No Receipts Daily Limit: 200 € per person / family / couple With Receipts Daily Limit: 300 € per person / family / couple	1,500 € per person, 3,000 € per family / couple
Baggage Insurance	Your baggage is lost, damaged, or stolen while on <i>your trip</i>. Maximum benefit for all high value items: 50 % of the insured sum	3,000 € per person, 6,000 € per family / couple
Baggage Delay Insurance	Your baggage is delayed by an airline, cruise line, or other travel carrier while on <i>your trip</i>. Minimum Required Delay: 6 hours No Receipts Sublimit: 100 € (outbound only) per insured event and per person / family / couple	150 € per person, 300 € per family / couple per insured event
Travel Health Insurance incl. Medical Return Transport	You have to pay for emergency medical or dental treatment while on <i>your trip</i>. Transportation is needed following a medical emergency while on <i>your trip</i>. Maximum benefit for search, rescue and recovery costs: 10,000 € per person	unlimited for medical / dental emergency treatment unlimited for Medical Return Transport
Travel Liability Insurance	You are financially liable for damage <i>you</i> cause to a third party or their property while on <i>your trip</i>. Maximum benefit in case of damage to movable property of the host parents: 10,000 € per person and per insured event	500,000 € per person, 1,000,000 € per family / couple
Travel Accident Insurance	You suffer a death or disability as a result of a travel accident during <i>your trip</i>. Maximum benefit in case of death: 10,000 € per person Maximum benefit in case of permanent invalidity: 30,000 € per person	30,000 € per person
Missed Activity (Sports & Activity Insurance)	You miss a prepaid activity during <i>your trip</i>. Maximum benefit per event: 100 € per person / family / couple (500 € per person / family / couple
Sporting Equipment Insurance (Sports & Activity Insurance)	Your sporting equipment is lost, damaged, or stolen while on <i>your trip</i>.	500 € per person, 1,000 € per family / couple
Sporting Equipment Rental Insurance (Sports & Activity Insurance)	You need to rent <i>sporting equipment</i> when <i>your personal sporting equipment</i> is lost, damaged, or stolen while on <i>your trip</i>.	500 € per person, 1,000 € per family / couple
Search, Rescue and Recovery (Sports & Activity Insurance)	You are reported missing or need to be rescued from a physical emergency while on <i>your trip</i>.	5,000 € per person
Travel Assistance	24/7 assistance in case of personal emergencies during <i>your trip</i> and information services during the term of <i>your</i> insurance contract	service without cost coverage

The above is only a brief description of the coverage available under *your policy*. Terms, conditions, and exclusions apply to all coverages. Please carefully review *your policy* for complete details. The definitions of the terms in the Definitions section of the *policy* will also apply to this Coverage Summary.

Important Notices and Definitions

- **Insurer:** We, AWP P&C S.A., Branch Office Germany are *your* insurer. *Our* main business activity is the insurance of goods and services, including travel insurance.
- **Mode of travel:** valid for all modes of travel – including business travel
- **Area of application:** Europe (incl. Russian Federation, Mediterranean coastal states, the Canary Islands, the Azores, and Madeira) or world excl. USA / Canada (yet, on outward and return journeys with transfer connections, this includes a maximum of one overnight stay in USA / Canada) or world incl. USA / Canada
- **Insured duration of travel:** see insurance certificate / travel confirmation / booking confirmation. The insurance policies are valid for the duration of the *trip* (from commencement of the *trip* to the time of return); a maximum of 56 days is possible.
- **Insurance premium for one person:** each valid for one person
- **Insurance premium for families / couples:** Valid for up to two adults (irrespective of the family relationship and common place of residence) and children up to their 21st birthday. Any number of own children can be insured. Otherwise a maximum of six children may be insured. All insured persons must be listed by name.
- **Notes on the conclusion of insurance:** All travel cover containing travel cancellation insurance, should be purchased at the time of booking the travel. Travel cover may be subsequently arranged up to 30 days prior to commencement of travel. If there are 29 days or less between booking and commencement of travel *you* must purchase the cover immediately, but no later than within the next three days. The insurance is only valid for the booked travel as described in the travel confirmation. The insurance cover for the Travel Cancellation Insurance commences upon conclusion of the insurance. For the other insurance lines, the insurance cover begins at the time of commencement of the insured travel, and ends at the agreed point in time. The insurance cover will end at the very latest with the completion of the insured travel. In the following case, the insurance cover will be extended beyond the agreed point in time: if *you* have insured the entire planned *trip*, and the end of the *trip* is delayed for reasons outside of *your* control.
- **PLEASE NOTE: If the insured event occurs, we will only be obliged to provide indemnity if the premium has been paid, or if you, as the policyholder, are not at fault for the non-payment of the premium. You are required to prove this to us.**
- To make *your* documents easier to read, we use the masculine form when referring to people. *We* always mean all genders.

OUR PROMISE TO YOU

Questions about *your* insurance benefits

Our Service Team is ready to provide *you* with the information *you* need: Mon. – Fri. 8:30 am – 7:00 pm, Sat. 9:00 am – 2:00 pm

Telephone: +49.89.6 24 24-460

Fax: +49.89.6 24 24-244

Email: service-reise@allianz.com

Cancellation advice

Cancellation advice is included in *your* insurance *policy*. Should *you* become ill, experienced medical personnel will advise *you* whether *you* need to cancel immediately, or whether *you* can still wait and see. *We* will assume the risk of any higher cancellation costs incurred.

Telephone: +49.89.6 24 24-245

Email: medizin@allianz.com

Assistance in an emergency

In the case of an emergency, *we* are there to assist *you*. *Our* **24-hour Emergency Service** will provide *you* with fast, expert assistance around the clock, anywhere in the world!

Please have the following information ready:

- the exact address and telephone number of your current whereabouts
- the names of the persons with whom you are in contact (e.g. your doctor, the hospital, the police)
- an exact description of the situation
- all other necessary information (e.g. start and / or end of travel, the tour operator and the insurance certificate number)

Telephone: +49.89.6 24 24-245

Email: notfall-reise@allianz.com

Registering a claim

Quite simply and quickly online at www.allianz-reiseversicherung.de/versicherungsfall or via letter to AWP P&C S.A., Schadenabteilung, Bahnhofstraße 16, D – 85609 Aschheim (near Munich)

Quick answers via chat bot

Our chat bot can also help *you* with many concerns and questions. *You* can reach it around the clock at www.allianz-reiseversicherung.de

COMPLAINTS, APPLICABLE LAW, CONTRACTUAL LANGUAGE, AND WITHDRAWAL

How you can lodge a complaint

It is *our* aim to offer *you* first-class services. Engaging with *your* concerns is equally important to *us*. If, at any time, *you* are not completely satisfied with *our* products or *our* service, please do not hesitate to inform *us*.

You can use any means of communication to inform *us* of *your* complaints concerning contractual or claims-related issues:
by telephone: +49.89.6 24 24-460
by email: beschwerde-reise@allianz.com
by letter addressed to AWP P&C S.A., Beschwerdemanagement, Bahnhofstraße 16, D – 85609 Aschheim (near Munich)
Further details about *our* complaints handling process is available at www.allianz-reiseversicherung.de/beschwerde

You can also contact the insurance ombudsman with *your* complaint regarding all insurance policies (with the exception of travel health insurance):
Versicherungsombudsmann e. V., post office box 08 06 32, D – 10006 Berlin
Telephone: 0800.3 69 60 00, Fax 0800.3 69 90 00
Email: beschwerde@versicherungsombudsmann.de
You can find further information at: www.versicherungsombudsmann.de

For complaints about any insurance line, *you* can also contact the competent supervisory authority:
Bundesanstalt für Finanzdienstleistungsaufsicht / German Federal Financial Supervisory Authority (BaFin), Graurheindorfer Straße 108, D – 53117 Bonn (www.bafin.de).

Please note that this does not affect *your* right to take legal action.

Applicable law

The contractual relationship, including our pre-contractual relationship, is subject to German law, unless this is precluded by international law. Lawsuits arising from the insurance agreement may be raised by the policyholder and the insured person before the court which holds jurisdiction over the location in which the company or its branch office has its registered address. If the policyholder or the insured person is a natural person, lawsuits may also be raised before the court which holds jurisdiction over the location in which the policyholder or the insured person is domiciled at the time the action is filed or, if he / she has no domicile, over the location in which he / she has his/her habitual residence.

Contractual Language

We will conduct *our* correspondence with *you* in German. As an offer, we provide some of *our* documents and website information in English. However, these are for information purposes only, the respective German version remains legally binding.

Instruction Regarding Revocation

Part 1: Right of Revocation for Contracts With a Term of One Month Or More, Consequences of Revocation and Special Notices

Right of Revocation

You may revoke this contractual agreement within 14 days in text form (e.g. letter, fax, email) without having to state any reason. The revocation period shall begin at such time as *you* receive the following documents in text form:

- the insurance policy,
- the terms of contract, including the general terms and conditions of insurance, these in turn including the tariff regulations,
- this Instruction Regarding Revocation,
- the Insurance Product Information Document,
- and the further information listed hereafter in part 2.

Timely dispatch of the revocation shall suffice for compliance with the time limit. The revocation notice should be addressed to:
AWP P&C S.A., Branch Office Germany
Bahnhofstraße 16
D – 85609 Aschheim (near Munich)
Fax +49.89.6 24 24-244
Email: service-reise@allianz.com

Legal consequences of revocation

If *you* have effectively exercised *your* right of revocation, the insurance cover shall end. In this case the following applies: If *you* agreed that the insurance cover commences prior to the end of the revocation period, we shall reimburse *you* for that part of the insurance premiums attributable to the time after *your* revocation notice was received. We will be entitled to retain the portion of the premium which corresponds to the period of time up to the receipt of the revocation notice. It will be calculated on a pro rata basis per day, based on the amount of the insurance premium shown in the insurance policy for the entire insured period. The duty to reimburse shall be fulfilled without undue delay, at the latest 30 days after receipt of the revocation. If the insurance cover did not commence prior to the end of the revocation period, the effect of a revocation notice will be that any benefits received must be reimbursed and any advantage derived therefrom (e.g. interest) must be handed over.

Special Notices

Your right of revocation shall cease to apply if the contract has been wholly fulfilled by both sides at *your* explicit request before *you* have exercised *your* right of revocation.

Part 2: List of further information required for the commencement of the time limit.

With regard to the "further information" mentioned in part 1 sentence 2, the information obligations are listed in detail below:

We must provide *you* with the following information:

1. *Our* identity and that of the branch, if any, through which the contract is to be concluded. Furthermore, the commercial register with which the legal entity is registered and the corresponding register number have to be specified.
2. *Our* address for service and any other address relevant to the business relationship between *us* and *you*. In the case of legal persons, associations of persons or groups of persons, the name of a person authorised to represent them must also be stated. If this communication is made by means of the transmission of the contractual provisions, including the general terms and conditions of insurance, the information must be in a prominent and clearly designed form.
3. *Our* main business activity

4. The essential characteristics of the insurance benefit, in particular information on the type, scope and due date of *our* benefit
5. The total price of the insurance, including taxes, and other price components. If the insurance relationship is to comprise several independent insurance contracts, the insurance premiums must be quoted separately. If an exact price cannot be stated, *we* must provide information on the basis of the calculation of the premium to enable *you* to verify the price.
6. Details regarding payment and performance, in particular as to the payment of the insurance premium
7. Details of how the contract will come into existence, in particular the commencement date of the insurance and the insurance cover, as well as the duration of the period during which *you*, as the applicant, are to be bound by the application
8. The existence or non-existence of a right of revocation as well as the conditions, details of the exercise, in particular the name and address of the person to whom the revocation is to be declared, and the legal consequences of the revocation, including information on the amount *you* may have to pay in the event of revocation. If this communication is made by means of the transmission of the contractual provisions, including the general terms and conditions of insurance, the information must be in a prominent and clearly designed form.
9. Information on the duration of the contract
10. Information on the termination of the contract, in particular on the contractual termination conditions. If this communication is made by means of the transmission of the contractual provisions, including the general terms and conditions of insurance, the information must be in a prominent and clearly designed form.
11. The Member States of the European Union whose law *we* use as a basis for establishing relations with *you* prior to the conclusion of the insurance contract
12. The law applicable to the contract, a contractual clause on the law applicable to the contract or on the court of competent jurisdiction
13. The languages in which the terms and conditions of the contract and the preliminary information listed in this Part 2 will be communicated and the languages in which, with *your* consent, *we* will communicate with *you* during the term of this contract
14. A possible access for *you* to an out-of-court complaint and redress procedure and, where applicable, the conditions for such access. It shall be expressly stated that this does not affect the possibility for *you* to take legal action.
15. The name and address of the competent supervisory authority and the possibility of lodging a complaint with this supervisory authority

End of Instruction Regarding Revocation

DATA PROTECTION POLICY

In accordance with Art. 13 and 14 of the General Data Protection Regulation (GDPR), *we* are informing *you* about how *your* personal data is processed by AWP P&C S.A., Niederlassung für Deutschland (Germany Branch), and about the rights to which *you* are entitled under data protection law. Please make all co-insured individuals (e. g. your spouse) aware of this policy.

