

Kiwitravelcover

WORLDWIDE TRAVEL INSURANCE



Policy Wording

Effective Date 28 April 2014

Allianz 

Global Assistance

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POLICY WORDING

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ABOUT THIS POLICY WORDING

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

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

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

ABOUT THE AVAILABLE PLANS

You can choose a plan from either our Traditional or Basic range. The references to Sections are to the Sections set out in "**Your Policy Cover**".

Traditional Plans

- **Plan A – Super Plus, Super, Standard, Economy & Australia/Indonesia/Fiji**
(includes Sections* 1A to 16);
- **Plan B Annual Multi-Journey**
(includes Sections* 1A to 16);
- **Plan C Domestic**
(includes Sections 1A, 1B, 4, 6, 11, 13, 15 & 16);
- **Plan D Medical & Liability**
(includes Sections* 2, 3A, 3B & 15);
- **Plan E Non-Residents**
(includes Sections 1A, 2, 3A, 4 to 7, 9 & 11 to 16);
- **Plan F Domestic Advance Purchase**
(includes Section 1A);

* you will not have cover under certain Sections while travelling in New Zealand - see "**Traditional Plan Selection Guide**" page 30 for details.

Only available to eligible applicants:

- **Plan G Non-Medical Cover**
(includes Sections# 1A, 1B, 4, 6, 7 & 9 to 16).

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

Basic Plans

- **Basic – Super Plus, Super, Standard, Economy & Australia/Indonesia/Fiji**
(includes Sections* 1A to 16);
- **Basic Annual Multi-Journey**
(includes Sections* 1A to 16);
- **Basic Domestic**
(includes Sections 1A, 1B, 4, 6, 11, 13, 15 & 16);

- **Basic Non-Residents**

(includes Sections 1A, 2, 3A, 4 to 7, 9, & 11 to 16);

*you will not have cover under certain Sections while travelling in New Zealand - see **"Basic Plan Selection Guide"** page 35 for details.

Only available to eligible applicants:

- **Basic Non-Medical Cover**

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

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

UNDERSTANDING YOUR POLICY AND ITS IMPORTANT TERMS AND CONDITIONS

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

- The benefit limits provided under each plan in the **"Traditional Table of Benefits"** pages 26 to 29 or the **"Basic Table of Benefits"** pages 31 to 34, when *We will pay* a claim under each Section applicable to the cover you choose (**"Your Policy Cover"** pages 36 to 52), any endorsements under **"Additional Options"** page 8 and **"Pre-existing Medical Conditions"** pages 9 to 12 (remember, certain words have special meanings – see **"Words with Special Meanings"** pages 22 to 24);
- **"Important Matters"** (pages 13 to 21) - this contains important information on applicable Excesses, the period of cover and extensions of cover, the cooling-off period, confirmation of cover, our privacy notice and dispute resolution process, when you can choose your own doctor, when you should contact Allianz Global Assistance concerning 24 hour medical assistance, Overseas hospitalisation or medical evacuation, and more;
- When *We will not pay* a claim under each Section applicable to the cover you choose (**"Your Policy Cover"** pages 36 to 52) and **"General Exclusions Applicable to all Sections"** pages 53 to 55 (which provides details of the general exclusions that apply to all covers and benefits); and
- **"Claims"** (pages 56 & 57) - this sets out important information about how we will pay claims. It also sets out certain obligations that you and we have. If you do not meet them we may refuse to pay a claim.

APPLYING FOR COVER

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

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

This Policy Wording sets out the cover we are able to provide you with. You need to decide if the benefit limits, type and level of cover are appropriate for you and will cover your potential loss.

If you have any queries, want further information about the policy or want to confirm a transaction, please use the contact details on the back cover of this Policy Wording.

YOUR DUTY OF DISCLOSURE

When you apply for insurance or alter this policy, you have a duty at law, to disclose to us all material facts. You must disclose all material facts to us as soon as you become aware of them. A material fact is one that may influence a prudent insurer in deciding whether or not to accept the cover and, if so, on what terms and conditions and for what premium.

Examples of information you may need to disclose include:

- anything that increases the risk of an insurance claim;
- any criminal conviction subject to the Criminal Convictions (Clean Slate) Act 2004;
- if another insurer has cancelled or refused to insure or renew insurance, has imposed special terms, or refused any claim;
- any insurance claim or loss made or suffered in the past.

These examples are a guide only. If there is any doubt as to whether a particular piece of information needs to be disclosed, this should be referred to us.

Non-Disclosure

If you fail to comply with your duty of disclosure, we are entitled to avoid this policy retrospectively from the beginning. You will not be insured under this policy at all.

ABOUT YOUR PREMIUM

You will be told the premium payable for the policy when you apply. It is based on a number of factors such as your destination(s), length of Journey, number of persons covered, your age, Pre-existing Medical Conditions, the plan and any additional options selected. The higher the risk, the higher the premium is.

Your premium also includes amounts that take into account our obligation to pay any relevant compulsory government charges, taxes or levies (e.g. GST) in relation to your policy. These amounts are included on your Certificate of Insurance as part of the total premium.

COOLING-OFF PERIOD

Even after you have purchased your policy, you have cooling-off rights (see page 17 of **"Important Matters"** for details).

WHO IS YOUR INSURER?

This policy is underwritten by Allianz Australia Insurance Limited ABN 15 000 122 850 (Incorporated in Australia) trading as Allianz New Zealand, Level 1, 152 Fanshawe Street, Auckland 1010, New Zealand.

WHO IS ALLIANZ GLOBAL ASSISTANCE?

Allianz Global Assistance is a trading name of AGA Assistance Australia Pty Ltd ABN 52 097 227 177 (Incorporated in Australia). Allianz Global Assistance has been authorised by Allianz to enter into and arrange the policy and deal with and settle any claims under it, as the agent of Allianz, not as your agent. Allianz Global Assistance acts under a binder which means that it can do these things as if it were the insurer. It administers all emergency assistance services and benefits of this insurance. You may contact Allianz Global Assistance in an emergency 24 hours a day, 7 days a week.

CHANGE OF CIRCUMSTANCES

During the period of insurance, you must tell us immediately of any material change in the circumstances surrounding the subject matter of this insurance that:

- increase the risk we are insuring, or
- alter the nature of the risk we are insuring.

Once you have told us, we may immediately change the terms of this policy, or cancel it. If you fail to tell us, we may apply these changes retrospectively from the date you ought to have reasonably told us.

PREPARATION DATE

The preparation date of this Policy Wording is 14 April 2014.

SUMMARY OF BENEFITS

This is only a summary of the benefits. Please read this Policy Wording carefully for complete details of what *We will pay* and what *We will not pay*, and which of the Sections are provided under each plan (see pages 36 to 52). Importantly, please note that exclusions do apply, as well as limits to the cover.

1A CANCELLATION FEES AND LOST DEPOSITS (pg. 36 to 38)

Cover for cancellation fees and lost deposits for pre-paid travel arrangements due to unforeseen circumstances neither expected nor intended by you and which are outside your control, such as:

- Sickness – Injuries – strikes – collisions – retrenchment
- natural disasters.

1B TRAVEL SERVICES PROVIDER INSOLVENCY (pg. 38 & 39)

Financial loss due to the Insolvency of a Travel Services Provider.

2 OVERSEAS EMERGENCY MEDICAL ASSISTANCE/EVACUATION (pg. 39)

Cover for emergency medical assistance while you are Overseas, including:

- 24 hour emergency medical assistance – ambulance
- medical evacuations – funeral arrangements – messages to family
- Hospital guarantees.

3A OVERSEAS EMERGENCY MEDICAL & HOSPITAL EXPENSES (pg. 40)

Cover for Overseas emergency medical treatment if you are Injured or become Sick Overseas, including:

- medical – hospital – surgical – nursing
- emergency dental treatment for the relief of sudden and acute pain to sound and natural teeth.

3B CONTINUING MEDICAL & HOSPITAL EXPENSES UPON RETURN TO NEW ZEALAND (pg. 41)

Cover for continuing registered medical, surgical and Hospital treatment in a public Hospital, upon your return to New Zealand, if you are Injured or become Sick Overseas.

4 ADDITIONAL EXPENSES (pg. 41 to 44)

Cover for additional accommodation and travel expenses caused by your health problems or someone else's resulting from:

- Sickness – Injury – death.

Also cover for your Travelling Companion's or Relative's accommodation and travel expenses to travel to, stay near or escort you resulting from:

- hospitalisation – medical evacuation.

Cover for piste closure due to adverse snow conditions.

Cover to hire ski and/or golf equipment following loss, theft of or damage to ski and/or golf equipment, as well as cover if your ski and/or golf equipment is delayed or misdirected.

Cover for house-keeping services following Injury/disablement continuing upon your return Home.

Cover for additional kennel or boarding cattery fees if you are delayed beyond your original return date.

5 HOSPITAL CASH ALLOWANCE (pg. 44)

An allowance of \$50 per day if you are hospitalised for more than 48 continuous hours while Overseas.

6 ACCIDENTAL DEATH (pg. 45)

A death benefit is payable to your estate if you die within 12 months of, and because of, an Injury sustained during your Journey.

7 PERMANENT DISABILITY (pg. 45 & 46)

A permanent disability benefit is payable for total loss of sight in one or both eyes, or loss of use of a hand or foot (for at least 12 months, and which will continue indefinitely) within 12 months of, and because of, an Injury you sustained during your Journey.

8 LOSS OF INCOME (pg. 46)

A weekly loss of income benefit is payable if, due to an Injury sustained during your Journey, you are unable to work after your return to New Zealand for more than 30 days.

9 LOSS OF TRAVEL DOCUMENTS, CREDIT CARDS AND TRAVELLERS CHEQUES (pg. 46 & 47)

Cover for the replacement costs of travel documents lost or stolen from you during your Journey, such as:

– passports – credit cards – travel documents – travellers cheques.

10 THEFT OF CASH, BANK NOTES, CURRENCY NOTES, POSTAL ORDERS OR MONEY ORDERS (pg. 47)

Cover for the following items stolen from your person:

– bank notes – cash – currency notes – postal orders – money orders.

11 LUGGAGE AND PERSONAL EFFECTS (pg. 47 to 49)

Cover for replacing stolen or permanently lost Luggage and Personal Effects, or reimbursing repair cost for accidentally damaged items, including:

– luggage – spectacles – personal effects – personal computers – cameras.

12 LUGGAGE AND PERSONAL EFFECTS DELAY EXPENSES (pg. 50)

Cover to purchase essential items of clothing and other personal items following your Luggage and Personal Effects being delayed, misdirected or misplaced by your Carrier for more than 12 hours.

13 TRAVEL DELAY EXPENSES (pg. 50 & 51)

Cover for additional meals and accommodation expenses, after an initial 6 hour delay, if your Journey is disrupted due to circumstances beyond your control.

14 ALTERNATIVE TRANSPORT EXPENSES (pg. 51)

Cover for additional travel expenses following transport delays to reach:

– a wedding – funeral – conference – sporting event
– pre-paid travel/tour arrangements.

15 PERSONAL LIABILITY (pg. 51 & 52)

Cover for legal liability including legal expenses for bodily injuries or damage to property of other persons as a result of a claim made against you.

16 RENTAL VEHICLE EXCESS / RETURN OF RENTAL VEHICLE (pg. 52)

Cover for the excess payable on your Rental Vehicle's motor vehicle insurance resulting from the Rental Vehicle being:

– stolen – crashed – damaged

and/or:

the cost of returning the Rental Vehicle due to you being unfit to do so.

ADDITIONAL OPTIONS

SPECIFIED LUGGAGE AND PERSONAL EFFECTS COVER

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

The maximum amount we will pay for all claims combined under Section 11 (*Luggage and Personal Effects*) is shown under the “**Traditional Table of Benefits**” pages 26 to 29 or the “**Basic Table of Benefits**” pages 31 to 34 for the plan you have selected.

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

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

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

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

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

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

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

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

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

Your nominated limit for “*Specified Luggage and Personal Effects Cover*” will be shown on your Certificate of Insurance. Receipts and/or valuations must be provided in the event of a claim.

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

REMOVAL OF STANDARD EXCESS

You can remove the standard \$100 Excess by paying an additional premium of \$25.

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

PRE-EXISTING MEDICAL CONDITIONS

PRE-EXISTING MEDICAL CONDITIONS

Please read this section carefully.

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

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

What is a Pre-existing Medical Condition?

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

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

Travellers 75 years of age or over (only available under Plans A, C, Basic Super Plus, Basic Super, Basic Standard, Basic Economy, Basic Australia/Indonesia/Fiji & Basic Domestic)

If you are 75 years of age or over, the above plans may be available on application. Please contact your Kiwitravelcover agent for further details.

We have the absolute right to accept or decline cover, or impose special conditions such as an Excess.

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

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

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

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

– Section 1A: Cancellation Fees & Lost Deposits

– Section 4: Additional Expenses

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

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

Please contact Kiwitracelcover for further details.

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

* sub-limits apply - refer to "Your Policy Cover" on pages 36 to 52 for details.

[^] you do not have cover under these Sections while travelling in New Zealand.

Conditions which are undiagnosed or awaiting specialist opinion

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

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

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

Pre-existing Medical Conditions which may be covered with no additional premium payable

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

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

- | | |
|--|--|
| 1. Acne | 16. Dupuytren's Contracture |
| 2. Asthma, provided: | 17. Ear Grommets, if no current infection |
| • you are under 60 years of age, and | 18. Eczema |
| • you have no other diagnosed lung disease. | 19. Gastric Reflux (GORD) |
| 3. Bunions | 20. Glaucoma |
| 4. Carpal Tunnel Syndrome | 21. Gout |
| 5. Cataracts | 22. Hay fever |
| 6. Cleft Palate | 23. Hiatus Hernia if no surgery planned |
| 7. Cochlear Implant | 24. Hormone Replacement Therapy |
| 8. Coeliac Disease | 25. Hypercholesterolaemia (High Cholesterol) provided no cardiovascular disease and/or no Diabetes |
| 9. Congenital Adrenal Hyperplasia | 26. Hyperlipidaemia (High Blood Lipids) provided no cardiovascular disease and/or no Diabetes |
| 10. Congenital Blindness | 27. Hypertension provided no cardiovascular disease and/or no Diabetes |
| 11. Congenital Deafness | 28. Hypothyroidism, including Hashimoto's Disease |
| 12. Conjunctivitis | 29. Lipoma |
| 13. Dengue Fever | 30. Macular Degeneration |
| 14. Diabetes Type 1 or Type 2, or Glucose Intolerance provided: | 31. Meniere's Disease |
| • you were diagnosed over 6 months ago; and | 32. Rhinitis |
| • you have had no complications in last 12 months; and | 33. Rosacea |
| • you have had no kidney, eye or neuropathy complications or cardiovascular disease, and | |
| • you are under 50 years of age. | |
| 15. Dry Eye Syndrome | |

34. Sinusitis
35. Tinnitus
36. Single uncomplicated pregnancy, up to and including 23 weeks, not arising from

services or treatment associated with an assisted reproduction program including, but not limited to, in vitro fertilisation (IVF).

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

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

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

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

How do I obtain cover for my Pre-existing Medical Condition?

If you are 74 years of age or under, and think you have a Pre-existing Medical Condition and would like cover for that condition, please contact your Kiwitravelcover agent, or telephone the Kiwitravelcover Medical Assessment line on 09 281 5586 or 0800 101 008.

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

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

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

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

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

You cannot apply for cover for any medical conditions/circumstances which automatically exclude all cover for medical or Hospital expenses as listed under the heading *'Medical conditions/circumstances which automatically exclude all cover for medical or Hospital expenses'* on page 10 of this Policy Wording.

PLEASE ALSO READ THE "GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS" ON PAGES 53 TO 55 AND THE SECTION-SPECIFIC EXCLUSIONS ON PAGES 36 TO 52.

IMPORTANT MATTERS

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

WHO CAN PURCHASE THIS POLICY?

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

Cover is only available if:

- you are a Resident of New Zealand*^{*}; and
- you purchase your policy before you commence your Journey; and
- your Journey commences and ends in New Zealand.[#]

*** For Temporary Residents living in New Zealand**

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

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

Cover for Temporary Residents of New Zealand temporarily travelling Overseas

Cover (excluding any cover for Pre-existing Medical Conditions other than those specifically listed under the heading *'Pre-existing Medical Conditions which may be covered with no additional premium payable'* on pages 11 & 12) is automatically available to Temporary Residents of New Zealand temporarily travelling Overseas and who, at the date the Certificate of Insurance is issued:

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

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

For Residents of New Zealand already Overseas

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

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

Policies purchased after leaving New Zealand

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

- cover commences from the time the policy is issued;

- a waiting period of 48 hours from the issue date as stated on your Certificate of Insurance applies to all claims arising from, related to or associated with any Injury or Sickness, regardless of the Section that applies to the claim. This means that you will not be covered for medical expenses, cancellation fees and lost deposits, additional expenses or hospital cash allowance arising from, related to or associated with any Injury or Sickness which happens within this waiting period;
- there is no cover for Pre-existing Medical Conditions other than those specifically listed under the heading 'Pre-existing Medical Conditions which may be covered with no additional premium payable' on pages 11 & 12; and
- cover ends when you return to your Home or the place you intend to reside in New Zealand, or on the Return Date set out on your Certificate of Insurance, whichever happens first.
For policies purchased after leaving New Zealand, where the word "Journey" appears in this Policy Wording, its definition in "Words with Special Meanings" (page 22) is deleted and replaced with:
"Journey" means your travel from the time when your policy is issued while you are Overseas to the time when you return to your Home or the place you intend to reside in New Zealand.

Plan B & Basic Annual Multi-Journey

Cover is only available if:

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

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

Plan E & Basic Non-Residents

Non-Residents Cover

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

- are not a Resident of New Zealand (*see page 24 for definition of "Resident of New Zealand"*);
- are not a Temporary Resident (*see page 24 for definition of "Temporary Resident"*);
- are travelling to, within and from New Zealand; and
- are not entitled to - or will not during the period of cover be entitled to - cover under a Reciprocal Agreement between the Government of New Zealand and the government of another country. Please refer to www.health.govt.nz/new-zealand-health-system for further information.

If you require clarification, contact Kiwitracelcover on 09 281 5581 or 0800 101 007 before you apply.

Please note the following conditions apply:

- if a policy is issued after the traveller's arrival in New Zealand, a waiting period of 48 hours from the issue date as stated on your Certificate of Insurance applies to all claims arising from, related to or associated with any Injury or Sickness, regardless of the Section that applies to the claim. This means that you will not be covered for medical expenses, cancellation fees and lost deposits, additional expenses or hospital cash allowance arising from, related to or associated with any Injury or Sickness which happens within this waiting period.

- **you cannot purchase this cover if the period you are travelling Overseas exceeds the period you will be in New Zealand.**
- there is no cover for Pre-existing Medical Conditions other than those specifically listed under the heading 'Pre-existing Medical Conditions which may be covered with no additional premium payable' on pages 11 & 12.
- there is no cover for medical or Hospital expenses in your Country of Residence.
- the policy can be signed by a sponsor who is a Resident of New Zealand.
- where the word 'New Zealand' or 'New Zealand or Australia' appears in this Policy Wording, the policyholder's Country of Residence is to be substituted, except where it appears in:
 - this section ("Who can Purchase this Policy?");
 - "Jurisdiction and Choice of Law" under "Important Matters" (on page 19);
 - "Words with Special Meanings" (on pages 23 & 24) under the definitions of:
 - "Non-Resident";
 - "Resident of New Zealand";
 - "Temporary Residents";
 - "we", "our" and "us";
 - in Section 1A 1.2 j] & k] of "Your Policy Cover" (on page 38);
 - "General Exclusions Applicable to all Sections" (pages 53 to 55);
 - "Claims are Payable in New Zealand Dollars to You" (pages 56 & 57); and
 - on the back cover of this Policy Wording.

AGE LIMITS

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

The following additional premiums apply to travellers aged 51 years or over where applicable as at the date of Certificate issue.

Travellers aged 51-60 years: +15% of premium

Travellers aged 61-70 years: +30% of premium

Travellers aged 71-74 years: +90% of premium

Travellers aged 75-80 years*: +160% of premium

Travellers aged 81-89 years: +375% of premium**

Travellers aged 90 years and over: +450% of premium**

* Not available under Plans B, D, F or Basic Annual Multi-Journey.

** Not available under Plans B, D, E, F, Basic Annual Multi-Journey or Basic Non-Residents.

Please Note: An additional surcharge for Pre-existing Medical Conditions may also apply.

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

Available to travellers of all ages.

Travellers aged 75 years and over

The above plans are only available on application as cover is not automatic. For further details, please contact your Kiwitracelcover agent, or telephone the Kiwitracelcover Medical Assessment line on 09 281 5586 or 0800 101 008.

Please Note: We have the absolute right to accept or decline cover, or impose special conditions such as an Excess. An additional premium for Pre-existing Medical Conditions may also apply.

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

Available to travellers aged 74 years and under.

Plan E & Basic Non-Residents

Available to travellers aged 80 years and under.

Plan G & Basic Non-Medical Cover

Available to travellers of all ages who have a Pre-existing Medical Condition or circumstance which is listed on page 10 of the "**Pre-existing Medical Conditions**" section. Please contact your Kiwitracelcover agent for further details.

PERIOD OF COVER

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

All Plans* except Plans D & F

- The cover for cancellation fees and lost deposits (Section 1A) begins from the time the policy is issued.
- Cover for all other Sections begins on the date of departure as stated on your Certificate of Insurance.
- Cover ends when you return to your Home, or when we return you to New Zealand, or on the date of return set out on your Certificate of Insurance, whichever happens first.

* for Residents of New Zealand already Overseas who have purchased a policy after leaving New Zealand (see pages 13 & 14 for list of eligible plans):

- cover begins from the time the policy issued (a waiting period of 48 hours from the Issue Date as stated on your Certificate of Insurance applies to all claims arising from, related to or associated with any Injury or Sickness, regardless of the Section that applies to the claim (refer to '**For Residents of New Zealand already Overseas**' pages 13 & 14 for details).
- cover ends when you return to your Home or the place you intend to reside in New Zealand, or on the date of return set out on your Certificate of Insurance, whichever happens first.
Refer to page 14 for the amended definition of "**Journey**" for these policies.

Under Plan B (Annual Multi-Journey) and Basic Annual Multi-Journey, the maximum period for any one Journey is 37 days for leisure travel or 90 days for business travel. A Journey can be made up of business and/or leisure travel (with the leisure component being up to 37 days), however, the whole Journey cannot exceed a total of 90 days.

Plan D

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

Plan F

- The cover for cancellation fees and lost deposits (Section 1A) begins from the time the policy is issued.
- Cover ends when you return to your Home, or when we return you to New Zealand, or on the date of return set out on your Certificate of Insurance, whichever happens first.

COOLING-OFF PERIOD

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

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

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

EXTENSION OF COVER

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

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

If the delay is for any other reason other than as stated above, we must receive your request to extend your cover at least 7 days before your original policy expires if you send your request by post. All other requests to extend your cover must be received prior to your original policy expiry date. Cover will be extended subject to our written approval, and your payment of the additional premium.

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

Cover cannot be extended:

- for any Pre-existing Medical Condition, unless it is listed under the heading '*Pre-existing Medical Conditions which may be covered with no additional premium payable*' on pages 11 & 12, and you have not been hospitalised (including day surgery or emergency department attendance) for that condition in the 18 months prior to application for the extension. This applies even if cover for your Pre-existing Medical Condition was provided under the original policy; or
- for any medical conditions you suffered during the term of your original policy; or
- where you have not advised us of any circumstances that have given (or may give) rise to a claim under your original policy; or
- where at the time of application for the extension you are aged 75 years or over under Plans A, C, D, F, G, Basic Super Plus, Basic Super, Basic Standard, Basic Economy, Basic Australia/Indonesia/Fiji, Basic Domestic & Basic Non-Medical Cover; or aged 81 years or over under Plans E & Basic Non-Resident; or
- under Plan B & Basic Annual Multi-Journey.