I Who is responsible for processing your personal data?

Responsibility for processing *your* personal data rests with

AWP P&C S.A., Niederlassung für Deutschland
Bahnhofstraße 16
D - 85609 Aschheim (near Munich).

The Data Protection Officer can be contacted by standard mail at the aforementioned address, using the suffix "Data Protection Officer", or by email at datschutz-azpde@allianz.com

II For what purpose is your data processed, and on what legal basis does this take place?

1. What applies to all categories of personal data?

We process *your* personal data in compliance with the EU General Data Protection Regulation (GDPR), the German Federal Data Protection Act (BDSG), the provisions of the German Insurance Contract Act (VVG) relevant to data protection law, as well as all other applicable laws.

When *you* apply for insurance cover, *we* will require the information provided by *you* at this point in order to arrange the contract and to estimate the risk assumed by *us*. If the insurance contract comes into being, *we* will process this data for the implementation of the contractual relationship, such as for invoicing purposes. *We* require information about loss or damage in order to be able to assess whether an insured event has occurred and determine the extent of this loss or damage.

It is not possible to arrange and implement the insurance contract without processing *your* personal data.

Art. 6 (1) b) GDPR constitutes the legal basis for the processing of personal data for pre-contractual and contractual purposes.

Alongside that, Art. 6 (1) a) and c) – f) GDPR contain other legally defined situations in which *we* are entitled to process personal data.

We will process *your* data in order to fulfil a legal obligation in accordance with Art. 6 (1) c) GDPR, such as to review claims for settlement, if another insurer seeks recourse from *us* due to the existence of multiple insurance policies.

We will also process *your* data in order to uphold *our* legitimate interests or the legitimate interests of others, Art. 6 (1) f) GDPR. This may be the case particularly:

- for ensuring IT security and IT operations
- for marketing *our* own insurance products, and for conducting marketing surveys and opinion polls
- for the prevention and investigation of criminal activities (in particular, *we* employ data analyses to detect possible indications of insurance fraud).

As a rule, *we* only process that data that *we* have received directly from *you*. In certain cases *we* may also receive such data from other sources (such as if another insurer seeks recourse from *us* due to the existence of multiple insurance policies).

We also process *your* personal data in order to fulfil other statutory obligations, such as regulatory requirements, as well as data retention obligations imposed by commercial and tax law. In these cases, the legal basis of the data processing is provided by the relevant statutory regulations in conjunction with Art. 6 (1) c) GDPR.

We may also process *your* data in accordance with Art. 6 (1) d) GDPR in order to protect *your* vital interests, or if *you* have consented to the data processing, Art. 6 (1) a) GDPR.

If we wish to process *your* data for any purpose other than those specified above, we will notify *you* in advance within the framework of the statutory regulations.

2. What applies to special categories of personal data, especially health data?

There are special safeguards on the processing of special categories of personal data, of which health data is one. As a rule, processing is permitted only if *you* have consented to the processing in accordance with Art. 9 (2) a) GDPR, or if this is a case of one of the other situations defined by law, Art. 9 (2) b) – j) GDPR.

a) Processing of *your* special categories of personal data

In many cases, in order to review the benefit entitlement, we require personal data belonging to a special category (sensitive data). This includes health data, for example. If, in connection with a specific insured event, *you* provide us with such data together with a request to review and process the claim, *you* are explicitly permitting us to process *your* sensitive data necessary in order to process the insured event. We will again remind *you* specifically of this fact in the claim form.

You may withdraw *your* consent at any time, with future effect. However, we explicitly inform *you* that it may in that case no longer be possible to review *our* indemnity obligation in connection with the insured event. If the review of the claim is already concluded, there may be statutory retention obligations that mean the data cannot be erased.

We may also process *your* sensitive data if this is necessary to protect *your* vital interests, and if *you* are physically or legally incapable of giving consent, Art. 9 (2) c) GDPR. This may be the case if *you* suffer a serious accident while travelling, for example.

In the case of multiple insurance policies, if another insurer seeks recourse from us or if we seek recourse from another insurer, we may process *your* sensitive data in order to assert and defend the statutory claim for settlement, Art. 9 (2) f) GDPR.

b) Requesting health data from third parties for review of the indemnity obligation

In order to review *our* indemnity obligation, it may be necessary for us to review information about the state of *your* health, as provided by *you* for the substantiation of claims, or which is contained in the documents submitted (e.g. invoices, prescriptions, medical reports) or statements, such as from a doctor or other member of the healthcare profession.

For this purpose, we will require *your* consent, including a confidentiality waiver covering us and all agencies subject to a duty of confidentiality, and which are required to provide information for review of the indemnity obligation.

We will notify *you* in each specific case about what persons or institutions require information for what purpose. *You* may then decide in each case whether *you* consent to us collecting and using *your* health information, and whether to release the named persons or institutions and their employees from their duty of non-disclosure, and if *you* agree to the communication of *your* health data to us, or if *you* want to personally provide the necessary documentation.

III To what recipients will we communicate *your* data?

Recipients of *your* personal data may include: selected external service providers (e.g. assistance service providers, benefit processors, transport service providers, technical service providers, etc.), other insurers (e.g. in the case of multiple insurance coverage).

We also insure some of the risks that we cover with specialist insurance companies (re-insurers). To this end, it may be necessary to send *your* contract and, where relevant, *your* claims information to a re-insurer, to enable it to form its own opinion of the risk or the insured event.

If *you* join a group insurance contract as an insured person, (e.g. when acquiring a credit card), we may disclose *your* personal data to the policyholder (a bank for example), if it has a legitimate interest in knowing this information.

In addition, we may also communicate *your* personal data to other recipients, such as public authorities for the fulfilment of statutory duties of notification (e.g. finance authorities or criminal investigation agencies).

The forwarding of data is a form of data processing, and is likewise performed within the framework of the principles set out in Art. 6 (1) and Art. 9 (2) GDPR.

IV How long will we retain *your* data?

We will retain *your* data for the period during which claims may be made against *our* company (statutory limitation period of 3 to 30 years). We will also retain *your* data if we are under a legal obligation to do so, e.g. according to the provisions of the German Commercial Code, the German Fiscal Code or the German Money Laundering Act. The relevant retention periods range up to ten years.

V Where will *your* data be processed?

If we should transfer *your* data to service providers located outside of the European Economic Area (EEA), the transfer within the Allianz Group will be performed on the basis of "Binding Corporate Rules", which have been approved by the data protection authorities. These form part of the "Allianz Privacy Standard". These Corporate Rules are binding on all companies within the Allianz Group, and they ensure an appropriate level of protection for personal data. The "Allianz Privacy Standard" and the list of Allianz Group companies bound by this standard, can be viewed here: <https://www.allianz-partners.com/allianz-partners---binding-corporate-rules-.html>.

In those cases in which the "Allianz Privacy Standard" does not apply, the transfer of data to third countries will take place in accordance with Art. 44 – 50 GDPR.

VI What are *your* rights?

You have the right to be informed about all of the information retained by *us*, and to demand that incorrect data be rectified. Under certain conditions, *you* also have the right to the erasure of data, the right to object to processing, the right to the restriction of processing and the right to data portability.

Right of objection

***You* may object to the processing of *your* data for direct marketing purposes. If *we* process *your* data in order to protect legitimate interests, *you* may object to this processing for reasons pertaining to *your* particular situation.**

If *you* have any objections concerning the handling of *your* data, *you* may contact the aforementioned Data Protection Officer in this connection. *You* are also entitled to lodge an objection with a data protection supervisory authority.

INFORMATION FOR CONTRACTS IN ELECTRONIC COMMERCE

If *you* have purchased *your* insurance contract electronically (e.g. via an online portal), the following information applies:

I Can entries that have been made be changed before the insurance is concluded?

If *you* are unsure whether *you* have entered correct information everywhere, *you* can check and change *your* details at any time before concluding the insurance. *You* can also use the "Back" button to edit previous steps.

II Which technical step leads to the conclusion of the contract?

We will guide *you* step by step to the online conclusion. On the page "payment" *you* will see a summary of *your* details in the right-hand column. Please check that all data is correct. The insurance policy itself is only arranged when *you* click on the button "Pay XX,XX EUR". With this *you* conclude a binding contract with *us* and the data is transmitted to *us*.

III Will *your* contract data and the text of the contract be stored after the conclusion of the contract?

The contract data *you* entered and the text of the contract will be stored by *us*. *You* will receive the insurance certificate with the essential elements of the contract by email after the insurance has been arranged.

IV Which languages are available?

This offer is available in German.

INSURANCE INFORMATION AND CONDITIONS

WHO WE ARE

The contractually agreed insurance benefits are provided by AWP P&C S.A. in accordance with the following insurance conditions. Verbal agreements are invalid. The insurance tax is included in the insurance premiums. Fees are not charged. The insurance premiums and service descriptions documented in the insurance *policy* or in the travel / booking confirmation are decisive for the scope of insurance.

AWP P&C S.A.

Branch Office Germany

Bahnhofstraße 16

D - 85609 Aschheim (near Munich)

CEO: Jacob Fuest

Registry Court: Munich HRB 4605

USt.-IdNr.: DE 129274528

AWP P&C S.A.

Joint Stock Company under French Law

Location: Saint-Ouen (France)

Commercial Register: R.C.S. Bobigny 519 490 080

Chairman of the Board: Sirma Boshnakova

ABOUT THIS POLICY

This *policy* is *our* contract with *you*. Please read it carefully. *We* have tried to make it simple and easy to understand while also clearly describing the terms and conditions of *your* coverage. If *you* have any questions, *we* are available during our working hours listed in Coverage Summary. Just visit *us* online or give *us* a call using the contact information listed in Coverage Summary. And, if *your* travel arrangements change, please be sure to let *us* know so *we* can make any necessary updates to *your policy*.

This *policy* has been issued based on the information *you* provided at the time of purchase. *We* will provide the insurance described in this *policy* in return for payment of the premium and *your* compliance with all provisions of this *policy*. *You* will also notice that some words are italicized. These words are defined in the Definitions section. Words that are capitalized refer to the document and coverage names found in this *policy*. Headings are provided for convenience only and do not affect *your* coverage in any way.

WHAT THIS POLICY INCLUDES AND WHOM IT COVERS

This travel insurance *policy* covers only the sudden and unexpected specific situations, events, and losses included in this *policy*, and only under the conditions described. Please review this *policy* carefully.

Your policy consists of three parts:

1. Proof of insurance (e. g. insurance certificate, travel confirmation, booking confirmation)
2. Documents of the Proof of Insurance with the Data Protection Policy and the Insurance Information and Conditions
3. Insurance Product Information Document / sepa mandate / consultation protocol

NOTE:

Not every loss is covered, even if it is due to something sudden, unexpected, or out of *your* control. Only those losses meeting the conditions described in this General Provisions document may be covered. Please refer to the General Exclusions section of this document for exclusions applicable to all coverages under *your policy*.

WHAT'S INSIDE

DEFINITIONS	2
WHEN YOUR COVERAGE BEGINS AND ENDS	5
DESCRIPTION OF COVERAGES	5
A. TRAVEL CANCELLATION INSURANCE	5
B. TRAVEL INTERRUPTION INSURANCE	7
C. TRAVEL DELAY INSURANCE	9
D. BAGGAGE INSURANCE	10
E. BAGGAGE DELAY INSURANCE	11
F. TRAVEL HEALTH INSURANCE INCL. MEDICAL RETURN TRANSPORT	11
G. TRAVEL LIABILITY INSURANCE	13
H. TRAVEL ACCIDENT INSURANCE	14
I. SPORTS & ACTIVITY INSURANCE	15
J. TRAVEL ASSISTANCE	16
GENERAL EXCLUSIONS	17
CLAIMS INFORMATION	19
GENERAL PROVISIONS	20

DEFINITIONS

Throughout this *policy*, words and any form of the word appearing in italics are defined in this section.