CONFIRMATION OF COVER

To confirm any policy transaction, (if the Certificate of Insurance does not have all the information you require), call Kiwitracelcover on 09 281 5581 or 0800 101 007.

EXCESS

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

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

A NIL Excess applies to all other Sections.

* Refer to the "**Traditional Table of Benefits**" on pages 26 to 29 and "**Basic Table of Benefits**" on pages 31 to 34 for details of which Sections are available under each plan.

You can remove the standard \$100 Excess by paying an additional premium (see "**Additional Options**" page 8).

Plan C & Basic Domestic

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

A NIL Excess applies to all other Sections.

* Refer to the "**Traditional Table of Benefits**" on pages 26 to 29 and "**Basic Table of Benefits**" on pages 31 to 34 for details of which Sections are available under each plan.

You can remove the standard \$100 Excess by paying an additional premium (see "**Additional Options**" page 8).

Plan D

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

A NIL Excess applies to Section 2.

You can remove the standard \$100 Excess by paying an additional premium (see "**Additional Options**" page 8).

Plan E & Basic Non-Residents

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

A NIL Excess applies to all other Sections.

* Refer to the "**Traditional Table of Benefits**" on pages 26 to 29 and "**Basic Table of Benefits**" on pages 31 to 34 for details of which Sections are available under each plan.

You can remove the standard \$100 Excess by paying an additional premium (see "**Additional Options**" page 8).

Plan F

A NIL Excess applies.

Plan G & Basic Non-Medical Cover

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

A NIL Excess applies to all other Sections.

* Refer to the "**Traditional Table of Benefits**" on pages 26 to 29 and "**Basic Table of Benefits**" on pages 31 to 34 for details of which Sections are available under each plan.

You can remove the standard \$100 Excess by paying an additional premium (see "**Additional Options**" page 8).

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

FAIR INSURANCE CODE

Allianz supports the principles of the Fair Insurance Code. The purpose of this Code is to increase the standards of practice and service within the insurance industry. Brochures on the Code are available from our office.

FALSE STATEMENTS AND FRAUD

Your policy is based on the information supplied to us by you or on your behalf. All statements made by you or on your behalf at the time of application, in support of this policy, on any claim form or in support of any claim, must be true and correct. If you take any action or make any statement in connection with this policy or any claim made under it, which is fraudulent in any way or which is supported by untrue or incorrect information, we are entitled to avoid this policy and all benefits under it will be forfeited.

JURISDICTION AND CHOICE OF LAW

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

DISPUTE RESOLUTION PROCESS

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

If you have a complaint or dispute in relation to this insurance, or our services or our representatives, please call us on 0800 630 117, or put the complaint in writing and send it to The Dispute Resolution Department, PO Box 112316, Penrose, Auckland 1642, New Zealand. We will attempt to resolve the matter in accordance with our Internal Dispute Resolution process. To obtain a copy of our procedures, please contact us.

A dispute can be referred to the Financial Services Complaints Ltd (FSCL), subject to its terms of reference. The FSCL provides a free and independent dispute resolution service for consumers who have general insurance disputes falling with its terms. The contact details for the FSCL are:

Financial Services Complaints Ltd (FSCL)

Freephone: 0800 347 257

Telephone: +64 (04) 472 3725

Fax: +64 (04) 472 3728

Post : PO Box 5967, Lambton Quay, Wellington 6145, New Zealand

Email: info@fscl.org.nz

PRIVACY NOTICE

To arrange and manage your travel insurance, we (in this Privacy Notice "we", "our" and "us" includes Allianz Global Assistance and Kiwitracelcover) collect personal information from you and others (including those authorised by you such as your doctors, hospitals and persons whom we consider necessary).

Any personal information provided to us is used by us to evaluate and arrange your travel insurance. We also use it to administer and provide the insurance services and manage your and our rights and obligations in relation to those insurance services, including managing, processing and investigating claims. We may also collect, use and disclose it for product development, marketing, research, IT systems maintenance and development, recovery against third parties and for other purposes with your consent.

This personal information may be disclosed to third parties in New Zealand or outside New Zealand involved in the above process, such as travel consultants, travel insurance providers and other intermediaries, agents, distributors, reinsurers, claims handlers and investigators, cost containment providers, medical and health service providers, legal and other professional advisers, your agents and our related companies.

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

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

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

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

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

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

OVERSEAS HOSPITALISATION OR MEDICAL EVACUATION

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

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

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

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

Please note that we will not pay for any Hospital or medical costs incurred in your Country of Residence other than as specified under Section 3B Continuing Medical Expenses on Return to New Zealand.

YOU CAN CHOOSE YOUR OWN DOCTOR

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

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

SAFEGUARDING YOUR LUGGAGE AND PERSONAL EFFECTS

You must take all reasonable precautions to safeguard your Luggage and Personal Effects. If you leave your Luggage and Personal Effects Unsupervised in a Public Place we will not pay your claim (for an explanation of what we mean by "Luggage and Personal Effects", "Unsupervised" and "Public Place" – see pages 23 & 24).

IN THE EVENT OF A CLAIM

Immediate Notice

of an event giving rise to a claim should be given to Allianz Global Assistance.

24 Hour Emergency Assistance call:

0800 778 103
(within New Zealand)

+61 7 3305 7499
(reverse charge from Overseas)

PO Box 112316,
Penrose, Auckland 1642,
New Zealand.



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

CLAIMS PROCESSING

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

WORDS WITH SPECIAL MEANINGS

Some words and phrases used in this Policy Wording have a special meaning. When these words and phrases are used, they have the meaning set out below.

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

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

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

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

"Country of Residence" means the country of which you are a permanent resident.

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

"DSM" means The Diagnostic and Statistical Manual of Mental Disorders. It is an American handbook for mental health professionals that lists different categories of mental disorders and the criteria for diagnosing them.

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

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

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

"Family" means you, your spouse (or legally recognised de facto) and your Dependents (where Plan B Annual Multi-Journey or Basic Annual Multi-Journey has been purchased, "Family" can also mean:

- you and your spouse (or legally recognised de facto)).

"Home" means the place where you normally live in New Zealand.

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

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

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

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

"Journey" means your journey from the time when you leave your Home to go directly to the place you depart from on your travels, and ends when you return to your Home. Refer to page 14 for the definition of "Journey" for policies purchased after leaving New Zealand.

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

"Medical Adviser" means a qualified doctor of medicine or dentist registered in the place where you received the services.

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

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

"Non-Resident" means someone who does not reside in New Zealand, is travelling to, within and from New Zealand, and who is not entitled to receive cover under a Reciprocal Agreement between the Government of New Zealand and the government of another country.

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

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

"Overseas" means in any country other than New Zealand.

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

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

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

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

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

“**Reasonable**” means, for medical or dental expenses, the standard level of care given in the country you are in or, for other expenses, the standard level you have booked for the rest of your Journey or, as determined by us.

“**Relative**” means any of the following who is under 85 years of age and who is resident in New Zealand or Australia. It means your or your Travelling Companion's spouse, de facto partner, parent, parent-in-law, daughter, son, daughter-in-law, son-in-law, brother, sister, brother-in-law, sister-in-law, grandchild, grandparent, step-parent, step-son, step-daughter, fiancé or fiancée, or guardian.

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

“**Resident of New Zealand**” means someone who is a permanent resident of New Zealand.

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

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

“**Temporary Residents**” means persons who have a home address in New Zealand where they are living temporarily but who do not hold a New Zealand residence class visa. This does not include persons visiting New Zealand for travel and/or medical purposes only. *Residence class visas include but are not limited to a resident visa or a permanent resident visa.*

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

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

“**Unsupervised**” means leaving your Luggage and Personal Effects:

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

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

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

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

HEALTH TIPS

For vaccination and health advice, including information on disease outbreaks, visit:

www.cdc.gov or www.who.int or www.safetravel.govt.nz

BEFORE TRAVEL, CONSULT YOUR HEALTH PROFESSIONAL TO DISCUSS:

• Itinerary • Duration of travel • Style of travel • Past medical history
• Vaccination requirements • Pregnancy • Allergies • Pre-existing Medical Conditions • Disease prevention • Medication (*ensure that any medications taken with you are legal in the country you will visit – make sure you carry a letter of approval from your doctor/dentist for any essential medication you need to take with you*)

TIPS FOR LONG DISTANCE TRAVELLERS

- While travelling, regularly exercise the lower limbs to encourage blood flow
- Drink plenty of non-alcoholic drinks to prevent dehydration

OTHER USEFUL TIPS

- Carry a small first-aid kit with you containing a packet of adhesive dressings, some insect repellent, antiseptic cream and water sterilisation tablets (this takes up little space and could be useful). Emergency medical travel kits are available.
- Unless you know the water you are using is safe (bottled water usually is), sterilise all drinking water either by boiling or using sterilisation tablets.
- It is unwise to have your skin pierced (ie. acupuncture, tattooing, ear piercing, etc.) unless you can be sure that the equipment used is sterile – a needle wiped with an alcohol swab is not necessarily sterile. Keep a note on your person advising of any significant medical condition affecting you (eg. diabetes, angina pectoris, haemophilia).

THE THREE R'S OF TRAVEL VACCINATION

Routine vaccinations (childhood or adult vaccinations)

• Tetanus/diphtheria • Polio • MMR • Influenza • Pneumococcal • Varicella

Required vaccinations

When crossing some international borders, certain vaccinations are required, such as:

• Yellow Fever • Cholera • Meningococcal

Recommended vaccinations

There are some vaccinations recommended when travelling overseas specific to your destination. These may include:

• Hepatitis A • Hepatitis B • Typhoid • Japanese Encephalitis
• Poliomyelitis • Rabies • Cholera

Please see your doctor to identify your specific needs.

Kiwitravelcover Traditional Table of Benefits and Premiums

Select your Plan as per Plan Selection Guide on page 30.

PLAN A
SUPER PLUS

PLAN A
SUPER

PLAN A
STANDARD

PLAN A
ECONOMY
(incl Pacific cruising)

PLAN A
AUSTRALIA/
INDONESIA/FIJI

PLAN B
ANNUAL
MULTI-JOURNEY

PLAN C
DOMESTIC

PLAN D
MEDICAL &
LIABILITY

PLAN E
NON-RESIDENTS

TRADITIONAL PLAN SELECTION GUIDE

International Plans (A, B, D & E)

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

Plan A Super Plus – The Americas, Africa & Worldwide

Plan A Super – Europe, Egypt, Japan, Middle East

Plan A Standard – United Kingdom, Ireland & Asia (excluding Japan & Indonesia)

Plan A Economy – SW Pacific & Indonesia (including Pacific cruising)

Plan A Australia/Indonesia/Fiji – Australia, Indonesia & Fiji (excluding cruising to these destinations)

Plan B Annual Multi-Journey – Worldwide

Plan C Domestic & Plan F Domestic Advance Purchase – Travel within New Zealand

Plan D Medical & Liability – Worldwide

Plan E Non-Residents – New Zealand

Please note that under Plans A, B & D there is only cover under certain Sections while travelling in New Zealand - see below for details. You will also have cover under Section 3B when you return to New Zealand if you suffered an Injury or Sickness during your Overseas Journey:

Plan A

You will only have cover under Sections 1A, 1B, 4, 6, 11, 13, 15 & 16 while travelling in New Zealand.

Plan B

You will only have cover under Sections 1A, 1B, 4, & 6 to 16 while travelling in New Zealand.

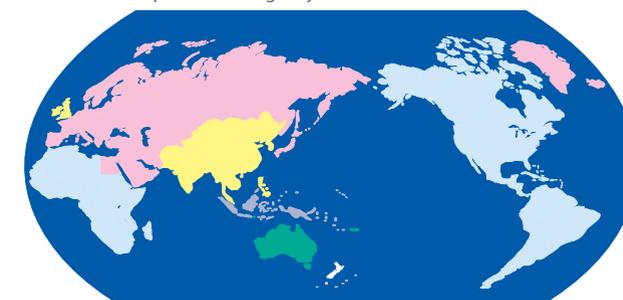
Plan D

You will only have cover under Section 15 while travelling in New Zealand.