Abroad	A <i>trip abroad</i> is a <i>trip</i> to a country where <i>you</i> do not have a permanent residence or where <i>you</i> did not stay longer than three months per year during the last three years.
Accident	An unexpected and unintended external event that causes <i>injury</i> , property damage, or both. A different definition of " <i>accident</i> " is used in the Travel Accident Insurance section. Please refer to the Travel Accident Insurance section of this document, if applicable, for details.
Accommodation	A hotel or any other kind of lodging for which <i>you</i> make a reservation or where <i>you</i> stay and incur an expense.
Adoption proceeding	A mandatory legal proceeding or other meeting required by law to be attended by <i>you</i> as a prospective adoptive parent(s) in order to legally adopt a minor child.
Baggage	Personal property <i>you</i> take with <i>you</i> or acquire on <i>your trip</i> .
Climbing sports	An activity utilizing harnesses, ropes, belays, crampons, or ice axes. It does not include supervised climbing on artificial surfaces intended for recreational climbing.
Cohabitant	A person <i>you</i> currently live with and have lived with for at least 12 consecutive months and who is at least 18 years old.
Computer System	Any computer, hardware, software, or communication system or electronic device (including but not limited to smart phone, laptop, tablet, wearable device), server, cloud, microcontroller, or similar system, including any associated input, output, data storage device, networking equipment, or backup facility.
Covered reasons	The specifically named situations or events for which <i>you</i> are covered under this <i>policy</i> .
Cyber Risk	Any loss, damage, liability, claim, cost, or expense of any nature directly or indirectly caused by, contributed to by, resulting from, or arising out of or in connection with, any one or more instances of any of the following: <ol style="list-style-type: none">1. Any unauthorized, malicious, or <i>illegal act</i>, or the threat of such act(s), involving access to, or the processing, use, or operation of, any <i>computer system</i>;2. Any error or omission involving access to, or the processing, use, or operation of any <i>computer system</i>;3. Any partial or total unavailability or failure to access, process, use, or operate any <i>computer</i>4. Any loss of use, reduction in functionality, repair, replacement, restoration or reproduction of any data, including any amount pertaining to the value of such data.
Departure date	The originally scheduled date that <i>you</i> have selected to begin travel as shown on <i>your trip</i> itinerary and in <i>your</i> proof of insurance.
Doctor	Someone who is legally authorized to practice medicine or dentistry and is licensed if required. This cannot be <i>you</i> , a <i>traveling companion</i> , <i>your family member</i> , a <i>traveling companion's family member</i> , or the sick or <i>injured person's family member</i> .
Epidemic	A contagious disease recognized or referred to as an <i>epidemic</i> by a representative of the World Health Organization (WHO) or an official government authority.

Family member	<p><i>Your:</i></p> <ol style="list-style-type: none"> Spouse (by marriage, common law, domestic partnership, or civil union) <i>Cohabitants</i> Parents and stepparents Children, stepchildren, foster children, adopted children, or children currently in the adoption Siblings Grandparents and grandchildren The following in-laws: mother, father, son, daughter, brother, sister, and grandparent Aunts, uncles, nieces, and nephews Legal guardians and wards Paid, live-in caregivers
First responder	Emergency personnel (such as a police officer, emergency medical technician, or firefighter) who are among those responsible for going immediately to the scene of an <i>accident</i> or emergency to provide aid and relief.
High-altitude activity	An activity that includes, or is intended to include, going above 4,500 meters in elevation, other than as a passenger in a commercial aircraft.
High value items	Collectibles, jewelry, watches, gems, pearls, furs, cameras (including video cameras) and related equipment, musical instruments, professional audio equipment, binoculars, telescopes, <i>sporting equipment</i> , mobile devices, smartphones, computers, radios, drones, robots, and other electronics, including parts and accessories for the aforementioned items.
Hospital	<p>An acute care facility that has a primary function of diagnosing and treating sick and <i>injured</i> people under the supervision of <i>doctors</i>. It must:</p> <ol style="list-style-type: none"> Be primarily engaged in providing inpatient diagnostic and therapeutic services, Have organized departments of medicine and major surgery and Be licensed where required.
Illegal act	An act that violates law where it is committed.
Injury	Physical bodily harm.
Local public transportation	Local, commuter, or other urban transit system carriers (such as commuter rail, city bus, subway, ferry, taxi, for-hire driver, or other such carriers) that transport <i>you</i> or a <i>traveling companion</i> less than 150 kilometers (as the crow flies).
Mechanical breakdown	A mechanical issue, which prevents the vehicle from being driven normally, including running out of fluids (except fuel).
Medical escort	A professional person contracted by <i>our</i> medical team to accompany a seriously ill or <i>injured</i> person while they are being transported. A <i>medical escort</i> is trained to provide medical care to the person being transported. This cannot be a friend, <i>traveling companion</i> , or <i>family member</i> .
Medically necessary	Treatment that is required for <i>your</i> illness, <i>injury</i> , or medical condition, consistent with <i>your</i> symptoms, and can safely be provided to <i>you</i> . Such treatment must meet the standards of good medical practice and is not for <i>your</i> or the provider's convenience.
Natural disaster	A large-scale extreme weather or geological event that damages property, disrupts transportation or utilities, or endangers people, including without limitation: earthquake, fire, flood, hurricane, avalanche, landslide, or volcanic eruption.
Pandemic	An <i>epidemic</i> that is recognized or referred to as a <i>pandemic</i> by a representative of the World Health Organization (WHO) or an official government authority.
Policy	The travel insurance coverage purchased. The <i>policy</i> includes the proof of insurance (e. g. insurance policy), the Documents of the Proof of Insurance with the Coverage Summary, the Data Protection Policy and the Insurance Information and Conditions as well as the Insurance Product Information Document.
Political risk	<p>Any kind of events, organized resistance or actions intending or implying the intention to overthrow, supplant or change the existing ruler or constitutional government, including but not limited to:</p> <ul style="list-style-type: none"> Nationalization Confiscation Expropriation (including Selective Discrimination and Forced Abandonment) Deprivation Revolution Rebellion Insurrection Civil commotion assuming to proportion of or amounting to an uprising Military and usurped power.
Primary residence	<i>Your</i> permanent, fixed home address for legal and tax purposes.
Pre-existing medical condition	<p>Pre-existing conditions are illnesses or health complaints that existed before <i>you</i> took out the insurance. <i>You</i> knew or had to expect that treatments would be necessary. Pre-existing conditions are not insured. In the Travel Cancellation and Travel Interruption Insurance, insurance coverage is only provided for unexpected serious illnesses. <i>We</i> distinguish between physical and mental illnesses:</p> <ol style="list-style-type: none"> A physical illness is unexpected if it <ul style="list-style-type: none"> * occurs for the first time after conclusion of the insurance (travel cancellation) or after commencement of the <i>trip</i> (travel interruption) or * if an existing illness has not been treated in the last six months prior to conclusion of the insurance (travel cancellation) or in the last six months prior to commencement of the <i>trip</i> (travel interruption). The illness worsens after conclusion of the insurance (travel cancellation) or after commencement of the <i>trip</i> (travel interruption). Regular examinations performed for monitoring or precautionary purposes do not constitute treatment.

2. A mental illness is unexpected if it
 - * occurs for the first time after the insurance has been taken out (travel cancellation) or after the *trip* has started (travel interruption).
 - * in the case of a chronic mental illness, we consider the episode or deterioration to be a pre-existing condition if the most recent treatment took place within three years prior to conclusion of the insurance (travel cancellation) or prior to commencement of the *trip* (travel interruption). Regular examinations performed for monitoring or precautionary purposes do not constitute treatment.
3. A mental illness is serious if inpatient treatment is required or if it is certified by a consultant psychiatrist before the *trip* is cancelled (travel cancellation) or if outpatient psychotherapy is approved by *your* health insurer.

Quarantine	Mandatory involuntary confinement by order or other official directive of a government, public or regulatory authority, or the captain of a commercial vessel on which <i>you</i> are booked to travel during <i>your trip</i> , which is intended to stop the spread of a contagious disease to which <i>you</i> or a <i>traveling companion</i> has been exposed.
Refund	Cash, credit, or a voucher for future travel that <i>you</i> are eligible to receive from a <i>travel supplier</i> , or any credit, recovery, or reimbursement <i>you</i> are eligible to receive from <i>your</i> employer, another insurance company, a credit card issuer, or any other entity.
Service dog	Any dog that is individually trained to do work or perform tasks for the benefit of an individual with a disability, including a physical, sensory, psychiatric, intellectual, or other mental disability. Examples of work or tasks include, but are not limited to guiding people who are blind, alerting people who are deaf, and pulling a wheelchair. The crime deterrent effects of an dog's presence and the provision of emotional support, well-being, comfort, or companionship are not considered work or tasks under this definition.
Severe weather	Hazardous weather conditions including but not limited to windstorms, hurricanes, tornados, fog, hailstorms, rainstorms, snow storms, or ice storms.
Sporting equipment	Equipment or goods used to participate in a sport.
Terrorist event	An act carried out by an organized terrorist group recognized by the government authority and applicable law of <i>your</i> country of residence that <i>injures</i> people or damages property to achieve a political, ethnic, or religious result. It does not include general civil protest, unrest, rioting, or acts of war.
Traffic Accident	An unexpected and unintended traffic-related event, <i>other than mechanical breakdown</i> , that causes <i>injury</i> , property damage, or both.
Travel carrier	A company licensed to commercially transport passengers between cities for a fee by land, air, or water. It does not include: <ol style="list-style-type: none"> 1. Rental vehicle companies 2. Private or non-commercial transportation carriers 3. Chartered transportation, except for group transportation chartered by <i>your</i> tour operator 4. <i>Local public transportation</i>
Travel supplier	A travel agent, tour operator, airline, cruise line, hotel, railway company, or other travel service provider.
Traveling companion	A person or <i>service dog</i> traveling with <i>you</i> or traveling to accompany <i>you</i> on <i>your trip</i> . A group or tour leader is not considered a <i>traveling companion</i> unless <i>you</i> are sharing the same room with the group or tour leader. School teachers leading group class <i>trips</i> are not considered group or tour leaders.
Trip	<i>Your</i> travel to, within, and/or from a location away from <i>your primary residence</i> . It cannot include travel with the intent to receive health care or medical treatment of any kind, or moving, or commuting to and from work, and it cannot last longer than 56 days.
Uninhabitable	A <i>natural disaster</i> , fire, flood, burglary, storm, explosion, or vandalism has caused enough damage (including extended loss of power, gas, or water) to make a reasonable person find their home or destination inaccessible or unfit for use.
We, Us, or Our	AWP P&C S.A., Branch Office Germany.
You or Your	All persons listed as insureds in the insurance <i>policy</i> or the proof of insurance.

WHEN YOUR COVERAGE BEGINS AND ENDS

You are only eligible for coverage if we accept your request for insurance. Your policy's coverage effective date and coverage end date are indicated in your proof of insurance. The policy is effective at 00:00 on the day after we receive the order and you pay the full premium. The order must be received and the full premium must be paid on or before the departure date.

Coverage is only provided for losses that occur while your policy is in effect.

Except for one-way and same-day return trips, the departure date and return date that you provided at time of purchase are counted as two separate days of travel when we calculate the duration of your trip.

Your policy ends on the coverage end date listed in your proof of insurance. However, there are situations where your policy may end on a different date. If your policy was purchased with a one-way booking, your coverage end date will be the scheduled return date for your trip, as shown on your travel documents (not exceeding 56 days from the departure date shown on your travel documents). Additionally, your policy will end on the earliest of:

1. when you cancel your trip; or
2. when you cancel your policy, if your policy has Travel Cancellation coverage and the policy coverage period is longer than one month; or
3. when you end your trip (if you end your trip early); or
4. when you arrive at a medical facility for further care (if you end your trip due to a medical reason); or
5. At 23:59 on the 56th day of the trip

However, if your return travel is delayed due to a covered reason, we will extend your coverage period until the earlier of when you are able to return to your point of origin or primary residence, or until you arrive at a medical facility for further care following a medical repatriation or trip interruption.

Please note that this policy applies for a specific trip and cannot be renewed.