TRAVEL ON CRUISE LINERS

Travellers on domestic cruises in New Zealand waters may purchase Plan A Economy to ensure cover is available for emergency medical assistance and emergency medical and Hospital expenses.

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



SECTION AND BENEFIT TYPE	Single	Family	Section	Single	Family	Single	Family	Single	Family	Single	Family	Section								
*1A CANCELLATION FEES AND LOST DEPOSITS	Unlimited	1A	Unlimited	Unlimited	\$20,000	\$40,000	–	–	Unlimited	Unlimited	1A									
1B TRAVEL SERVICES PROVIDER INSOLVENCY	\$10,000	\$20,000	\$10,000	\$20,000	\$10,000	\$20,000	\$10,000	\$20,000	\$10,000	\$20,000	1B	\$10,000	\$20,000	\$10,000	\$20,000	–	–	–	–	1B
*2 OVERSEAS EMERGENCY MEDICAL ASSISTANCE/EVACUATION	Unlimited	2	Unlimited	Unlimited	–	–	Unlimited	Unlimited	Unlimited	Unlimited	2									
*3A OVERSEAS EMERGENCY MEDICAL & HOSPITAL EXPENSES	Unlimited	3A	Unlimited	Unlimited	–	–	Unlimited	Unlimited	Unlimited	Unlimited	3A									
3B CONTINUING MEDICAL EXPENSES ON RETURN TO NEW ZEALAND (per person)	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500	3B	\$1,500	\$1,500	–	–	\$1,500	\$1,500	–	–	3B
*4 ADDITIONAL EXPENSES	\$50,000	\$100,000	\$50,000	\$100,000	\$35,000	\$70,000	\$15,000	\$30,000	\$15,000	\$30,000	4	\$50,000	\$100,000	\$10,000	\$20,000	–	–	\$15,000	\$30,000	4
*5 HOSPITAL CASH ALLOWANCE	\$6,000	\$12,000	\$5,000	\$10,000	\$4,000	\$8,000	\$2,000	\$4,000	\$2,000	\$4,000	5	\$6,000	\$12,000	–	–	–	–	\$1,500	\$3,000	5
*6 ACCIDENTAL DEATH	\$25,000	\$50,000	\$25,000	\$50,000	\$15,000	\$30,000	\$10,000	\$20,000	\$10,000	\$20,000	6	\$25,000	\$50,000	\$5,000	\$10,000	–	–	\$10,000	\$20,000	6
*7 PERMANENT DISABILITY	\$50,000	\$100,000	\$25,000	\$50,000	\$15,000	\$30,000	\$10,000	\$20,000	\$10,000	\$20,000	7	\$50,000	\$100,000	–	–	–	–	\$10,000	\$20,000	7
*8 LOSS OF INCOME	\$10,400	\$20,800	\$10,400	\$20,800	\$5,200	\$10,400	\$2,600	\$5,200	\$2,600	\$5,200	8	\$10,400	\$20,800	–	–	–	–	–	–	8
9 LOSS OF TRAVEL DOCUMENTS, CREDIT CARDS AND TRAVELLERS CHEQUES	\$5,000	\$10,000	\$2,500	\$5,000	\$1,500	\$3,000	\$1,000	\$2,000	\$1,000	\$2,000	9	\$5,000	\$10,000	–	–	–	–	\$1,000	\$2,000	9
10 THEFT OF CASH, BANK NOTES, CURRENCY NOTES, POSTAL ORDERS OR MONEY ORDERS	\$250	\$250	\$250	\$250	\$250	\$250	\$250	\$250	\$250	\$250	10	\$250	\$250	–	–	–	–	–	–	10
*11 LUGGAGE AND PERSONAL EFFECTS	\$10,000	\$20,000	\$8,000	\$16,000	\$6,000	\$12,000	\$5,000	\$10,000	\$5,000	\$10,000	11	\$10,000	\$20,000	\$2,000	\$4,000	–	–	\$3,000	\$6,000	11
*12 LUGGAGE AND PERSONAL EFFECTS DELAY EXPENSES	\$500	\$1,000	\$300	\$600	\$250	\$500	\$200	\$400	\$200	\$400	12	\$500	\$1,000	–	–	–	–	\$200	\$400	12
*13 TRAVEL DELAY EXPENSES	\$2,000	\$4,000	\$2,000	\$4,000	\$2,000	\$4,000	\$2,000	\$4,000	\$2,000	\$4,000	13	\$2,000	\$4,000	\$1,000	\$2,000	–	–	\$2,000	\$4,000	13
14 ALTERNATIVE TRANSPORT EXPENSES	\$5,000	\$10,000	\$3,000	\$6,000	\$2,000	\$4,000	\$1,500	\$3,000	\$1,500	\$3,000	14	\$5,000	\$10,000	–	–	–	–	\$1,500	\$3,000	14
15 PERSONAL LIABILITY	\$5 Million	\$5 Million	\$5 Million	\$5 Million	\$1 million	15	\$5 Million	\$5 million	\$1 Million	\$1 Million	\$5 Million	\$5 Million	\$5 Million	\$5 Million	15					
*16 RENTAL VEHICLE EXCESS / RETURN OF VEHICLE	\$8,000	\$8,000	\$4,000	\$4,000	\$4,000	\$4,000	\$4,000	\$4,000	\$4,000	\$4,000	16	\$5,000	\$5,000	\$4,000	\$4,000	–	–	\$2,000	\$2,000	16

* sub-limits apply.

All benefits, Excesses and premiums are in New Zealand Dollars. Amount payable includes premium and GST where applicable.

EXCESS
Refer to “Important Matters” pages 13 to 21.

DUO COVERS – SAVE 5%
If you are travelling with a friend, both of you can save by deducting 5% off the Family premium. Cover is for 2 adults - no cover for Dependants (*Duo cover is not available for Plan B (Annual Multi-Journey)*).

TRAVELLERS 51 YEARS AND OVER
The following additional premiums apply to travellers aged 51 and over where applicable (note: an additional surcharge for Pre-existing Medical Conditions may also apply).
Travellers aged 51-60 years: +15% of premium
Travellers aged 61-70 years: +30% of premium
Travellers aged 71-74 years: +90% of premium
Travellers aged 75-80 years*: +160% of premium
Travellers aged 81-89 years: +375% of premium**
Travellers aged 90 years and over: +450% of premium**

* Not available under Plans B, D or F.
** Not available under Plans B, D, E or F.

BONUS DAYS
Period of Cover
3 days to 24 days 1 day
28 days to 55 days 3 days
2 months to 4 months 5 days
5 months to 11 months 7 days

PLEASE NOTE: Day of travel and day of return are counted as days. Return date shown on your Certificate of Insurance is expiry date - bonus days do not extend beyond the expiry date shown on your Certificate.

Kiwitravelcover

Basic Table of Benefits and Premiums

Select your Plan as per Plan Selection Guide on page 35.

Section	BENEFIT TYPE	BASIC SUPER PLUS		BASIC SUPER		BASIC STANDARD		BASIC ECONOMY (incl Pacific cruising)		BASIC AUSTRALIA/ INDONESIA/FIJI		BASIC DOMESTIC		BASIC ANNUAL MULTI-JOURNEY		BASIC NON-RESIDENTS		Section	
		Single	Family	Single	Family	Single	Family	Single	Family	Single	Family	Single	Family	Single	Family	Single	Family		
*1A	CANCELLATION FEES AND LOST DEPOSITS	\$3,000	\$6,000	\$3,000	\$6,000	\$3,000	\$6,000	\$3,000	\$6,000	\$3,000	\$6,000	1A	\$3,000	\$6,000	\$3,000	\$6,000	\$3,000	\$6,000	1A
1B	TRAVEL SERVICES PROVIDER INSOLVENCY	\$3,000	\$6,000	\$3,000	\$6,000	\$3,000	\$6,000	\$3,000	\$6,000	\$3,000	\$6,000	1B	\$3,000	\$6,000	\$3,000	\$6,000	-	-	1B
*2	OVERSEAS EMERGENCY MEDICAL ASSISTANCE/EVACUATION	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	2	-	-	Unlimited	Unlimited	Unlimited	Unlimited	2
*3A	OVERSEAS EMERGENCY MEDICAL & HOSPITAL EXPENSES	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	3A	-	-	Unlimited	Unlimited	Unlimited	Unlimited	3A
3B	CONTINUING MEDICAL EXPENSES ON RETURN TO NEW ZEALAND (per person)	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500	3B	-	-	\$1,500	\$1,500	-	-	3B
*4	ADDITIONAL EXPENSES	\$5,000	\$10,000	\$5,000	\$10,000	\$5,000	\$10,000	\$5,000	\$10,000	\$5,000	\$10,000	4	\$5,000	\$10,000	\$5,000	\$10,000	\$5,000	\$10,000	4
*5	HOSPITAL CASH ALLOWANCE	\$3,000	\$6,000	\$3,000	\$6,000	\$3,000	\$6,000	\$3,000	\$6,000	\$3,000	\$6,000	5	-	-	\$3,000	\$6,000	\$3,000	\$6,000	5
*6	ACCIDENTAL DEATH	\$10,000	\$20,000	\$10,000	\$20,000	\$10,000	\$20,000	\$10,000	\$20,000	\$10,000	\$20,000	6	\$10,000	\$20,000	\$10,000	\$20,000	\$10,000	\$20,000	6
*7	PERMANENT DISABILITY	\$10,000	\$20,000	\$10,000	\$20,000	\$10,000	\$20,000	\$10,000	\$20,000	\$10,000	\$20,000	7	-	-	\$10,000	\$20,000	\$10,000	\$20,000	7
*8	LOSS OF INCOME	\$5,200	\$10,400	\$5,200	\$10,400	\$5,200	\$10,400	\$5,200	\$10,400	\$5,200	\$10,400	8	-	-	\$5,200	\$10,400	-	-	8
9	LOSS OF TRAVEL DOCUMENTS, CREDIT CARDS AND TRAVELLERS CHEQUES	\$500	\$1,000	\$500	\$1,000	\$500	\$1,000	\$500	\$1,000	\$500	\$1,000	9	-	-	\$500	\$1,000	\$500	\$1,000	9
10	THEFT OF CASH, BANK NOTES, CURRENCY NOTES, POSTAL ORDERS OR MONEY ORDERS	\$250	\$250	\$250	\$250	\$250	\$250	\$250	\$250	\$250	\$250	10	-	-	\$250	\$250	-	-	10
*11	LUGGAGE AND PERSONAL EFFECTS	\$3,000	\$6,000	\$3,000	\$6,000	\$3,000	\$6,000	\$3,000	\$6,000	\$3,000	\$6,000	11	\$1,500	\$3,000	\$3,000	\$6,000	\$1,500	\$3,000	11
*12	LUGGAGE AND PERSONAL EFFECTS DELAY EXPENSES	\$250	\$500	\$250	\$500	\$250	\$500	\$250	\$500	\$250	\$500	12	-	-	\$250	\$500	\$250	\$500	12
*13	TRAVEL DELAY EXPENSES	\$1,000	\$2,000	\$1,000	\$2,000	\$1,000	\$2,000	\$1,000	\$2,000	\$1,000	\$2,000	13	\$1,000	\$2,000	\$1,000	\$2,000	\$1,000	\$2,000	13
14	ALTERNATIVE TRANSPORT EXPENSES	\$2,000	\$4,000	\$2,000	\$4,000	\$2,000	\$4,000	\$2,000	\$4,000	\$2,000	\$4,000	14	-	-	\$2,000	\$4,000	\$2,000	\$4,000	14
15	PERSONAL LIABILITY	\$1 million	\$1 million	\$1 million	\$1 million	\$1 million	\$1 million	\$1 million	\$1 million	\$1 million	\$1 million	15	\$1 million	\$1 million	\$1 million	\$1 million	\$1 million	\$1 million	15
*16	RENTAL VEHICLE EXCESS / RETURN OF VEHICLE	\$2,000	\$2,000	\$2,000	\$2,000	\$2,000	\$2,000	\$2,000	\$2,000	\$2,000	\$2,000	16	\$2,000	\$2,000	\$2,000	\$2,000	\$2,000	\$2,000	16

* sub-limits apply.