DESCRIPTION OF COVERAGES

In this section, we will describe the many different types of insurance coverages, which are included in your policy. We explain each type of coverage and the specific conditions that must be met for the coverage to apply. **Please refer to the General Exclusions section of this document for exclusions applicable to all coverages under your policy and to the General Provisions section, where you can read about your duties (obligations), among other things.**

A. TRAVEL CANCELLATION INSURANCE

If your trip is canceled or rescheduled for a covered reason listed below, we will reimburse you for your non-refundable trip payments, deposits, cancellation fees, and change fees costs to rebook your transportation (less available refunds), up to the maximum benefit for Travel Cancellation coverage listed in your Coverage Summary. Please note that this coverage only applies before you have left for your trip.

Also, if you pre-booked shared accommodations and your traveling companion cancels their trip due to one or more of the covered reasons listed below, we will reimburse any additional accommodation fees you are required to pay.

IMPORTANT (obligation): You must notify all of your travel suppliers within 48 hours of discovering that you will need to cancel your trip (this includes being advised to cancel your trip by a doctor) in order to keep the cancellation costs as low as possible. This also applies to illnesses or injuries that should have healed by the time of travel, given the usual course of healing. If you notify any travel suppliers later than that and get a smaller refund as a result, we will not cover the difference. If a serious illness, injury, or medical condition prevents you from being able to notify your travel suppliers within that 48-hour period, you must notify them as soon as you are able.

If you contact our medical service (cancellation advice) immediately when the insured event occurs, they will advise you. If they recommend that you wait and see and you follow this advice, there is no breach of obligation.

The consequences of a breach of obligation can be found in the General Provisions section.

Covered reasons:

1. You or a traveling companion becomes ill or injured, or develops a medical condition disabling enough to make you cancel your trip (including being diagnosed with an epidemic or pandemic disease such as COVID-19).

The following condition applies:

- a. A doctor advises you or a traveling companion to cancel your trip before you cancel it.

2. A family member who is not traveling with you becomes ill or injured, or develops a medical condition (including being diagnosed with an epidemic or pandemic disease such as COVID-19).

The following condition applies:

- a. The illness, injury, or medical condition must be considered life threatening by a doctor, or require hospitalization.

3. You, a traveling companion, family member, or your service dog dies on or after your policy's Coverage Effective Date and before your trip.

4. *You or a traveling companion is quarantined before your trip* due to having been exposed to:
 - a. A contagious disease other than an *epidemic* or *pandemic* or
 - b. An *epidemic* or *pandemic* (such as COVID-19), but only when the following conditions are met:
 - i. The *quarantine* is specific to *you* or a *traveling companion*, meaning that *you* or a *traveling companion* must be specifically and individually designated by name in an order or directive to be placed in *quarantine* due to an *epidemic* or *pandemic*.
 - ii. The *quarantine* does not apply generally or broadly (a) to some segment or all of a population, geographical area, building, or vessel, or (b) based on to, from, or through where the person is traveling. This condition (ii) applies even if the *quarantine* order or directive specifically designates *you* or a *traveling companion* by name to be *quarantined*.

5. *You or a traveling companion is in a traffic accident on the departure date.*

One of the following conditions must apply:

- a. *You or a traveling companion need medical attention.*
- b. *Your or a traveling companion's vehicle needs to be repaired because it is not safe to operate.*

6. *You are legally required to attend a legal proceeding during your trip.*

The following condition applies:

- a. The attendance is not in the course of *your* occupation (for example, if *you* are attending in *your* capacity as an attorney, court clerk, expert witness, law enforcement officer, or other such occupation, this would not be covered).

7. *Your primary residence becomes uninhabitable.*

8. *Your travel carrier cannot get you to your original itinerary's destination for at least 24 consecutive hours from the originally scheduled arrival time due to one of the following reasons:*

- A. A *natural disaster*
- B. *Severe weather*
- C. *Strike, unless threatened or announced prior to the purchase of your policy*
- D. *Government-mandated shutdown of airline or train operations. This does not include travel alerts / bulletins or prohibitions by any government or public authority.*

However, if *you* can get to *your* original destination another way, *we* will reimburse *you* for the following, up to *your policy's* Travel Cancellation Insurance maximum benefit:

- i. The necessary cost of the alternative transportation, less available *refunds* and
- ii. The cost of any lost pre-booked *accommodations* caused by *your* delayed arrival, less available *refunds*

The following conditions apply:

- a. Alternate transportation arrangements must be in a similar or lower class of service as *you* were originally booked with *your travel carrier*.
- b. Coverage for a strike does not apply when the striking workers are employed by the *travel carrier*, or an affiliate of the *travel carrier*, from which *you* purchased *your policy*.

9. *You or a traveling companion is terminated or laid off by a current employer after your policy's purchase date.*

The following conditions apply:

- a. The termination or layoff is not *your* or *your traveling companion's* fault.
- b. The employment must have been permanent (not temporary or contract).
- c. The employment must have been for at least 12 continuous months.

10. *You or a traveling companion secures permanent, paid employment subject to social security contributions, after your policy's purchase date, that requires presence at work during the originally scheduled trip dates.*

11. *Your or a traveling companion's primary residence is permanently relocated by at least 150 kilometers due to a transfer by your or a traveling companion's current employer. This coverage includes relocation due to transfer by your spouse's current employer.*

12. *You or a travelling companion serving as a first responder is called in for duty due to an accident or emergency (including a natural disaster) to provide aid or relief during the originally scheduled trip dates.*

13. *You or a traveling companion receive a legal notice to attend an adoption proceeding during your trip.*

14. *You, a traveling companion, or a family member serving in the armed forces is reassigned or has personal leave status changed, except because of war or disciplinary action.*

15. *You or a traveling companion is medically unable to receive an immunization required for entry into a destination.*

16. *Your or travel companion's travel documents required for the trip are stolen.*

The following condition applies:

- a. *You must provide evidence of your efforts to obtain replacement documents that would allow you to keep the originally scheduled trip dates.*

17. *You or a traveling companion* is refused a tourist visa by the authorities of the destination or transit country.
18. *You* find out *you* are pregnant after purchasing this *policy*.
19. *You* need to attend the birth of a *family member's* child.
20. *Your* destination becomes *uninhabitable*.
21. Family outside *your* country of residence cannot accommodate *you* during your *trip*, as planned, because someone in their household has died, become seriously ill or *injured*, or developed a serious medical condition.
22. Government authorities order a mandatory evacuation at *your* destination that is in effect within 24 hours prior to *your departure date*.

The following condition applies:

- a. *Your policy* was purchased prior to public knowledge of the event leading to the mandatory evacuation.

23. *You or a traveling companion* legally separates or divorces on or after *your policy's* Coverage Effective Date but before *your* scheduled *departure date*.

The following condition applies:

- a. *Your policy* was purchased within 14 days of the *trip* purchase date.

24. *You or a traveling companion's* vehicle experiences a *mechanical breakdown* on the way to the departure point of *your trip*.
25. *You or a traveling companion's* primary vehicle intended for transporting *you* or the *travelling companion* to the point of *your trip's* departure or intended to be the primary mode of transportation during *your trip* is stolen.
26. *You* fail the final exam or *you* fail to advance to the next grade level at an accredited educational establishment, where *you* are a student.
27. *Your* tour operator or commercial event organizer cancels *your* multi-day tour or multi-day event that is the main purpose of *your trip* and was purchased prior to *your departure date* due to:
 - a. *A natural disaster*
 - b. *Severe weather*

NOTE: *We* will not reimburse *you* for the cost of the cancelled multi-day tour or multi-day event. *We* will reimburse *you* for the pre-booked, non-refundable cost of *accommodations* for and transportation to and from the cancelled multi-day tour or multi-day event.

28. A *terrorist event* happens *within 30 days of your departure date* within 100 kilometers of any city *you* are traveling to during *your trip*, as indicated on *your* original itinerary.

The following condition applies:

- a. A *terrorist event* must not have occurred within 40 kilometers of that city any time in the 30 days prior to *your policy's* Coverage Effective Date.

29. *You or a traveling companion* become ill or *injured*, or develop a medical condition (including being diagnosed with an *epidemic* or *pandemic* disease such as COVID-19) disabling enough to prevent *you* or the *traveling companion* from participating in the activity that is the main purpose of *your trip*.

The following condition applies:

- a. A *doctor* advises *you* not to participate in the activity before *your departure date*. If that isn't possible, a *doctor* must either examine or consult with *you* within 48 hours of the activity, or as soon as reasonably possible, to confirm the decision not to attend.

B. TRAVEL INTERRUPTION INSURANCE

If *you* have to interrupt *your trip* or end it early due to one or more of the *covered reasons* listed below, *we* will reimburse *you*, less available *refunds*, up to the maximum benefit for Travel Interruption Insurance listed in *your* Coverage Summary, for:

- i. The prorated portion of *your* unused non-refundable *trip* payments and deposits.
- ii. Additional *accommodation* fees *you* are required to pay, if *you* pre-booked for shared *accommodations* and *your traveling companion* has to interrupt their *trip*.
- iii. Necessary transportation expenses *you* incur to continue *your trip* or return to your *primary residence*.
 - *We* will reimburse *you* either for the new return *travel carrier* ticket to *your primary residence* or for the non-refundable portion of *your* original return ticket, but not both.
- iv. Additional *accommodation* and transportation expenses if the interruption causes *you* to stay at *your* destination (or the location of the interruption) longer than originally planned. **There is a per person maximum of 100 € per day for up to 10 days.**

IMPORTANT (obligation): *You* must notify all of *your travel suppliers* within 48 hours of discovering that *you* will need to interrupt *your trip* (this includes being advised to interrupt *your trip* by a *doctor*). If *you* notify any *travel suppliers* later than that and get a smaller *refund* as a result, *we* will not cover the difference. If a serious illness, *injury*, or medical condition prevents *you* from being able to notify *your travel suppliers* within that 48-hour period, *you* must notify them as soon as *you* are able.

The consequences of a breach of obligation can be found in the General Provisions section.

Covered reasons:

1. *You* or a *traveling companion* becomes ill or *injured*, or develops a medical condition disabling enough to make *you* interrupt *your trip* (including being diagnosed with an *epidemic* or *pandemic* disease such as COVID-19).

The following conditions apply:

- a. A *doctor* must either examine or consult with *you* or the *traveling companion* before *you* make a decision to interrupt the *trip*.
- b. *You* must not have travelled against *your* home country's government advice or against local authority advice at *your trip* destination.

2. A *family member* who is not traveling with *you* becomes ill or *injured*, or develops a medical condition (including being diagnosed with an *epidemic* or *pandemic* disease such as COVID-19).

The following condition applies:

- a. The illness, *injury*, or medical condition must be considered life threatening by a *doctor* or require hospitalization.

3. *You*, a *traveling companion*, *family member*, or *your service dog* dies during *your trip*.

4. *You* or a *traveling companion* is *quarantined* during *your trip* due to having been exposed to:

- a. A contagious disease other than an *epidemic* or *pandemic* or
- b. An *epidemic* or *pandemic* (such as COVID-19), but only when the following conditions are met:
 - i. The *quarantine* is specific to *you* or a *traveling companion*, meaning that *you* or a *traveling companion* must be specifically and individually designated by name in an order or directive to be placed in *quarantine* due to an *epidemic* or *pandemic*.
 - ii. The *quarantine* does not apply generally or broadly (a) to some segment or all of a population, geographical area, building, or vessel, or (b) based on to, from, or through where the person is traveling. This condition (ii) applies even if the quarantine order or directive specifically designates *you* or a *traveling companion* by name to be *quarantined*.

5. *You* or a *traveling companion* is in a *traffic accident*.

One of the following conditions must apply:

- a. *You* or a *traveling companion* needs medical attention or
- b. The vehicle needs to be repaired because it is not safe to operate

6. *You* are legally required to attend a legal proceeding during *your trip*.

The following condition applies:

- a. The attendance is not in the course of *your* occupation (for example, if *you* are attending in *your* capacity as an attorney, court clerk, expert witness, law enforcement officer or other such occupation, this would not be covered).

7. *Your primary residence* becomes *uninhabitable*.

8. *Your travel carrier* cannot get *you* to *your* original itinerary's destination for at least 24 consecutive hours from the originally scheduled arrival time due to one of the following reasons:

- A. A *natural disaster*
- B. *Severe weather*
- C. Strike, unless threatened or announced prior to the purchase of *your policy*
- D. Government-mandated shutdown of airline or train operations. This does not include travel alerts/bulletins or prohibitions by any government or public authority.