All benefits, Excesses and premiums are in New Zealand Dollars. Amount Payable includes premium and GST where applicable.

EXCESS

Refer to "Important Matters" pages 13 to 21.

DUO COVERS – SAVE 5%

If you are travelling with a friend, both of you can save by deducting 5% off the Family premium. Cover is for 2 adults - no cover for Dependants (Duo cover is not available for Basic Annual Multi-Journey).

TRAVELLERS 51 YEARS AND OVER

The following additional premiums apply to travellers aged 51 and over where applicable (note: an additional surcharge for Pre-existing Medical Conditions may also apply).

Travellers aged 51-60 years: +15% of premium

Travellers aged 61-70 years: +30% of premium

Travellers aged 71-74 years: +90% of premium

Travellers aged 75-80 years*: +160% of premium

Travellers aged 81-89 years: +375% of premium**

Travellers aged 90 years and over: +450% of premium**

* Not available under Basic Annual Multi-Journey.

** Not available under Basic Annual Multi-Journey or Basic Non-Resident.

BONUS DAYS

Period of Cover

3 days to 24 days 1 day

28 days to 55 days 3 days

2 months to 4 months 5 days

5 months to 11 months 7 days

PLEASE NOTE: Day of travel and day of return are counted as days. Return date shown on your Certificate of Insurance is expiry date - bonus days do not extend beyond the expiry date shown on your Certificate.

Period	Single	Family	Single	Family	Single	Family	Single	Family	Single	Family	Period	Single	Family	Single	Family	Period
3 days	\$64	\$128	\$49	\$98	\$42	\$84	\$40	\$80	\$34	\$68	3 days	\$30	\$60			3 days
5 days	\$83	\$166	\$62	\$124	\$54	\$108	\$52	\$104	\$45	\$90	5 days	\$42	\$84			5 days
8 days	\$94	\$188	\$71	\$142	\$62	\$124	\$59	\$118	\$51	\$102	8 days	\$52	\$104			8 days
12 days	\$113	\$226	\$85	\$170	\$74	\$148	\$71	\$142	\$62	\$124	12 days	\$57	\$114			12 days
16 days	\$131	\$262	\$97	\$194	\$86	\$172	\$82	\$164	\$71	\$142	16 days	\$62	\$124			16 days
20 days	\$153	\$306	\$114	\$228	\$101	\$202	\$95	\$190	\$82	\$164	20 days	\$66	\$132			20 days
24 days	\$176	\$352	\$131	\$262	\$109	\$218	\$109	\$218	\$95	\$190	24 days	\$72	\$144			24 days
28 days	\$201	\$402	\$150	\$300	\$132	\$264	\$126	\$252	\$109	\$218	28 days	\$77	\$154			28 days
34 days	\$228	\$456	\$170	\$340	\$150	\$300	\$143	\$286	\$124	\$248	34 days	\$82	\$164			34 days
38 days	\$256	\$512	\$191	\$382	\$167	\$334	\$160	\$320	\$138	\$276	38 days	\$87	\$174			38 days
42 days	\$283	\$566	\$211	\$422	\$185	\$370	\$177	\$354	\$153	\$306	42 days	\$92	\$184			42 days
49 days	\$312	\$624	\$232	\$464	\$204	\$408	\$196	\$392	\$169	\$338	49 days	\$101	\$202			49 days
55 days	\$329	\$658	\$246	\$492	\$215	\$430	\$205	\$410	\$177	\$354	55 days	\$109	\$218			55 days
2 months	\$347	\$694	\$260	\$520	\$227	\$454	\$213	\$426	\$184	\$368	2 months	\$122	\$244			2 months
3 months	\$458	\$916	\$344	\$688	\$293	\$586	\$254	\$508	\$220	\$440	3 months	\$143	\$286			3 months
4 months	\$553	\$1,106	\$411	\$822	\$349	\$698	\$330	\$660	\$284	\$568	4 months					4 months
5 months	\$637	\$1,274	\$445	\$890	\$399	\$798	\$382	\$764	\$330	\$660	5 months					5 months
6 months	\$731	\$1,462	\$531	\$1,062	\$478	\$956	\$452	\$904	\$390	\$780	6 months					6 months
7 months	\$844	\$1,688	\$615	\$1,230	\$539	\$1,078	\$500	\$1,000	\$431	\$862	7 months					7 months
8 months	\$937	\$1,874	\$683	\$1,366	\$588	\$1,176	\$553	\$1,106	\$478	\$956	8 months					8 months
9 months	\$1,046	\$2,092	\$762	\$1,524	\$651	\$1,302	\$603	\$1,206	\$521	\$1,042	9 months					9 months
10 months	\$1,135	\$2,270	\$796	\$1,592	\$697	\$1,394	\$646	\$1,292	\$558	\$1,116	10 months					10 months
11 months	\$1,225	\$2,450	\$860	\$1,720	\$758	\$1,516	\$711	\$1,422	\$614	\$1,228	11 months					11 months
12 months	\$1,281	\$2,562	\$896	\$1,792	\$804	\$1,608	\$757	\$1,514	\$654	\$1,308	12 months					12 months

Annual Premium \$341.00 (Single) or \$444.00 (Family)

Covers Sections 1A to 16 while travelling internationally and Sections 1A, 1B, 4 & 6 to 16 while travelling domestically

Worldwide or Domestic Journeys

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

Cover re-instated on the completion of each Journey (except for Section 15 Personal Liability - the amount shown in the Table of Benefits is the most we will pay for all claims combined under Section 15 for the 12 month policy period).

Single or Family* cover
Family cover includes you and:
• your spouse (or de facto partner); or
• your spouse (or de facto partner) and Dependants
* see page 14 for details

Not available for travellers aged 75 years and over

BASIC PLAN SELECTION GUIDE

Below are our Basic range of plans which provide an alternative, at a lower premium, for travellers who do not require the higher benefit limits for most of the benefit types offered under our Traditional plans.

Please ensure you read and understand the differences in the benefits and limits between our Basic and Traditional plans and that you choose the plan which is suitable for your specific needs.

Basic International Plans (Super Plus, Super, Standard, Economy, Australia/Indonesia/Fiji, Annual Multi-Journey & Non-Residents)

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

Basic Super Plus – The Americas, Africa & Worldwide

Basic Super – Europe, Egypt, Japan, Middle East

Basic Standard – United Kingdom, Ireland & Asia (excluding Japan & Indonesia)

Basic Economy – SW Pacific & Indonesia (including Pacific cruising)

Basic Australia/Indonesia/Fiji – Australia, Indonesia & Fiji (excluding cruising to these destinations)

Basic Domestic – Travel within New Zealand

Basic Annual Multi-Journey – Worldwide

Basic Non-Residents – New Zealand

Please note that under Basic Super Plus, Basic Super, Basic Standard, Basic Economy, Basic Australia/Indonesia/Fiji and Basic Annual Multi-Journey, there is only cover under certain Sections while travelling in New Zealand - see below for details. You will also have cover under Section 3B when you return to New Zealand if you suffered an Injury or Sickness during your Overseas Journey:

Basic Super Plus, Basic Super, Basic Standard, Basic Economy & Basic Australia/Indonesia/Fiji

You will only have cover under Sections 1A, 1B, 4, 6, 11, 13, 15 & 16 while travelling in New Zealand.

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

TRAVEL ON CRUISE LINERS

Travellers on domestic cruises in New Zealand waters may purchase Basic Economy to ensure cover is available for emergency medical assistance and emergency medical and Hospital expenses.

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

YOUR POLICY COVER

YOUR CHOICES

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

Whether you choose:

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

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

COVER TYPE

You can choose one of the following cover types:

Single – covers you and your Dependants travelling with you (*this cover type is not available for Plan G (Non-Medical Cover) or Basic Non-Medical Cover*).

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

Family – covers you and the members of your Family travelling with you (*see page 14 for further details for Plan B (Annual Multi-Journey) or Basic Annual Multi-Journey*). The benefit limits for Family cover apply to the total of all claims combined, regardless of the number of persons the claims relate to (*this cover type is not available for Plan G (Non-Medical Cover) or Basic Non-Medical Cover*).

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

The remainder of this section outlines what “We Will Pay” and what “We Will Not Pay” under each Section in the event of a claim.

Section 1A

CANCELLATION FEES AND LOST DEPOSITS

Cover is available under all Plans except Plan D.

(See below & page 37 for details of cover under Section 1A 1.1 c] & e])

1.1 WE WILL PAY

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

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

- c] We will pay the travel agent's cancellation fees, **up to the amounts set out below**, where all monies have been paid, or the maximum amount

of the deposit has been paid, at the time of cancellation. However, we will not pay more than the level of commission or service fees normally earned by the agent, had your Journey not been cancelled. Documentary evidence of the travel agent's fee is required.

The maximum we will pay is as follows:

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

- d] We will pay you for loss of frequent flyer or similar air travel points you used to purchase an airline ticket following cancellation of that air ticket, if you cannot recover the lost points from any other source. The cancellation must be due to unforeseen circumstances outside of your control. We calculate the amount we pay you by multiplying:

- The cost of an equivalent class airline ticket based on the quoted retail price at the time the ticket was issued, less your financial contribution toward the airline ticket;

multiplied by:

- The total number of points lost

divided by the total number of points used to obtain the ticket.

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

- e] If a Relative is hospitalised in New Zealand or Australia, or dies in New Zealand or Australia after the policy is issued as a result of a Pre-existing Medical Condition, we will not cover you unless at the time of policy issue you were unaware of the likelihood of such hospitalisation or death. However, the maximum we will pay under this Section is as follows:

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

The maximum amount we will pay for all claims combined under this Section for Single, Family & Individual cover is shown under the Table of Benefits for the plan you have selected.

For Duo cover, the maximum amount shown for Single cover under the Table of Benefits for the plan you have selected applies to each person.

1.2 WE WILL NOT PAY

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

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

- b] the death, Injury or Sickness of your Relative arising from a Pre-existing Medical Condition, except as specified under Section 1A 1.1 e].
- c] you or your Travelling Companion changing plans.
- d] any business, financial or contractual obligations. This exclusion does not apply to claims where you or your Travelling Companion are made redundant from full-time employment in New Zealand provided you or they were not aware that the redundancy was to occur before you purchased your policy.
- e] a tour operator or wholesaler being unable to complete arrangements for any tour because there were not enough people to go on the tour. This exclusion does not apply in relation to prepaid travel arrangements bought separately to reach the departure point for the tour or other travel arrangements.

- f] delays or rescheduling by a bus line, airline, shipping line or rail authority.
- g] the financial collapse or Insolvency of any transport, tour or accommodation provider.
- h] the mechanical breakdown of any means of transport.
- i] an act or threat of terrorism.
- j] the death, Injury or Sickness of any person who resides outside of New Zealand or Australia, who is not listed on your Certificate of Insurance.
- k] where you are a full-time permanent employee and pre-arranged leave is cancelled by your employer unless you are a full-time member of the New Zealand Defence Force or emergency services.

YOU MUST CHECK “GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS” PAGES 53 TO 55 FOR OTHER REASONS WHY WE WILL NOT PAY.

Section 1B TRAVEL SERVICES PROVIDER INSOLVENCY

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

1.3 WE WILL PAY

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

- a] the value of the unused arrangements, less any refunds due to you, if you have to cancel any prepaid transport or accommodation arrangements booked for your Journey. We will also pay the travel agent’s cancellation fees, up to the amounts set out below, however, we will not pay more than the level of commission or service fees normally earned by the agent, had your Journey not been cancelled. Documentary evidence of the travel agent’s fee is required. The maximum we will pay is as follows:
 - \$2,000 for Single cover
 - \$2,000 per person for Duo cover
 - \$4,000 for Family cover
 - \$2,000 for Individual cover
- b] the Reasonable cost of rearranging your Journey, prior to or after the commencement of your Journey, provided that this cost is not greater than the cancellation fees or lost deposits which would have been incurred had the Journey been cancelled.
- c] the Reasonable additional hotel accommodation and transportation expenses incurred if you have to return Home.