However, if *you* can get to *your* original destination another way, *we* will reimburse *you* for the following, up to *your policy's* maximum Travel Interruption Insurance maximum benefit:

- i. The necessary cost of alternate transportation, less available *refunds* and
- ii. The cost of any lost pre-booked *accommodations* caused by *your* delayed arrival, less available *refunds*.

The following conditions apply:

- a. Alternate transportation arrangements must be in a similar or lower class of service as *you* were originally booked with *your travel carrier*.
- b. Coverage for a strike does not apply when the striking workers are employed by the *travel carrier*, or an affiliate of the *travel carrier*, from which *you* purchased *your policy*.

9. *You* or a *traveling companion* serving as a *first responder* is called in for duty due to an *accident* or emergency (including a *natural disaster*) to provide aid or relief during the originally scheduled *trip* dates.

10. *You* or a *traveling companion* is a traveler on a hijacked aircraft, train, vehicle, or vessel.

11. *You*, a *traveling companion*, or a *family member* serving in the armed forces is reassigned or has personal leave status changed, except because of war or disciplinary action.

12. You miss at least 50 % of the length of *your trip* due to one of the following:
 - A. A *travel carrier* delay (this does not include a travel carrier's cancellation prior to your *departure date*)
 - B. A strike, unless threatened or announced prior to the purchase of *your policy*
 - C. A *natural disaster*
 - D. Roads are closed or impassable due to *severe weather*
 - E. Lost or stolen travel documents that are required and cannot be replaced in time for continuation of *your trip*
 - i. You must provide evidence of *your* efforts to obtain replacement documents.
 - F. Civil disorder.
13. A *travel carrier* denies you or a *traveling companion* boarding based on a suspicion that you or a *traveling companion* has a contagious medical condition (including an *epidemic* or *pandemic* disease such as COVID-19). This does not include *your* refusal or failure to comply with rules or requirements to travel or of entry to your destination.
14. You need to attend the birth of a *family member's* child.
15. Your destination becomes *uninhabitable*.
16. Family outside *your* country of residence cannot accommodate you during *your trip*, as planned, because someone in their household has died, become seriously ill or *injured*, or developed a serious medical condition.
17. Government authorities order a mandatory evacuation at *your* destination while you are on *your trip*.
The following condition applies:
 - a. *Your policy* was purchased prior to public knowledge of the event leading to the mandatory evacuation.
18. You or a *traveling companion's* vehicle experiences a *mechanical breakdown* during *your trip*, which results in the vehicle being unable to be driven safely.
19. You or a *traveling companion's* vehicle, which serves as a primary mode of transportation during *your trip*, is stolen.
20. A *terrorist event* happens within 100 kilometers of any city you are traveling to during *your trip*, as indicated on your original itinerary from your *travel supplier*.
The following condition applies:
 - a. A *terrorist event* must not have occurred within 40 kilometers of that city any time in the 30 days prior to *your policy's* Coverage Effective Date.

C. TRAVEL DELAY INSURANCE

If *your* or a *traveling companion's* trip is delayed for one of the *covered reasons* listed below, we will reimburse you for the following expenses, less available *refunds*, up to the maximum benefit shown in your Coverage Summary for travel delay:

- i. Your lost pre-booked *trip* expenses and additional expenses you incur while and where you are delayed for meals, *accommodation*, communication, and local transportation, subject to a daily (24 hours) limit listed in your Coverage Summary:
 - If you provide receipts, the With Receipts Daily Limit applies.
 - If you do not provide receipts, the No Receipts Daily Limit applies.
- ii. If the delay causes you to miss the departure of your cruise or tour, necessary transportation expenses to either help you rejoin your cruise / tour or reach your destination.
- iii. If the delay causes you to miss the departure of your flight or train due to a *local public transportation* delay on your way to the departure airport or train station, necessary transportation expenses to either help you reach your destination or return home.

NOTE: We will not reimburse you for any expenses that are your travel carrier's or travel supplier's responsibility.

The delay must be for at least the Minimum Required Delay listed in your Coverage Summary and due to one of the following *covered reasons*:

1. A *travel carrier* delay
2. A strike, unless threatened or announced prior to the purchase of *your policy*
3. *Quarantine* during *your trip* due to having been exposed to:
 - a. A contagious disease other than an *epidemic* or *pandemic*
 - b. An *epidemic* or *pandemic* (such as COVID-19), but only when the following conditions are met:
 - i. The *quarantine* is specific to you or a *traveling companion*, meaning that you or a *traveling companion* must be specifically and individually designated by name in an order or directive to be placed in *quarantine* due to an *epidemic* or *pandemic*.
 - ii. The *quarantine* does not apply generally or broadly (a) to some segment or all of a population, geographical area, building, or vessel, or (b) based on to, from, or through where the person is traveling. This condition (ii) applies even if the quarantine order or directive specifically designates you or a *traveling companion* by name to be *quarantined*.

4. A natural disaster
5. Lost or stolen travel documents
6. Hijacking, unless it is a *terrorist event*
7. Civil disorder, unless it rises to the level of *political risk*
8. A *traffic accident*
9. A *travel carrier* denies *you* or a *traveling companion* boarding based on a suspicion that *you* or a *traveling companion* has a contagious medical condition (including an *epidemic* or *pandemic* disease such as COVID-19). This does not include *your* refusal or failure to comply with rules or requirements to travel or of entry to *your* destination.

D. BAGGAGE INSURANCE

If *your baggage* is lost, damaged, or stolen while *you* are on *your trip*, we will pay *you*, less available *refunds*, the lowest of the following, up to the maximum benefit listed for *baggage* loss in *your* Coverage Summary:

- i. Cost to repair the damaged *baggage* or
- ii. Cost to replace the lost, damaged, or stolen *baggage* at the current market price for the same or similar item, reduced by 20 % for each full year of use since the original purchase date, up to the maximum of 70 % reduction.

If the sum insured is lower than the current value (under-insurance) when the insured event occurs, we will not reduce the indemnity (under-insurance waiver).

The following conditions (obligations) apply:

- a. *You* have taken necessary steps to keep *your baggage* safe and intact and to recover it.
- b. *You* have filed and retained a copy of a report giving a description of the property and its value with the appropriate local authorities, *travel carrier*, hotel, or tour operator within 24 hours of discovery of the loss.
- c. *You* must file and retain a copy of a police report in case of theft of *high-value items*.
- d. *You* must provide original receipts or another proof of purchase for the lost, damaged, or stolen items. **For items without an original receipt or a proof of purchase, we will cover up to 50% of the cost to replace the lost, damaged, or stolen item with the same or similar item.**
- e. *You* must report theft or loss of a cellular device to *your* network provider and request to block the device.

The consequences of a breach of obligation can be found in the General Provisions section.

The following items are not covered:

1. Animals, including remains of animals
2. Cars, motorcycles, motors, aircraft, watercraft, and other vehicles and related accessories and equipment
3. Hearing aids, prescription eyewear, and contact lenses
4. Artificial teeth, prosthetics, and orthopedic devices
5. Wheelchairs and other mobility devices
6. Consumables, medicines, medical equipment / supplies, and perishables
7. Tickets, passports, deeds, blueprints, stamps, and other documents
8. Money, currency, credit cards, notes or evidences of debt, negotiable instruments, travel cheques, securities, bullion, and keys
9. Rugs and carpets
10. Antiques and art objects
11. Fragile and brittle items
12. Firearms and other weapons, including ammunition
13. Intangible property, including software and electronic data
14. Property for business or trade
15. Property *you* do not own
16. *High value items* stolen from a car, locked or unlocked
17. *Baggage* while it is:
 - a. Shipped, unless with *your travel carrier*
 - b. In or on a car trailer
 - c. Unattended in an unlocked motor vehicle
 - d. Unattended in a locked motor vehicle, unless *baggage* cannot be seen from the outside
18. *Baggage* that is misplaced, forgotten, or lost while in *your* possession

E. BAGGAGE DELAY INSURANCE

If *your baggage* is delayed by a *travel supplier* during *your trip*, we will reimburse *you* for expenses *you* incur for the essential items *you* need and substantiated with receipts until *your baggage* arrives, up to the maximum benefit shown in *your* Coverage Summary for baggage delay.

The following conditions apply:

- a. *Your baggage* must be delayed for at least the Minimum Required Delay listed under baggage delay in *your* Coverage Summary.
- b. If *you* do not provide receipts, the maximum amount payable is the No Receipts Limit listed in *your* Coverage Summary. Only available for *your* outbound travel (not *your* return travel).

F. TRAVEL HEALTH INSURANCE INCL. MEDICAL RETURN TRANSPORT

If *you* receive emergency medical or dental care while *you* are on *your trip abroad* for one of the following *covered reasons*, we will reimburse the *reasonable and customary costs* of that care for which *you* are responsible, up to the maximum benefit listed for the Travel Health Insurance in *your* Coverage Summary:

1. While on *your trip abroad*, *you* have a sudden, unexpected illness, *injury*, or medical condition (including being diagnosed with an *epidemic or pandemic* disease such as COVID-19).
2. While on *your trip abroad*, *you* have a dental *injury* or infection, a lost filling, or a broken tooth that requires treatment.

If *you* need to be admitted to a *hospital* as an inpatient, we may be able to guarantee or advance payments, where accepted, up to the limit of *your* Travel Health Insurance.

Your children prematurely born before the end of the 36th week of pregnancy during *your trip abroad* are eligible for full coverage under the Travel Health Insurance.

IMPORTANT: If *you* are insured by a statutory health insurance (SHI), *you* may have claims against them under certain circumstances if *your* medically necessary treatment takes place *abroad*. Whether *you* have a claim or not depends, in particular, on whether *you* are travelling to an EU country, to a country with a relevant social security agreement, or to a country without such an agreement. Our obligation to pay benefits under this insurance contract exists alongside that of *your* SHI. If *you* claim with *us* first, we will provide the full benefit. We may claim compensation from *your* SHI, provided that this does not result in any disadvantage for *you*.

The following conditions and exclusions apply:

- a. The care must be *medically necessary* to treat an emergency condition, and such care must be provided by a *doctor*, dentist, *hospital*, or other provider authorized to practice medicine or dentistry.
- b. This coverage will not pay for any care provided after *your* coverage ends.
- c. This coverage will not pay for any care for any illness, *injury*, or medical condition that did not originate during *your trip abroad*.
- d. This coverage will not pay for non-emergency care or services in general and the following care and services in particular:
 1. Elective cosmetic surgery or care
 2. Annual or routine exams
 3. Long-term care
 4. Allergy treatments (unless life threatening or in case of very severe allergy symptoms)
 5. Exams or care related to or loss of / damage to hearing aids, dentures, eyeglasses, and contact lenses
 6. Physical therapy, rehabilitation, or palliative care (except as necessary to stabilize *you*)
 7. Experimental treatment
 8. Any other non-emergency medical or dental care
- e. *You* must not have travelled against the orders or advice of any government or other public authority at any location to, from, or through which *you* are traveling on *your trip*.

MEDICAL RETURN TRANSPORT

IMPORTANT:

- If *your* emergency is immediate and life threatening, seek local emergency care at once.
- We are not, and shall not be deemed to be, a provider of medical or emergency services.
- We act in compliance with all national and international laws and regulation, and *our* services are subject to approvals by appropriate local authorities and active travel & regulatory restrictions.

Emergency Evacuation (Transporting *you* to the nearest appropriate medical facility)

If *you* become seriously ill or *injured* or develop a medical condition (including being diagnosed with an *epidemic or pandemic* disease such as COVID-19) while on *your trip*, we will pay for local emergency transportation from the location of the initial incident to a local *doctor* or local medical facility. If we determine that the local medical facilities are unable to provide appropriate medical treatment:

1. *Our* medical team will consult with the local *doctor* to obtain information necessary to make appropriate decisions regarding *your* overall medical condition.
2. We will identify the closest appropriate available *hospital* or other appropriate available facility, make arrangements to transport *you* there, and pay for that transport.
3. We will arrange and pay for a *medical escort* if we determine one is necessary.

The following conditions apply to items 1., 2. and 3. above:

- a. *You* or someone on *your* behalf must contact *us*, and *we* must make all transportation arrangements in advance. If *we* did not authorize and arrange the transportation, *we* will only pay up to what *we* would have paid if *we* had made the arrangements. *We* will not assume any responsibility for any transportation arrangements that *we* did not authorize or arrange.
This is an obligation. The consequences of a breach of obligation can be found in the General Provisions section.
- b. All decisions about *your* evacuation must be made by medical professionals licensed in the countries where they practice.
- c. *You* must comply with the decisions made by *our* assistance and medical teams. **This is an obligation. The consequences of a breach of obligation can be found in the General Provisions section.**
- d. One or more emergency transportation providers must be willing and able to transport *you* from *your* current location to the identified *hospital* or facility.
- e. **You must not have traveled against the orders or advice of any government or other public authority at any location to, from, or through which *you* are traveling on *your* trip.**

Medical Repatriation (Getting *you* home after *you* receive care)

If *you* become seriously ill or *injured* or develop a medical condition (including being diagnosed with an *epidemic* or *pandemic* disease such as COVID-19) while on *your* trip and *our* medical team confirms with the treating *doctor* that *you* are medically stable enough for a return transport and that repatriation is medically advisable and justifiable, we will:

1. Arrange and pay for *you* to be transported via a commercial transportation carrier in the same class of service that *you* originally booked, unless otherwise *medically necessary* for the return leg of *your* trip, less available *refunds* for unused tickets. The transportation will be to one of the following:
 - a. *Your primary residence*
 - b. A location of *your* choice in *your* country of residence
 - c. A medical facility near *your primary residence* or in a location of *your* choice in *your* country of residence. In either case, the medical facility must be willing and able to accept *you* as a patient and must be approved by *our* medical team as medically appropriate for *your* continued care.
2. Arrange and pay for a *medical escort* if *our* medical team determines that one is necessary.

The following conditions apply:

- a. *Special accommodations* must be *medically necessary* for *your* transportation (for example, if more than one seat is *medically necessary* for *you* to travel).
- b. *You* or someone on *your* behalf must contact *us*, and *we* must make all transportation arrangements in advance. If *we* did not authorize and arrange the transportation, *we* will only pay up to what *we* would have paid if *we* had made the arrangements. *We* will not assume any responsibility for any transportation arrangements that *we* did not authorize or arrange. **This is an obligation. The consequences of a breach of obligation can be found in the General Provisions section.**
- c. All decisions about *your* repatriation must be made by medical professionals licensed in the countries where they practice.
- d. *You* must comply with the decisions made by *our* assistance and medical teams. **This is an obligation. The consequences of a breach of obligation can be found in the General Provisions section.**
- e. One or more emergency transportation providers must be willing and able to transport *you* from *your* current location to *your* chosen destination.
- f. *You* must not have traveled against the orders or advice of any government or other public authority at any location to, from, or through which *you* are traveling on *your* trip.

Transport to Bedside (Bringing a friend or *family member* to *you*)

If *you* are told by the treating *doctor* that *you* will be hospitalized for more than five days or that *your* condition is life-threatening during *your* trip, *we* will arrange and pay for round-trip transportation in economy class on a *travel carrier* for one friend or *family member* to stay with *you*.

The following condition applies:

- a. *You* or someone on *your* behalf must contact *us*, and *we* must make all transportation arrangements in advance. If *we* did not authorize and arrange the transportation, *we* will only pay up to what *we* would have paid if *we* had made the arrangements. *We* will not assume any responsibility for any transportation arrangements that *we* did not authorize or arrange.
This is an obligation. The consequences of a breach of obligation can be found in the General Provisions section.

Return of Dependents (Getting minors and dependents home)

If *you* die or are told by the treating *doctor* *you* will be hospitalized for more than 24 hours during *your* trip, *we* will arrange and pay to transport *your traveling companions* who are under the age of 18, or dependents requiring *your* full-time supervision and care to one of the following:

1. *Your primary residence* or
2. A location of *your* choice in *your* country of residence.

We will arrange and pay for an adult *family member* to accompany *your traveling companions* who are under the age of 18 or dependents requiring *your* full-time supervision and care, if *we* determine that it is necessary.

Transportation will be on a *travel carrier* in the same class of service that was originally booked. Available *refunds* for unused tickets will be deducted from the total amount payable.

The following conditions apply:

- a. This benefit is only available while *you* are hospitalized, or if *you* die, and if *you* do not have an adult *family member* traveling with *you* that is capable of caring for the *traveling companions* under the age of 18 or dependents.
 - b. *You* or someone on *your* behalf must contact *us*, and *we* must make all transportation arrangements in advance. If *we* did not authorize and arrange the transportation, *we* will only pay up to what *we* would have paid if *we* had made the arrangements. *We* will not assume any responsibility for any transportation arrangements that *we* did not authorize or arrange.
- This is an obligation. The consequences of a breach of obligation can be found in the General Provisions section.**

Repatriation of Remains (Getting *your* remains home)

We will arrange and pay for the reasonable and necessary services and supplies to transport *your* remains to one of the following:

1. A funeral home near *your primary residence* or
2. A funeral home located in *your* country of residence.

The following conditions apply:

- a. Someone on *your* behalf must contact *us*, and *we* must make all transportation arrangements in advance. If *we* did not authorize and arrange the transportation, *we* will only pay up to what *we* would have paid if *we* had made the arrangements. *We* will not assume any responsibility for any transportation arrangements that *we* did not authorize or arrange.
- This is an obligation. The consequences of a breach of obligation can be found in the General Provisions section.**
- b. The death must occur while on *your trip*.

If a *family member* decides to make funeral, burial, or cremation arrangements for *you* at the location of *your* death, *we* will reimburse the necessary expenses up to the amount it would have cost *us* to transport *your* remains to a funeral home near *your primary residence*.

Search, Rescue and Recovery

If *you* are reported missing and need to be searched for during *your trip*, because it is feared that something has happened to *you*, or if *you* need to be rescued or recovered from a physical emergency, the following applies: *We* will pay the cost of search, rescue, and recovery activities by a professional rescue team, up to the maximum benefit listed for search, rescue and recovery coverage in *your* Coverage Summary.

G. TRAVEL LIABILITY INSURANCE

We provide insurance cover for liability risks in everyday life up to the maximum insurance benefit specified for this purpose in *your* Coverage Summary. The insurance covers *you* if a third party makes a claim against *you* for damages due to a damaging event on the basis of statutory liability provisions under private law.

The following conditions apply:

- a. The loss event must have occurred during the *trip*.
- b. The loss event has caused, or is alleged to have caused, personal *injury* or property damage that has directly caused damage to a third party.

How do *we* protect *you* against liability claims? To what extent will *we* indemnify *you*?

- i. *We* will verify liability, defend against unjustified claims and indemnify *you* against justified claims. A claim is considered justified if:
 - a. *we* acknowledge the obligation to indemnify.
 - b. *we* approve *your* acknowledgement of the claim.
 - c. *we* agree or approve a settlement.
 - d. a judicial ruling has been issued.If *you* issue an acknowledgement or agree a settlement without our approval, *we* will only be bound by this if the claim would have stood regardless of the acknowledgement or settlement.
- ii. *We* will make all declarations *we* deem appropriate to settle or defend the claim on *your* behalf. *We* are authorized to do so.
- iii. If the injured party or his or her legal successor asserts a liability claim in court, *we* will conduct the legal action at *our* own expense on *your* behalf.

The following are not covered:

1. **liability claims that exceed the scope of *your* statutory liability as a result of contractual or other commitments**
2. **liability claims which *you* or *your* travel companion and / or accompanying *family members* claim among themselves**
3. **liability claims by the policyholder against the insured person**
4. **liability claims due to the transmission of an illness by *you***
5. **liability claims due to loss and damage arising from professional activities**
6. **liability claims for salary, pension, wage or other defined sources of income, subsistence, medical treatment in case of incapacity and welfare claims**
7. **liability claims for performance of contracts, supplementary performance, arising from self-help, rescission, price reduction, or for compensation for loss or damages instead of benefits, for replacement of pecuniary loss on account of a delay in benefit or on account of other compensation payments occurring in lieu of performance. This is also applicable in the case of statutory claims.**
8. **liability claims from hunting activities**
9. **liability claims for loss or damage resulting from participating in horse racing, cycle races or racing with motorised vehicles, boxing matches or wrestling bouts and preparations for such events**

10. liability claims for loss of or damage to articles belonging to third parties, which *you* have (a) hired or borrowed (b) acquired as a result of unlawful action or (c) which *you* took into *your* care
Exception: cover is provided for damage to rooms within buildings, particularly to rented holiday apartments and hotel rooms or to the *accommodation*. Furniture and fittings are not insured.
If *you* are staying with host parents, insurance cover is also provided for liability claims based on damage to movable items of the host parents up to a maximum of € 10,000.00 per insured person and insured event. Claims for wear and tear or excessive strain or use are not insured.
11. liability claims against *you* as the owner, possessor, keeper or driver of a motor vehicle, aircraft or motor-driven watercraft; any damage caused by the use of such a vehicle this is not insured
12. liability claims against *you* as the owner and keeper of animals
13. liability claims that are directly connected to the wilful commission of a criminal offence

Important: What are *your* obligations in the event of a claim (special obligations)?

- a. Within one week, *you* must notify *us*: of the insured event and when a claim for damages is raised against *you*.
- b. *You* must notify *us* immediately of the initiation of preliminary proceedings or the issuance of a penalty order or a default summons. This also applies if *we* are already aware of the insured event.
- c. *You* must notify *us* without delay if a claim has been asserted against *you* involving judicial or state assistance.
- d. *You* are obliged to follow *our* instructions and, in particular, to acknowledge or satisfy a liability claim or agree to a settlement if *we* request that *you* do so.
- e. If the liability claim results in a legal action, *you* must entrust *us* with conducting the proceedings, grant power-of-attorney to the legal counsel appointed or designated by *us*, and provide the legal counsel or *us* with all requested information.
- f. *You* shall raise objections within the relevant time limit or seek the necessary legal remedies against orders for payment of damages issued by the courts or by the state. *You* shall do so without awaiting any instructions in this regard from *us*.
- g. If *you* acquire the right to demand the cancellation or reduction of a payable annuity as a consequence of altered circumstances, the following applies: *you* are obliged to inform *us* immediately upon becoming aware of such circumstances and allow *us* to exercise this right on *your* behalf.

The consequences of a breach of obligation can be found in the General Provisions section.

H. TRAVEL ACCIDENT INSURANCE

If an *accident* during *your trip* results in *your* permanent disability or death, *we* will provide coverage up to the maximum benefit specified in *your* Coverage Summary for this purpose.

An *accident* is deemed to have taken place if any sudden external occurrence has an effect on *your* body that results in involuntary damage to *your* health. An *accident* is also deemed to have taken place if increased physical exertion causes *you* to dislocate a joint, or to strain or tear muscle, tendons, ligaments or capsules.

Benefit in case of death

The *accident* results in *your* death within one year: *We* will pay the agreed amount of the death benefit to *your* heirs or to a beneficiary designated by *you*.

Permanent invalidity

If the *accident* results in a permanent impairment of *your* physical or mental capacity (disability), the following conditions apply:

- a. The invalidity must have occurred within one year of the *accident*.
- b. The invalidity must be established by a *doctor* and reported to *us* within a deadline of an additional three months.

We will provide no more than the maximum insurance benefit shown in *your* Coverage Summary for Travel Accident Insurance:

- i. If the case of total invalidity, *we* shall pay the entire agreed sum insured for invalidity. In the case of partial invalidity, *we* will pay the commensurate proportion of the sum insured. The amount of the benefit shall be based on the degree of invalidity.
 - a. The following degrees of invalidity apply without exception: for the physical loss, or loss of function of
 - an arm: 70 %
 - a hand: 55 %
 - a thumb: 20 %
 - a finger: 10 %
 - a leg: 70 %
 - a foot: 40 %
 - a toe: 5 %
 - an eye: 50 %
 - hearing in one ear: 30 %
 - sense of smell or taste: 10 %
 In the event of only a partial physical loss or partial loss of function of the parts of the body or sensory organs listed here, *we* will provide indemnity up to the corresponding proportion for the specified level of invalidity.
 - b. If the *accident* affects parts of the body or sensory organs that are not covered under (a.) above, the following applies: The extent to which normal physical or mental performance is impaired is decisive for *our* benefit. Only medical aspects will be taken into account.
 - c. If several physical or mental functions are impaired as a result of the *accident*, the following applies: The degrees of disability resulting from no. (a.) and (b.) are added together. In total, *we* will pay a maximum of 100 %.
 - d. If the *accident* affects a physical or mental function that was already permanently impaired beforehand, the following applies: *We* will make a deduction in the amount of this previous disability. *We* assess this according to (a.) to (c.).
 - e. If illnesses or infirmities have contributed to the health impairment caused by the *accident* or its consequences, the following shall apply: *We* shall reduce the benefit accordingly if this proportion is at least 25 %.