The maximum amount we will pay for all claims combined under this Section for Single, Family & Individual cover is shown under the Table of Benefits for the plan you have selected.

For Duo cover, the maximum amount shown for Single cover under the Table of Benefits for the plan you have selected applies to each person.

1.4 WE WILL NOT PAY

- a] We will not pay for any travel or accommodation not booked while you are in New Zealand.
- b] We will not pay due to the Insolvency of any travel agent, tour wholesaler, tour operator or booking agent.
- c] We will not pay due to the Insolvency of a Travel Services Provider if, at the time the Certificate of Insurance was issued, the Travel Services Provider was Insolvent, or a reasonable person would have reason to expect the Travel Services Provider might become Insolvent. Please visit Kiwitracelcover’s website - www.kiwitracelcover.co.nz - to see the latest Travel Services Provider Insolvency notice.

- d] We will not pay any accommodation expenses incurred after the date you originally planned to return to New Zealand.

YOU MUST CHECK “GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS” PAGES 53 TO 55 FOR OTHER REASONS WHY WE WILL NOT PAY.

Section 2 OVERSEAS EMERGENCY MEDICAL ASSISTANCE/EVACUATION

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

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

Allianz Global Assistance will help you with any Overseas medical emergency (see “Overseas Hospitalisation or Medical Evacuation” on page 20). You may contact them at any time 7 days a week.

2.1 ALLIANZ GLOBAL ASSISTANCE WILL ARRANGE FOR THE FOLLOWING ASSISTANCE SERVICES IF YOU INJURE YOURSELF OVERSEAS, OR BECOME SICK WHILE OVERSEAS

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

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

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

The maximum amount we will pay for all claims combined under this Section for Single & Family cover is shown under the Table of Benefits for the plan you have selected.

For Duo cover, the maximum amount shown for Single cover under the Table of Benefits for the plan you have selected applies to each person.

2.2 WE WILL NOT PAY

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

YOU MUST CHECK “GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS” PAGES 53 TO 55 FOR OTHER REASONS WHY WE WILL NOT PAY.

Section 3A OVERSEAS EMERGENCY MEDICAL & HOSPITAL EXPENSES

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

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

3.1 WE WILL PAY

- a] We will reimburse the Reasonable medical or Hospital expenses you incur until you get back to New Zealand if you Injure yourself Overseas, or become Sick there. The medical or Hospital expenses must have been incurred on the written advice of a Medical Adviser. You must make every effort to keep your medical or Hospital expenses to a minimum. If we determine that you should return Home to New Zealand for treatment and you do not agree to do so, we will pay you the amount which we determine would cover your medical expenses and/or related costs had you agreed to our recommendation.

You will then be responsible for any ongoing or additional costs relating to or arising out of the event you have claimed for.

We will only pay for treatment received and/or Hospital accommodation during the 12 month period after the Sickness first showed itself or the Injury happened.

- b] We will also pay the cost of emergency dental treatment, **up to the maximum amount shown below for the plan selected**, for dental costs incurred which the treating dentist certifies in writing is for the relief of sudden and acute pain to sound and natural teeth.

Plans A, B, D & E

- \$1,000 per person

Basic Super Plus, Basic Super, Basic Standard, Basic Economy, Basic Australia/Indonesia/Fiji, Basic Annual Multi-Journey & Basic Non-Residents

- \$500 per person

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

The maximum amount we will pay for all claims combined under this Section for Single & Family cover is shown under the Table of Benefits for the plan you have selected.

For Duo cover, the maximum amount shown for Single cover under the Table of Benefits for the plan you have selected applies to each person.

3.2 WE WILL NOT PAY

We will not pay for expenses:

- a] when you have not notified Allianz Global Assistance as soon as practicable of your admittance to Hospital.
- b] after 2 weeks treatment by a chiropractor, physiotherapist or dentist unless approved by Allianz Global Assistance.
- c] if you do not take the advice of Allianz Global Assistance.
- d] if you have received medical care under a reciprocal national health scheme. Please refer to www.health.govt.nz/new-zealand-health-system for further information on reciprocal national health schemes.
- e] for damage to dentures, dental prostheses, bridges or crowns.
- f] relating to dental treatment involving the use of precious metals or for cosmetic dentistry.

YOU MUST CHECK "GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS" PAGES 53 TO 55 FOR OTHER REASONS WHY WE WILL NOT PAY.

Section 3B CONTINUING MEDICAL EXPENSES ON RETURN TO NEW ZEALAND

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

3.3 WE WILL PAY

We will reimburse up to \$1,500 per person for continuing registered medical, surgical and Hospital treatment upon your return to New Zealand. This treatment must be provided in a public Hospital, where available.

However, if you did not receive any medical, surgical and/or Hospital treatment prior to your return to New Zealand, you must seek your treatment within 72 hours of your arrival in New Zealand. In the event of an Injury, you must register with ACC (Accident Compensation Corporation) on your return to New Zealand.

The maximum amount we will pay for all claims combined under this Section for Single & Family cover is shown under the Table of Benefits for the plan you have selected.

For Duo cover, the maximum amount shown for Single cover under the Table of Benefits for the plan you have selected applies to each person.

3.4 WE WILL NOT PAY

We will not pay for expenses:

- a] when you have not notified Allianz Global Assistance as soon as practicable of your admittance to Hospital.
- b] after 2 weeks treatment by a chiropractor or physiotherapist unless approved by Allianz Global Assistance.
- c] if you do not take the advice of Allianz Global Assistance.
- d] if you have received private medical care in New Zealand when public care or treatment is available.

YOU MUST CHECK "GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS" PAGES 53 TO 55 FOR OTHER REASONS WHY WE WILL NOT PAY.

Section 4 ADDITIONAL EXPENSES

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

(See page 42 for details of cover under Section 4.1 d] & e])

4.1 WE WILL PAY

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

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

We will also reimburse the Reasonable accommodation and travel expenses of your Travelling Companion or a Relative to travel to you, stay near you or escort you, if you are in Hospital suffering from a life threatening or other serious condition, or are evacuated for medical reasons. He or she must travel, stay with you or escort you on the written advice of a Medical Adviser and with the prior approval of Allianz Global Assistance.

- b] If you shorten your Journey and return to New Zealand on the written advice of a Medical Adviser approved by Allianz Global Assistance, we will reimburse the Reasonable cost of your return to New Zealand. We

will only pay the cost of the fare class that you had planned to travel at and you must take advantage of any pre-arranged return travel to New Zealand.

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

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

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

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

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

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

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

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

e] If, as a result of a Pre-existing Medical Condition, a Relative of yours is hospitalised in New Zealand or Australia, or dies in New Zealand or Australia after the policy is issued, and at the time of policy issue you were unaware of the likelihood of such hospitalisation or death, we will pay for the Reasonable additional cost of your return to New Zealand and/or the cost of airfares for you to return to the place you were when your Journey was interrupted. The most we will pay for all events under this benefit is as follows:

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

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

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

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

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

WE WILL ALSO PAY FOR THE FOLLOWING REASONS

g] You are prevented from skiing at a pre-booked ski resort for more than 24 continuous hours during your Journey, because adverse snow conditions cause a total closure of the lift system. However:

1. we will not pay for claims relating to ski resorts that do not have skiing facilities greater than 1,000 metres above sea level.
2. we will not pay for claims arising outside the period 15 December to 31 March in Northern Hemisphere resorts, and 15 June to 30 September in Southern Hemisphere resorts.

We will pay a daily benefit of \$100 for Single or Individual cover, \$100 per person for Duo cover, or \$200 for Family cover. The maximum amount we will pay for all claims combined is \$500 for Single or Individual cover, \$500 per person for Duo cover or \$1,000 for Family cover.

h] We will reimburse you for the costs of hiring alternative ski and/or golf equipment following:

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

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

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

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

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

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

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

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

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

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

The maximum amount we will pay for all claims combined under this Section for Single, Family & Individual cover is shown under the Table of Benefits for the plan you have selected.

For Duo cover, the maximum amount shown for Single cover under the Table of Benefits for the plan you have selected applies to each person.

4.2 WE WILL NOT PAY

We will not pay:

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

YOU MUST CHECK "GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS" PAGES 53 TO 55 FOR OTHER REASONS WHY WE WILL NOT PAY.

Section 5 HOSPITAL CASH ALLOWANCE

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

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

5.1 WE WILL PAY

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

The maximum amount we will pay for all claims combined under this Section for Single & Family cover is shown under the Table of Benefits for the plan you have selected.

For Duo cover, the maximum amount shown for Single cover under the Table of Benefits for the plan you have selected applies to each person.

5.2 WE WILL NOT PAY

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

YOU MUST CHECK "GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS" PAGES 53 TO 55 FOR OTHER REASONS WHY WE WILL NOT PAY.

Section 6 ACCIDENTAL DEATH

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

6.1 WE WILL PAY

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

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

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

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

The maximum amount we will pay for all claims combined under this Section for Single, Family & Individual cover is shown under the Table of Benefits for the plan you have selected.

For Duo cover, the maximum amount shown for Single cover under the Table of Benefits for the plan you have selected applies to each person.

6.2 WE WILL NOT PAY

YOU MUST CHECK "GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS" PAGES 53 TO 55 FOR REASONS WHY WE WILL NOT PAY.

Section 7 PERMANENT DISABILITY

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

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

7.1 WE WILL PAY

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

For the purposes of Section 7, '*Permanently disabled*' means:

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

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

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

The maximum amount we will pay for all claims combined under this Section for Single, Family & Individual cover is shown under the Table of Benefits for the plan you have selected.

For Duo cover, the maximum amount shown for Single cover under the Table of Benefits for the plan you have selected applies to each person.

7.2 WE WILL NOT PAY

YOU MUST CHECK “GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS” PAGES 53 TO 55 FOR REASONS WHY WE WILL NOT PAY.

Section 8 LOSS OF INCOME

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

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

8.1 WE WILL PAY

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

The maximum amount we will pay for all claims combined under this Section for Single & Family cover is shown under the Table of Benefits for the plan you have selected.

For Duo cover, the maximum amount shown for Single cover under the Table of Benefits for the plan you have selected applies to each person.

8.2 WE WILL NOT PAY

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

YOU MUST CHECK “GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS” PAGES 53 TO 55 FOR OTHER REASONS WHY WE WILL NOT PAY.

Section 9 LOSS OF TRAVEL DOCUMENTS, CREDIT CARDS AND TRAVELLERS CHEQUES

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

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

9.1 WE WILL PAY

- a] We will reimburse you the replacement costs (including communication costs) of any travel documents, including passports, credit cards or travellers cheques you lose or which are stolen from you during your Journey.
- b] We will also cover loss resulting from the fraudulent use of any credit card held by you following the loss of the card during your Journey. We will only cover those amounts not covered by any guarantee given by the bank or issuing company to you as the cardholder covering such losses.

The maximum amount we will pay for all claims combined under this Section for Single, Family & Individual cover is shown under the Table of Benefits for the plan you have selected.

For Duo cover, the maximum amount shown for Single cover under the Table of Benefits for the plan you have selected applies to each person.

9.2 WE WILL NOT PAY

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

- a] You do not report the theft within 24 hours to the police and, in the case of credit cards and travellers cheques, to the issuing bank or

company in accordance with the conditions under which the cards or cheques were issued; and

- b] You cannot provide us with a written statement from the police or the issuing bank or company as required by a] above.

YOU MUST CHECK “GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS” PAGES 53 TO 55 FOR OTHER REASONS WHY WE WILL NOT PAY.

Section 10 THEFT OF CASH, BANK NOTES, CURRENCY NOTES, POSTAL ORDERS OR MONEY ORDERS

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

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

10.1 WE WILL PAY

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

The maximum amount we will pay for all claims combined under this Section for Single, Family & Individual cover is shown under the Table of Benefits for the plan you have selected.