- f. Within one year after the *accident*, you can only claim disability benefits up to the amount of the sum insured agreed for death if the healing process has not yet been completed.
- ii. If the claim for disability benefits under (i.) had already arisen but the degree of disability had not yet been finally determined, the following applies: If you die within one year of the *accident* from a cause unrelated to the *accident*, or if you die more than one year after the *accident* from whatever cause, we will pay benefits according to the degree of disability that would have been expected on the basis of the most recent medical findings.
- iii. We require proof of the cause and consequences of the *accident*. In the case of disability benefits, we also require proof of the completion of the healing process, insofar as this is necessary for the assessment of the degree of disability. We are obliged to declare within one month whether and to what extent we accept a claim. In the case of disability benefits, the deadline is three months from the date on which we receive the documents.

Important: You and we are entitled to have the degree of invalidity medically re-assessed up to three years after the *accident*. This right must be exercised prior to the expiry of the time limit. If the final assessment results in a higher disability benefit than what we have already paid, we shall apply interest of 5 % per year to the additional amount.

The following are not covered:

1. **Accidents caused by mental or cognitive disorders, by strokes, and by seizures, that affect the whole body of the insured. This also applies if the condition is attributable to drugs or alcohol.**
2. **Accidents that befall you as a consequence of the wilful commission of a criminal offence.**
3. **Accidents that befall you as the pilot of an aircraft (including aviation sport craft) or as another member of the crew of an aircraft.**
4. **Impairments to health caused by curative treatment or other procedures performed on your body.**
5. **Impairments to health caused by radiation, infections and poisoning (exception: these were occasioned by an *accident*).**
6. **Injuries to intervertebral discs, bleeding from internal organs and cerebral haemorrhage (exception: the *accident* was the predominant cause).**
7. **Pathological disorders due to psychological or mental reactions, irrespective of their cause.**
8. **Cases of death, which occur within one year of the *accident*: In this event there is no entitlement to disability benefits.**

Important: What must you do in the event of an *accident* (special obligations)?

- a. You are obliged, to allow yourself to be examined by the *doctors* appointed by us. We will pay the costs necessary for the examination, including any loss of income that may result.
- b. You are obliged, to release the *doctors* applying treatment or performing examinations, other insurers, social insurance agencies and authorities from their non-disclosure obligations.

Further consequences of a breach of obligation can be found in the General Provisions section.

I. SPORTS & ACTIVITY INSURANCE

Missed Activity

If you cannot participate in one or more of your pre-booked activities during your trip for a covered reason listed below, we will reimburse you for your non-refundable costs that you paid for the activities, less available refunds, up to the maximum benefit for Missed Activity coverage. Please note that this coverage only applies before the start of the activity.

Covered reasons:

1. You, a traveling companion, or a family member who is participating in the activity becomes ill or injured, or develops a medical condition (including being diagnosed with an epidemic or pandemic disease such as COVID-19).

The following conditions apply:

- a. The illness, injury, or medical condition must be disabling enough to make a reasonable person not participate in the activity and
- b. A doctor advises you, a traveling companion, or a family member not to participate in the activity before the activity takes place. If that isn't possible, a doctor must either examine or consult with you, the traveling companion, or the family member within 48 hours of the activity, or as soon as reasonably possible, to confirm the decision not to attend.

2. Your family member who is not participating in the activity becomes ill or injured, or develops a medical condition.

The following condition applies:

- a. The illness, injury, or medical condition must be considered life threatening by a doctor, require hospitalization, or require your care.

3. Your or a traveling companion's death.

4. The death of your family member or your service dog on or within 30 days prior to the scheduled start date of the activity.

5. Your pre-booked activity is canceled by the supplier of the activity due to severe weather.

6. Your ski resort closes 75 % or more of its ski lifts due to lack or excess of snow.

The following condition applies:

- a. The closure is for at least 50 % of the normal operating hours on the calendar day you intend to use the lift tickets.

Sporting Equipment Insurance

If your *sporting equipment* is lost or damaged by a *travel supplier*, or stolen, while you are on your *trip*, we will pay you, less available *refunds*, the lowest of the following, up to the maximum benefit listed for sporting equipment damage, loss, or theft in your Coverage Summary:

- i. Cost to repair the damaged *sporting equipment* or
- ii. Cost to replace the lost, damaged, or stolen *sporting equipment* with the same or similar item, reduced by 20 % for each full year of use since the original purchase date, up to the maximum of 70 % reduction.

If the sum insured is lower than the current value (under-insurance) when the insured event occurs, we will not reduce the indemnity (under-insurance waiver).

The following conditions (obligations) apply:

- a. You have taken necessary steps to keep your *sporting equipment* safe and intact and to recover it.
- b. You have filed and have a copy of a report giving a description of the property and its value with the appropriate local authorities, *travel carrier*, hotel, or tour operator within 24 hours of discovery of the loss.
- c. You must provide original receipts or another proof of purchase for the lost items. **For items without an original receipt or a proof of purchase, we will cover up to 50 % of the cost to replace the lost, damaged, or stolen item with the same or similar item.**

The consequences of a breach of obligation can be found in the General Provisions section.

The following are not covered:

1. Items other than *sporting equipment*
2. Animals, including remains of animals
3. Cars, motorcycles, motors, drones, aircraft, watercraft, and other vehicles and related accessories and equipment
4. Hearing aids, prescription eyewear, and contact lenses, unless specifically designed for use in a particular sport
5. Prosthetics, and orthopedic devices, unless specifically designed for use in a particular sport
6. Wheelchairs and other mobility devices, unless specifically designed for use in a particular sport
7. Intangible property, including software and electronic data
8. Property for business or trade
9. Property you do not own
10. *Sporting equipment* while it is
 - a. Shipped, unless with your *travel carrier*
 - b. In or on a car trailer or
 - c. Unattended in an unlocked motor vehicle

Sporting Equipment Rental Coverage

If your *sporting equipment* is lost or delayed by a *travel supplier* during your outbound travel, or damaged or stolen while on your *trip*, we will reimburse the necessary costs for renting replacement *sporting equipment* to use during your *trip*, up to the maximum benefit listed for Sporting Equipment Rental Coverage in your Coverage Summary. This coverage does not include motorized equipment or vehicles.

The following condition (obligation) applies:

- a. You have filed a report giving a description of the property with the appropriate local authorities, *travel supplier*, hotel, or tour operator within 24 hours of discovery of the loss.

The consequences of a breach of obligation can be found in the General Provisions section.

Search, Rescue and Recovery

If you are reported missing and need to be searched for during your *trip*, or if you need to be rescued or recovered from a physical emergency, the following applies: We will pay the cost of search, rescue, and recovery activities by a professional rescue team, up to the maximum benefit listed for search, rescue and recovery coverage in your Coverage Summary. The maximum benefit listed for this coverage is in addition to any other search, rescue and recovery benefit that this policy provides.

J. TRAVEL ASSISTANCE

If you need travel services during your *trip*, we are available 24 hours a day. With our global reach and multi-lingual staff, we are here to help you:

Information before the trip

We inform you about the security situation and health risks in the respective travel country and about vaccinations required for the *trip*.

Finding a Doctor or Medical Facility

If you need care from a *doctor* or medical facility while you are traveling, we can assist you in finding one. We will name suitable contact points where German or English is spoken.

Monitoring Your Care

If you have taken out a Travel Health Insurance and are hospitalized, our medical staff will stay in contact with you and the *doctor* caring for you. We can also notify your family and your *doctor* back home of your illness or *injury* and update them on your status.

Emergency Language Translation

We can assist you with translation services in the event you need help in a foreign country.

Lost Travel Documents Assistance

If *your* passport or other travel documents are lost or stolen, *we* can assist *you* in getting *your* documents replaced and can help *you* change *your* travel arrangements as required.

Emergency Cash Assistance

If *your* travel is delayed or interrupted and *you* need extra money to pay for unexpected expenses, *we* can assist in arranging the transfer of funds from *your* family or friends.

Legal Referrals

We can help *you* find local legal advice if *you* need it while *you* are traveling. *We* will inform *you* about the nearest consulate (address and telephone availability).

Emergency Message Delivery

We can assist *you* in getting an urgent message to someone back home.

GENERAL EXCLUSIONS

This section describes the General Exclusions applicable to all coverages under *your policy*. An “exclusion” is something that is not covered by this insurance *policy*, and therefore no payment or service would be available.

This *policy* does not provide coverage for any loss that results directly or indirectly from any of the following general exclusions if they affect *you*, a *traveling companion*, or a *family member*:

1. Any loss, condition, or event that was known, foreseeable, intended, or expected when *your policy* was purchased (special rules apply to *pre-existing medical conditions* - see the Definitions for details).
2. *Pre-existing medical conditions* - unless specifically covered according to the Definitions.
3. *Your* intentional self-harm or if *you* attempt or commit suicide.
4. Normal, complication-free pregnancy or childbirth, except when normal, complication-free pregnancy or childbirth is expressly referenced in and covered under Travel Cancellation Insurance or Travel Interruption Insurance.
5. Fertility treatments or elective abortion.
6. Mental illness: This exclusion applies only to coverage for Travel Cancellation Insurance and Travel Interruption Insurance, unless specifically covered according to the Definitions. Under the Travel Health Insurance, insurance cover is provided with the exception of psychoanalytical and psychotherapeutic treatment and hypnosis.
7. The use or abuse of alcohol or drugs, or any related physical symptoms. This does not apply to drugs prescribed by a *doctor* and used as prescribed.
8. Acts committed with the intent to cause loss.
9. Operating or working as a crew member (including as a trainee or learner / student) aboard any aircraft or commercial vehicle or commercial watercraft.
10. Participating in or training for any professional or semi-professional sporting competition.
11. Participating in extreme, high-risk sports and activities in general and the following activities in particular:
 - a. Any *high-altitude activity*, BASE jumping, or free climbing
 - b. Rafting / kayaking above Class V rapids or canoeing above Class III rapids
 - c. Heli-skiing or skiing or snowboarding in an area designated unsafe by the resort management
 - d. Personal combat or fighting sports, Running of the Bulls, or rodeo activities
 - e. Racing any motorized vehicle or watercraft other than go-karts
 - f. Free diving at a depth greater than 10 meters or scuba diving at a depth greater than 30 meters or, for uncertified divers, diving without a certified dive master

For high-risk sports and activities that are not expressly excluded to be covered, they must be:

- i. Arranged as part of *your trip*.
- ii. Provided by a company that is regulated or licensed where required.
- iii. Not otherwise prohibited by law.

IMPORTANT (obligation): *You* must wear all recommended safety equipment while participating in *your* sporting activities in order to be eligible for coverage.

The consequences of a breach of obligation can be found in the General Provisions section.

12. An *illegal act* resulting in a conviction, except when *you*, a *traveling companion*, or a *family member* is the victim of such act.
13. An *epidemic* or *pandemic*, except when an *epidemic* or *pandemic* is expressly referenced in and covered under Travel Cancellation Insurance, or Travel Interruption Insurance, or Travel Health Insurance Incl. Return Transportation.
14. *Natural disaster*, except as expressly covered under Travel Cancellation Insurance, or Travel Interruption Insurance, or Travel Delay Insurance.
15. Air, water, or other pollution, or the threat of a pollutant release, including thermal, biological, and chemical pollution or contamination.
16. Nuclear reaction, radiation, or radioactive contamination.
17. War (declared or undeclared) or acts of war.
18. Military duty, except as expressly covered under Travel Cancellation Insurance or Travel Interruption Insurance.
19. Civil disorder or unrest, except when civil disorder or unrest is expressly referenced in and covered under Travel Interruption Insurance or Travel Delay Insurance.
20. *Terrorist events*, except when *terrorist events* are expressly referenced in and covered under Travel Cancellation Insurance, or Travel Interruption Insurance, or Travel Delay Insurance. This exclusion does not apply to Emergency Medical or Emergency Transportation coverage.
21. *Political risk*.
22. *Cyber risk*.