For Duo cover, the maximum amount shown for Single cover under the Table of Benefits for the plan you have selected applies to each person.

10.2 WE WILL NOT PAY

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

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

YOU MUST CHECK “GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS” PAGES 53 TO 55 FOR OTHER REASONS WHY WE WILL NOT PAY.

Section 11 LUGGAGE AND PERSONAL EFFECTS

Cover is available under all Plans except Plans D & F.
(See below for details of cover under Section 11.1 d)]

PLEASE NOTE: for the purpose of this Section:

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

11.1 WE WILL PAY

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

When calculating the amount payable we will apply depreciation due to age, wear and tear for each item. The amount of such depreciation will be determined by us. No depreciation will be applied to goods purchased duty free prior to your departure or goods purchased during your Journey.

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

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

Plans A, B & G

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

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

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

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

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

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

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

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

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

However, the limits set out below, as per the plan selected, will apply (*this limitation of cover applies to all items even if you have purchased "Specified Luggage and Personal Effects Cover"*):

Plans A, B, E, G

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

Plan C

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

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

The maximum amount we will pay for all claims combined under this Section for Single, Family & Individual cover is shown under the Table of Benefits for the plan you have selected.

For Duo cover, the maximum amount shown for Single cover under the Table of Benefits for the plan you have selected applies to each person.

We will also pay up to the limits(s) shown on your Certificate of Insurance for any additional cover purchased under "Specified Luggage and Personal Effects Cover", up to a maximum of \$5,000.

11.2 WE WILL NOT PAY

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

- a] you do not report the loss, theft or misplacement within 24 hours to the police or an office of the bus line, airline, shipping line or rail authority you were travelling on when the loss, theft or misplacement occurred. You must prove that you made a report by providing us with a written statement from whoever you reported it to.
- b] your jewellery, mobile phone, camera, video camera, personal computer, computer equipment or their accessories are checked in to be held and transported in the cargo hold of any aircraft, ship, train, tram or bus (including any loss from the point of check-in until receipt of the said goods).
- c] the loss, theft or damage is to, or of, bicycles.
- d] the loss, theft or damage is to or of cash, bank or currency notes, cheques or negotiable instruments.
- e] the loss, theft or damage is to, or of, items left behind in any hotel or motel room after you have checked out, or items left behind in any aircraft, ship, train, tram, taxi or bus.
- f] the loss, theft or damage is to, or of, watercraft of any type (other than surfboards).
- g] the Luggage and Personal Effects were being sent unaccompanied or under a freight contract.
- h] the loss or damage arises from any process of cleaning, repair or alteration.
- i] the loss of or damage arises from ordinary wear and tear, deterioration, atmospheric or weather conditions, insects, rodents or vermin.
- j] the Luggage and Personal Effects were left Unsupervised in a Public Place.
- k] the Luggage and Personal Effects were left unattended in a motor vehicle unless they were left in a Concealed Storage Compartment of a locked motor vehicle.
- l] the Luggage and Personal Effects were left overnight in a motor vehicle even if they were left in a Concealed Storage Compartment of a locked motor vehicle.
- m] the Luggage and Personal Effects have an electrical or mechanical breakdown.
- n] the Luggage and Personal Effects are fragile, brittle or an electronic component is broken or scratched – unless either:
 - it is the lens of spectacles, binoculars or photographic or video equipment; or
 - the breakage or scratch was caused by a crash involving a vehicle in which you are travelling.
- o] you are entitled to be reimbursed by the bus line, airline, shipping line or rail authority you were travelling on when the loss, theft, misplacement or damage occurred. However, if you are not reimbursed the full amount of your claim, we will pay the difference between the amount of your loss and what you were reimbursed, up to the limit of your cover (allowing for depreciation due to age, wear and tear).
- p] damage to sporting equipment while in use (including surfboards).

YOU MUST CHECK "GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS" PAGES 53 TO 55 FOR OTHER REASONS WHY WE WILL NOT PAY.

Section 12

LUGGAGE AND PERSONAL EFFECTS DELAY EXPENSES

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

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

12.1 WE WILL PAY

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

Your claim must contain written proof from the Carrier who was responsible for your Luggage and Personal Effects that they were delayed, misdirected or misplaced. We will deduct any amount we pay you under this Section for any subsequent claim for lost Luggage and Personal Effects (Section 11).

The maximum amount we will pay for all claims combined under this Section for Single, Family & Individual cover is shown under the Table of Benefits for the plan you have selected.

For Duo cover, the maximum amount shown for Single cover under the Table of Benefits for the plan you have selected applies to each person.

12.2 WE WILL NOT PAY

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

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

YOU MUST CHECK "GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS" PAGES 53 TO 55 FOR OTHER REASONS WHY WE WILL NOT PAY.

Section 13

TRAVEL DELAY EXPENSES

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

13.1 WE WILL PAY

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

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

The maximum amount we will pay for all claims combined under this Section for Single, Family & Individual cover is shown under the Table of Benefits for the plan you have selected.

For Duo cover, the maximum amount shown for Single cover under the Table of Benefits for the plan you have selected applies to each person.

13.2 WE WILL NOT PAY

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

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

Nor will we pay if:

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

YOU MUST CHECK "GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS" PAGES 53 TO 55 FOR OTHER REASONS WHY WE WILL NOT PAY.

Section 14

ALTERNATIVE TRANSPORT EXPENSES

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

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

14.1 WE WILL PAY

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

The maximum amount we will pay for all claims combined under this Section for Single, Family & Individual cover is shown under the Table of Benefits for the plan you have selected.

For Duo cover, the maximum amount shown for Single cover under the Table of Benefits for the plan you have selected applies to each person.

14.2 WE WILL NOT PAY

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

YOU MUST CHECK "GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS" PAGES 53 TO 55 FOR OTHER REASONS WHY WE WILL NOT PAY.

Section 15

PERSONAL LIABILITY

Cover is available under all Plans except Plan F.

15.1 WE WILL PAY

We will cover your legal liability for payment of compensation in respect of:

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

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

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

You must not admit fault or liability for the claim, or incur any legal costs without Allianz Global Assistance's prior written approval.

The maximum amount we will pay for all claims combined under this Section for Single, Family & Individual cover is shown under the Table of Benefits for the plan you have selected.

For Duo cover, the maximum amount shown for Single cover under the Table of Benefits for the plan you have selected applies to each person.

15.2 WE WILL NOT PAY

We will not pay for any amount you become legally liable to pay if the claim arises directly or indirectly from, or is in any way connected with, or is for:

- a] bodily injury to you, your Travelling Companion, or to a Relative or employee of either of you;

- b] damage to property belonging to you, or in your care or control, or belonging to, or in the care or control of, your Relative or your Travelling Companion, or to an employee of either of you;
- c] the ownership, custody or use of any aerial device, watercraft or mechanically propelled vehicle;
- d] the conduct of a business, profession or trade;
- e] any loss, damage or expenses which are covered or should have been covered under a statutory or compulsory insurance policy, statutory or compulsory insurance or compensation scheme or fund, or under Workers' Compensation Legislation, an industrial award or agreement, or Accident Compensation Legislation;
- f] any fine or penalty, or aggravated, punitive, exemplary or liquidated damages;
- g] disease that is transmitted by you;
- h] any relief or recovery other than monetary amounts;
- i] a contract that imposes on you a liability which you would not otherwise have;
- j] assault and/or battery committed by you or at your direction; or
- k] conduct intended to cause bodily injury, property damage or liability with reckless disregard for the consequences of you or any person acting with your knowledge, consent or connivance.

YOU MUST CHECK "GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS" PAGES 53 TO 55 FOR OTHER REASONS WHY WE WILL NOT PAY.

Section 16 RENTAL VEHICLE EXCESS / RETURN OF RENTAL VEHICLE

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

16.1 WE WILL PAY

- a] We will reimburse the Rental Vehicle insurance excess or the cost of repairing the Rental Vehicle, whichever is the lesser, if, during the Journey, the Rental Vehicle is involved in a motor vehicle accident while you are driving, or is damaged or stolen while in your custody. You must provide a copy of the repair account and/or quote.
This cover does not take the place of Rental Vehicle insurance and only provides cover for the excess component up to the applicable benefit limit.
- b] We will also pay up to \$500 for the cost of returning your Rental Vehicle to the nearest depot, if your attending Medical Adviser certifies in writing that you are unfit to do so during your Journey.

The maximum amount we will pay for all claims combined under this Section for Single, Duo, Family & Individual cover is shown under the Table of Benefits for the plan you have selected. The amount applies to the total of all claims combined, regardless of the number of persons the claims relate to.

16.2 WE WILL NOT PAY

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

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

YOU MUST CHECK "GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS" PAGES 53 TO 55 FOR OTHER REASONS WHY WE WILL NOT PAY.

GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS

We will not pay under any circumstances if:

GENERAL

1. you do not act in a responsible way to protect yourself and your property and to avoid making a claim.
2. you do not do everything you can to reduce your loss as much as possible.
3. your claim is for consequential loss of any kind, including loss of enjoyment.
4. at the time of purchasing the policy, you were aware of something that would give rise to you making a claim under this policy.
5. your claim is for a loss which is recoverable by compensation under the Accident Compensation Scheme, any other workers compensation or transport accident laws, government sponsored fund, plan, or medical benefit scheme, or any other similar type legislation required to be effected by or under a law.
6. your claim arises from errors or omissions in any booking arrangements or failure to obtain the relevant visa, passport or travel documents.
7. your claim arises from the refusal, failure or inability of any person, company or organisation (including but not limited to any airline, or other transportation provider, hotel, car rental agency, tour or cruise operator, travel wholesaler, booking agent or other provider of travel or tourism related services, facilities or accommodation), to provide services, facilities or accommodation, by reason of their own Insolvency or the Insolvency of any person, company or organisation with whom or with which they deal except as provided under Section 1B (*Travel Services Provider Insolvency*).
8. Your claim arises because you act illegally or break any government prohibition or regulation including visa requirements.
9. Your claim arises from a government authority confiscating, detaining or destroying anything.
10. Your claim arises from being in control of a Motorcycle unless:
 - you are licensed to drive a Motorcycle under a current New Zealand motorcycle licence or a current International Driving Permit, or
 - you are a passenger travelling on a Motorcycle that is in the control of a person who holds a current motorcycle licence valid for the country you are travelling in.
11. Your claim arises from being in control of a Moped or Scooter unless:
 - you are licensed to drive a Moped or Scooter under a current New Zealand motorcycle or drivers licence, or a current International Driving Permit; or
 - you are a passenger travelling on a Moped or Scooter that is in the control of a person who holds a current motorcycle or drivers licence valid for the country you are travelling in.
12. Your claim arises from, is related to or associated with:
 - an actual or likely Epidemic or Pandemic; or
 - the threat of an Epidemic or Pandemic.

Refer to www.who.int and www.safetravel.govt.nz for further information on Epidemics and Pandemics.

13. Your claim arises because you did not follow advice in the mass media or any government or other official body's warning:
 - against travel to a particular country or parts of a country; or
 - of a strike, riot, bad weather, civil protest or contagious disease (including an Epidemic or Pandemic);
 and you did not take appropriate action to avoid or minimise any potential claim under your policy (including delay of travel to the country or part of the country referred to in the warning).
 Refer to www.who.int and www.safetravel.govt.nz for further information.
14. Your claim arises from any act of war, whether war is declared or not, or from any rebellion, revolution, insurrection or taking of power by the military.
15. Your claim arises from a nuclear reaction or contamination from nuclear weapons or radioactivity.
16. Your claim arises from biological and/or chemical materials, substances, compounds or the like used directly or indirectly for the purpose to harm or to destroy human life and/or create public fear.

MEDICAL

17. Your claim arises directly or indirectly from, or is in any way connected with any Pre-existing Medical Condition of any person including you, your Travelling Companion or a Relative except as provided under Section 1A 1.1 e] (page 37) and Section 4.1 e] (page 42). This exclusion will not apply:
 - a] if you satisfy the provisions as set out under the heading '*Pre-existing Medical Conditions which may be covered with no additional premium payable*' (as set out on pages 11 & 12), or
 - b] as provided in your Medical Terms of Cover letter and from the time any additional premium that applies has been received by us for Pre-existing Medical Conditions for which you must apply for cover and for which approval has been given by us. Special conditions, limits and Excesses may apply if we notify you in writing.
18. Your claim arises from, is related to or associated with any signs or symptoms that you were aware of before cover commenced, but:
 - a] you had not yet sought a medical opinion regarding the cause; or
 - b] you were currently under investigation to define a diagnosis; or
 - c] you were awaiting specialist opinion.
19. Your claim is in respect of travel booked or undertaken even though you know you are unfit to travel, travel against medical advice, travel to obtain medical treatment or you arrange to travel when you know of circumstances that could lead to the Journey being disrupted or cancelled.
20. Your claim arises from any Injury or Sickness where a metastatic or terminal prognosis was made prior to the issue of the Certificate of Insurance.
21. Your claim arises from, or is in any way connected with, complications following elective surgery.
22. Your claim arises out of pregnancy, childbirth or related complications, unless it is a single uncomplicated pregnancy (up to and including 23 weeks), or we have agreed in writing to provide cover. In any event we will not pay medical expenses for:
 - regular antenatal care;
 - childbirth at any gestation; or
 - care of the newborn child.

23. Your claim involves a hospital where you are being treated for addiction to drugs or alcohol, or are using it as a nursing, convalescent or rehabilitation place.
24. Your claim involves the cost of medication in use at the time the Journey began or the cost for maintaining a course of treatment you were on prior to the Journey.
25. Your claim arises from, or is in way related to, mental illness as defined by DSM, including:
 - a] dementia, depression, anxiety, stress or other nervous condition; or
 - b] conditions that have resulted in behavioural issues; or
 - c] a therapeutic or illicit drug or alcohol addiction.
26. Your claim arises from suicide or attempted suicide.
27. Your claim arises directly or indirectly from, or is in any way connected with, a sexually transmitted disease or virus, unless we have agreed in writing to provide cover as set out in your Medical Terms of Cover letter and you have paid any additional premium that applies.
28. You were under the influence of any intoxicating liquor or drugs except a drug prescribed to you by a Medical Adviser, and taken in accordance with their instructions.
29. Despite Allianz Global Assistance's advice otherwise following your call to them, you received private hospital or medical treatment where public funded services or care is available in New Zealand or under any Reciprocal Health Agreement between the Government of New Zealand and the government of any other country.
30. Your claim arises from any medical procedures in relation to AICD/ICD insertion during Overseas travel. If you, your Travelling Companion or a Relative (as listed on your Certificate of Insurance) requires this procedure, due to sudden and acute onset which occurs for the first time during your period of cover and not directly or indirectly related to a Pre-existing Medical Condition, Allianz Global Assistance will exercise their right to organise a repatriation to New Zealand for this procedure to be completed.
31. Your claim arises from or is any way related to the death or hospitalisation of any person aged 85 years and over, who is not listed on the Certificate of Insurance, regardless of the country in which they may live.

SPORTS AND LEISURE

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

CLAIMS

HOW TO MAKE A CLAIM

You must give Allianz Global Assistance notice of your claim as soon as possible by calling them on 0800 630 117. If there is a delay in claim notification, or you do not provide them with sufficient detail to process your claim, they can reduce your claim by the amount of prejudice they have suffered because of the delay.

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

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

CLAIMS ARE PAYABLE IN NEW ZEALAND DOLLARS TO YOU

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

DEPRECIATION

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

YOU MUST NOT ADMIT FAULT OR LIABILITY

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

YOU MUST HELP US TO RECOVER ANY MONEY WE HAVE PAID

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

IF YOU CAN CLAIM FROM ANYONE ELSE, WE WILL ONLY MAKE UP THE DIFFERENCE

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

OTHER INSURANCE

If any loss, damage or liability covered under this policy is covered by another insurance policy, you must give us details. We will only make any payment under this policy once the other insurance policy is exhausted.

If we have paid your claim in full first, we may seek contribution from your other insurer. You must give Allianz Global Assistance any information they reasonably ask for to help us make a claim from your other insurer.

SUBROGATION

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

RECOVERY

Allianz Global Assistance will apply any money they recover from someone else under a right of subrogation in the following order:

1. to Allianz Global Assistance, their administration and legal costs arising from the recovery.
2. to us, an amount equal to the amount that we paid to you under the policy.
3. to you, your uninsured loss (less any Excess).
4. to you, your Excess.

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

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

FRAUD

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

You can help by reporting insurance fraud by calling Allianz Global Assistance on +61 7 3305 8871. All information will be treated as confidential and protected to the full extent under law.

KiwiTravelcover Application Form

Please do not detach. Return the entire brochure to your agent. If you have insufficient space to complete your answers, please attach a separate sheet.

Traveller's details

			/ /
INSURED'S SURNAME	FIRST NAME	TITLE	DATE OF BIRTH
			/ /
INSURED'S SURNAME	FIRST NAME	TITLE	DATE OF BIRTH

Children's details

			/ /
INSURED'S SURNAME	FIRST NAME	TITLE	DATE OF BIRTH
			/ /
INSURED'S SURNAME	FIRST NAME	TITLE	DATE OF BIRTH
			/ /
INSURED'S SURNAME	FIRST NAME	TITLE	DATE OF BIRTH
			/ /
INSURED'S SURNAME	FIRST NAME	TITLE	DATE OF BIRTH

Traveller's contact details

RESIDENTIAL ADDRESS			
SUBURB	STATE	POSTCODE	
EMAIL			
PHONE (AFTER HOURS)	PHONE (BUSINESS HOURS)	PHONE (MOBILE)	

Travel details

/ /	/ /
DEPARTURE DATE	RETURN DATE / EXPIRY DATE
PERIOD OF TRAVEL (DAYS/MONTHS)	
MAJOR DESTINATIONS	

Cover required Single Duo Family
 Individual (applies to Plan G (Non-Medical Cover & Basic Non-Medical Cover only))

Plan selected - Traditional

PLAN A	<input type="checkbox"/> Super Plus <input type="checkbox"/> Super <input type="checkbox"/> Standard	Base Premium
	<input type="checkbox"/> Economy <input type="checkbox"/> Australia/Indonesia/Fiji	\$
PLAN B	Annual Multi-Journey	<input type="checkbox"/> \$
PLAN C	Domestic	<input type="checkbox"/> \$
PLAN D	Medical & Liability	<input type="checkbox"/> \$
PLAN E	Non-Residents	<input type="checkbox"/> \$
PLAN F	Domestic Advance Purchase	<input type="checkbox"/> \$
PLAN G	Non-Medical Cover	<input type="checkbox"/> \$

OR

Plan selected - Basic

<input type="checkbox"/> Basic Super Plus <input type="checkbox"/> Basic Super <input type="checkbox"/> Basic Standard	
<input type="checkbox"/> Basic Economy <input type="checkbox"/> Basic Australia/Indonesia/Fiji	\$
Basic Annual Multi-Journey	<input type="checkbox"/> \$
Basic Domestic	<input type="checkbox"/> \$
Basic Non-Residents	<input type="checkbox"/> \$
Basic Non-Medical Cover	<input type="checkbox"/> \$

Additional costs

Pre-existing Medical Conditions

You are not automatically covered for Pre-existing Medical Conditions. Please refer to the definition of, and guidelines for, Pre-existing Medical Conditions on pages 9 to 12 of the Policy Wording.

- Do you have any Pre-existing Medical Conditions (as outlined in the Policy Wording)? Yes No
- Are any of your Pre-existing Medical Conditions listed on page 10 under the heading 'Medical conditions/circumstances which automatically exclude all cover for medical or hospital expenses'? Yes No

If 'Yes', please note that we are unable to offer a travel insurance policy that provides any benefits for medical or hospital expenses whatsoever.

If you have any of the conditions/circumstances which are excluded, travel insurance is still available to you if you purchase Plan G (Non-Medical Cover) or Basic Non-Medical Cover, however, there will be no provision to claim under certain sections of the policy for any claims arising from, related to or associated with any Injury or Sickness suffered by you. Please refer to the "Pre-existing Medical Conditions" section of the Policy Wording for details (pages 10 to 12).

- Are all of your Pre-existing Medical Conditions listed on pages 11 & 12 under the heading 'Pre-existing Medical Conditions which may be covered with no additional premium payable?' (not available Plan G or Basic Non-Medical Cover) Yes No

If 'Yes', we will provide automatic cover for the Pre-existing Medical Conditions listed, at no additional premium, provided you have not been hospitalised (including Day Surgery or Emergency Department attendance) for the condition(s) in the past 18 months.

- Do you have a Pre-existing Medical Condition which is not listed on pages 10 to 12, and for which you would like to apply for cover for the Journey? (not available Plans D, E, F, G, Basic Non-Residents or Basic Non-Medical Cover) Yes No

If 'Yes', please contact your KiwiTravelcover agent.

If your application for cover is approved, an additional premium may be payable.

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

- you do not apply for cover; or
- you apply for cover and we do not agree to provide cover; or
- we agree to provide cover and you do not pay the relevant additional premium, we will not pay any claims arising from, related to or associated with your Pre-existing Medical Condition.

- If approved, what is your medical assessment number? _____ / _____

Approved Pre-existing Medical Conditions premium(s) \$

Travellers 51-74 years additional premium(s) \$

Travellers 75 years or over additional premium(s) \$

Approval Code(s) _____ / _____

Specified Luggage and Personal Effects Cover (not available under Plans D, E, F or Basic Non-Residents)

Item	Sum Insured \$
------	----------------

Item	Sum Insured \$
------	----------------

Item	Sum Insured \$
------	----------------

Total Sum Insured \$ _____ \$

Removal of Standard Excess (not available under Plan F) \$

TOTAL COST \$ _____

Declaration

- I/we acknowledge that a copy of the Policy Wording was provided to me/us before I/we applied for this insurance, and that I/we have made the decision to purchase the policy after carefully reading the terms, conditions and exclusions contained in the Policy Wording, and agree that this product is suitable for my/our needs.
- I/we acknowledge that I/we have read and understood the Duty of Disclosure and the consequences of non-disclosure.

- I/we authorise any doctor or clinic to provide Allianz Global Assistance with information concerning my/our current or past medical history. I/we have read the Privacy Notice and I/we consent to the collection, use and disclosure of my/our personal information by Allianz or Allianz Global Assistance to such persons and for such purposes stated in the Privacy Notice.
- I/we acknowledge that this policy does not automatically provide cover for Pre-existing Medical Conditions.

- I/we agree to abide with the terms and conditions of this policy and confirm that the above information is correct.

Insured/Sponsor Signature _____ Date _____

Insured/Sponsor Signature _____ Date _____

If Duo cover has been selected, both insureds must sign.

CLAIMS GUARANTEE

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

SALES AND GENERAL ENQUIRIES

Kiwitravelcover Ltd

Company No. 4615979

Business No. 9429030084971

PO Box 106814

Auckland City 1143

(Level 7/C, 17 Albert Street, Auckland CBD 1010)



Ph: 09 281 5581 or 0800 101 007

Fax: 09 358 0708

sales@kiwitravelcover.co.nz

www.kiwitravelcover.co.nz

CLAIMS ENQUIRIES

0800 630 117 (within New Zealand)

KIWITRAVELCOVER MEDICAL ASSESSMENT LINE

Ph: 09 281 5586 or 0800 101 008

24 HOUR EMERGENCY ASSISTANCE CALL

Allianz Global Assistance

+61 7 3305 7499 (reverse charge from overseas)

0800 778 103 (within New Zealand)

Agency Details

Name/Company :

Phone :

Consultant :

This insurance is issued and managed by
AGA Assistance Australia Pty Ltd ABN 52 097 227 177,
(incorporated in Australia), trading as Allianz Global Assistance
74 High Street, Toowong QLD 4066, Australia

This insurance is underwritten by
Allianz Australia Insurance Limited ABN 15 000 122 850,
(incorporated in Australia), trading as Allianz New Zealand
Level 1, 152 Fanshawe Street, Auckland, 1010

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