23. Acts, travel alerts / bulletins, or prohibitions by any government or public authority, except as expressly covered under Travel Cancellation Insurance or Travel Interruption Insurance.
24. Any travel supplier's complete cessation of operations due to financial condition, with or without filing for bankruptcy.
25. Travel supplier restrictions on any baggage, including medical supplies and equipment.
26. Ordinary wear and tear or defective materials or workmanship.
27. Your intent to receive health care or medical treatment of any kind while on your trip.
28. Travel against the orders or advice of any government or other public authority.

This policy does not provide any coverage, benefit, or services for any activity that would violate any applicable law or regulation, including without limitation any economic / trade sanction or embargo.

IMPORTANT: You are not eligible for reimbursement under any coverage if:

1. Your travel carrier tickets do not show travel date(s).
2. The travel dates in your proof of insurance do not represent your actual travel dates (does not apply to insurance purchased with a one-way booking).

CLAIMS INFORMATION

What must you do in each event of loss or damage?

You must minimise the damage or loss to the extent possible and provide evidence of the damage or loss sustained. Therefore, please retain appropriate evidence detailing the occurrence of the loss or damage (e. g. confirmation of loss or damage, medical report) and the extent of the loss, damage or injury (e. g. invoices, receipts). You can register your claim quickly and easily online at www.allianz-reiseversicherung.de/versicherungsfall.

What are your obligations if it is doubtful whether you will be able to begin your trip or participate in a booked activity?

If participation in a trip or an activity booked in advance is unreasonable or impossible due to an insured event, the following applies: You must cancel the trip or activity without delay and inform us.

PLEASE NOTE: If the hoped-for healing or improvement in the case of a serious illness or accidental injury does not occur and you therefore cancel the trip / booked activity at a later stage, the following applies: We will not reimburse the higher cancellation costs incurred due to the delayed cancellation. **Please always contact us - regardless of your doctor's assessment of the prospects of recovery: Contact our medical service (cancellation advice) immediately after the onset of the illness or accidental injury.** If you follow our recommendation as to whether and when the trip should be cancelled, the insurance benefit will not be reduced.

In case of an insured event, we will reimburse you for the contractually owed cancellation costs less the agreed deductible and less any reimbursements you receive from elsewhere.

For this we require:

- The **booking confirmation** with details about the booked services, the travel participants and the travel price
- The **proof of insurance**
- The **invoice for cancellation costs** as well as the **proof of payment** (in case of cancellation of a vacation apartment or another object, a confirmation of the landlord that it was not possible to sublet)
- The **proof of loss**
 - In case of illness, accidental injury, vaccination intolerance or pregnancy, a medical certificate (with date of birth, start of illness and treatment and findings). You can request a form for a medical certificate from us. We may also require a certificate of incapacity for work.
 - In case of death a death certificate.
 - In the event of loss of employment, the letter of termination from the employer stating the reasons for termination, etc.

What do you have to consider if you cannot end your trip as planned or have to start with delay?

If you end or interrupt your trip unscheduled or start it late due to an insured event, please submit the following documents for reimbursement of costs:

- The **booking confirmation** with details of the booked services, the travel participants and the travel price
- The **proof of insurance**
- **Receipts** for additional travel or return expenses and a statement from the tour operator for the unused services
- **Proof of loss**, e. g. medical certificate from the doctor at the place of vacation (with date of birth, start of illness and treatment and findings) or police confirmation of an accident or similar

What are your obligations if your baggage / sports equipment is damaged or stolen or arrives late?

If your baggage / sports equipment is damaged or lost during transport or arrives late, please report this immediately to the responsible company. If you discover the damage later (for example when unpacking), you must report this in written form within seven days of acceptance.

Important: Most carriers issue damage confirmations that you must submit to us.

In the event of damage that you discover at the vacation destination, the tour guide may help you to obtain **written confirmation of the damage report**. In the event of **theft** or other crimes, please file a report immediately at the nearest police station. Obtain a **copy of the police report** or at least a confirmation that you have filed a report.

What option do we offer if your baggage does not arrive on the outward journey?

Please report this to the travel carrier immediately and contact us to provide us with the incident number / loss confirmation. If the Real-Time conditions are met, we will ensure that you can pay for any necessary replacement purchases directly on site. In this case you no longer have the right to be reimbursed afterwards for further expenses incurred to recover your baggage or for any necessary replacement purchases.

What are *your* obligations if *you* become ill or suffer an *injury* or other emergency while travelling?

In case of serious *injury* or illness, especially before hospitalization, please contact *our* medical service immediately so that appropriate treatment or repatriation of the sick can be ensured.

For reimbursement of *your* expenses incurred during the *trip*, please submit **original invoices and / or prescriptions**.

Important: The invoices must show the name of the person treated, the name of the illness, the dates of treatment and the individual medical services with the corresponding costs. Prescriptions must contain details of the prescribed medication, the prices and the pharmacy's stamp.

What option do *we* offer for direct on site payment of *your* bill if *you* are ill and need medical treatment?

Before *you* seek treatment for health complaints, *you* can contact *us* . *We* will check whether, according to a preliminary assessment, the requirements for Real-Time cost coverage are met. If this is the case, *we* will ensure that *you* can pay *your* costs directly on site.

What are *your* obligations when lodging claims under the Travel Accident or Travel Liability Insurance?

Please note down the **names and addresses of any witnesses** who observed the damage. Obtain a **copy of the police report** if the police have been called to investigate. Inform *us* and submit these documents and information with *your* claim.

What are *your* obligations when *you* lodge a claim under the Cruise Insurance?

Ask the responsible person of the shipping company to issue a confirmation, if a port of call was missed, if the river cruise was interrupted due to high or low water, if the ship's *doctor* has advised *you* not to leave the cabin / not to participate in a shore excursion or if *you* are denied boarding. Submit this documentation and information with *your* claim.

What do *you* have to consider when handing over the vehicle and in the event of a claim regarding the Collision Damage Waiver (CDW) for cars?

Check the *rental car* for any pre-existing damage and make sure that it is adequately documented. Please report theft and other criminal offences as well as *accidents* on the road immediately to the rental car company and the nearest police station. Get a copy of the police report, including the police *accident* report, if applicable, or at least a confirmation that *you* have raised a claim. In case of damage, please send *us* the following documents:

- the complete **rental car agreement** and / or booking confirmation
- The **rental car company's settlement statement** for the deductible, including evidence of the amount of the loss (cost estimate / repair bill)
- *Your* own **description of the damage** and / or the **certificate of reporting to the police**, if available
- **Records of hand-over and return**

What do *you* have to do in the event of a breakdown, *accident* or theft of the vehicle?

Please notify *our* emergency service immediately. In the event of insurance, the latter will take all necessary steps and inform *you* about further steps. Please submit **original invoices** for the reimbursement of *your* expenses incurred during the *trip*.

GENERAL PROVISIONS

You are the policy holder if *you* concluded the insurance contract with *us*. *You* are required to pay *us* the insurance premium. *You* are obliged to provide the other co-insured persons with these Terms and Conditions of Insurance and the Data Protection Policy. As policyholder *you* can be an insured person at the same time.

As an insured person, *you* benefit from the insurance cover. *You* are named in the proof of insurance, or *you* belong to the group of persons described therein.

Your insured travel is protected by insurance cover within the agreed area of application.

When do *you* have to pay the insurance premium?

The premium is due immediately after conclusion of the insurance contract and is payable upon delivery of the insurance *policy*. If the insured event occurs, *we* will only be obliged to provide indemnity if the premium has been paid, or if *you*, as the policy-holder, are not at fault for the non-payment of the premium. *You* are required to prove this to *us*.

What are *your* obligations in the event of a claim (general obligations)?

You are required to minimise the loss or damage to the extent possible and avoid unnecessary costs.

You are obliged to notify *us* immediately and describe the insured event (e. g. event and extent). In doing so, *you* must truthfully provide *us* with all information necessary to clarify the facts, and enable *us* to verify the cause and amount of the claim made. *You* must provide proof of the damage in the form of original invoices and documents.

To enable *us* to assess *our* obligation to indemnify and the scope of indemnity to be provided, *you* must also release *your* doctor from their non-disclosure obligations to the extent that is necessary. If *you* do not issue the release from the duty of confidentiality and have not enabled *us* to perform verification by other means, *we* are not obligated to provide insurance benefits.

Consequences of a breach of obligation: What happens if *you* breach an obligation?

If *you* intentionally breach an obligation, *we* shall be entitled to refuse the insurance benefit. If *you* breach an obligation through *your* gross negligence, *we* may reduce the indemnity to an extent commensurate to the severity of *your* fault. *You* must prove that *you* have not acted in gross negligence.

If *you* prove that the breach of duty did not affect the determination or the scope of *our* indemnity obligation, *we* will be obliged to provide *you* insurance benefits. This does not apply if *you* have acted deceitfully.

What is the limitation period for *your* claim to benefits under the insurance contract?

Your claim to insurance benefit shall lapse after three years. The limitation period begins at the end of the year in which the claim was made and *you* had knowledge of the circumstances justifying the claim, or should have had knowledge of such circumstances without gross negligence.

When will *we* pay the compensation?

We will pay the compensation within two weeks of conclusively verifying *your* claim. The payment will always be made by bank transfer to an account held at a bank.

What applies if *you* have claims for compensation against third parties?

If *you* have claims against third parties as a result of the loss event, these shall be transferred to *us*. This applies up to the amount of the payment that *you* have received from *us*, provided *you* are not placed at disadvantage as a result. *Your* entitlements to benefits from other private insurance contracts shall take precedence over *our* obligation to indemnify. *We* will extend preliminary indemnity in the event that *you* make *your* claim against *us* first.

The following condition applies:

- a. If *your* claims against third parties have been transferred to *us*, *you* must confirm this to *us* in written form by request.

In what form must declarations and notifications be issued, and who is entitled to receive them?

You and *we* must submit notifications and declarations of intent in text form (e. g. letter, fax, e-mail). Insurance agents are not authorized to accept notifications or declarations of intent regarding a claim.

What court in Germany has jurisdiction? What law applies?

If *you* wish to file legal actions in connection with this insurance contract, *you* may choose between the following legal venues: Munich or the place in Germany where *you* are resident at the time of filing the action.

If *we* wish to assert claims against *you* before a court of law, the courts of the place in which *you* are resident in Germany at the time of filing the action shall have jurisdiction.

This contract is governed by German law insofar as this is permissible under international law.

DOCUMENTS TO THE PROOF OF INSURANCE FOR CONTRACT NO: 5249 – PART 2
Insurance tax information

Please find the respective travel insurance tax in the table below. All amounts are in Euro. For travel insurance packages it is legally required to identify the part of the premium of the travel health insurance separately. Travel health insurance premium is tax-exempted according to § 4 no. 5 VersStG separately. **Travel health insurance premium is tax-exempted according to section 4 no. 5 VersStG (German Insurance Contract).**

Insurance Product	Travel price or travel duration	Insurance premium total	Premium for the health insurance part tax exempted	part of total premium that is taxable	insurance tax included - 19 %
Complete Protection without deductible Single Tarif	up to 200.00	43.00	21.50	21.50	3.43
	up to 400.00	52.00	26.00	26.00	4.15
	up to 600.00	66.00	33.00	33.00	5.27
	up to 800.00	78.00	39.00	39.00	6.23
	up to 1,000.00	95.00	47.50	47.50	7.58
	up to 1,500.00	106.00	53.00	53.00	8.46
	up to 2,000.00	137.00	68.50	68.50	10.94
	up to 2,500.00	160.00	80.00	80.00	12.77
	up to 3,000.00	189.00	94.50	94.50	15.09
	up to 3,500.00	IDD			
Complete Protection without deductible Family Tarif	up to 400.00	55.00	27.50	27.50	4.39
	up to 600.00	87.00	43.50	43.50	6.95
	up to 800.00	91.00	45.50	45.50	7.26
	up to 1,000.00	102.00	51.00	51.00	8.14
	up to 1,500.00	135.00	67.50	67.50	10.78
	up to 2,000.00	164.00	82.00	82.00	13.09
	up to 2,500.00	192.00	96.00	96.00	15.33
	up to 3,000.00	237.00	118.50	118.50	18.92
	up to 3,500.00	258.00	129.00	129.00	20.60
	up to 4,000.00	292.00	146.00	146.00	23.31
	up to 4,500.00	313.00	156.50	156.50	24.99
	up to 5,000.00	337.00	168.50	168.50	26.90
	up to 6,000.00	423.00	211.50	211.50	33.77
up to 7,000.00	494.00	247.00	247.00	39.44	
up to 10,000.00	706.00	353.00	353.00	56.36	