Travel Guard®
Travel Insurance
Terms & Conditions

Multi Risk Travel insurance
Single Trip 102-4440
Annual Travel Insurance 102-5193
Travel Guard® TRAVEL INSURANCE
Travel insurance covering personal injury is always highly recommended. Travel Guard travel insurances help when sudden and unpleasant changes interfere during your travel. You can choose cover that suits your needs best; single trip cover or annual cover with the full multi risk element such as medical expenses due to sickness or accident, loss of baggage, trip cancellation, trip delay, legal expenses and personal liability. If you need only product that covers sudden medical expenses for travel illness or accident, choose our medical expenses only products.

Travel Guard’s travel insurances are available for everyone under 80 years of age living permanently in Estonia and have to have Estonian ID code.

AIG is subject to compliance with US sanctions laws. For this reason, this policy does not cover any loss, injury, damage or liability, benefits or services directly or indirectly arising from or relating to a planned or actual trip to or through Cuba, Iran, Syria, Sudan, North Korea or the Crimea region. In addition, this policy does not cover any loss, injury, damage or liability to residents of Cuba, Iran, Syria, Sudan, North Korea or the Crimea region. Lastly, this policy will not cover any loss, injury, damage or legal liability sustained directly or indirectly by any individual or entity identified on any applicable government watch lists as a supporter of terrorism, narcotics or human trafficking, piracy, proliferation of weapons of mass destruction, organized crime, malicious cyber activity, or human rights abuses.

If case of any questions related to insurance please contact AIG customer services +372 6 867 800.

In case of injury we recommend the insured to first meet minor costs themselves, such as normal medical treatments and medical examinations, and then subsequently apply for indemnity from AIG Europe Limited. In serious medical emergencies the insured should contact SOS Emergency Service +45 7010 5054 (24/7/365).

PLEASE NOTE THAT THE INSURED CANNOT APPLY FOR INDEMNITY FROM SICKNESS OF WHICH THE INSURED WAS AWARE OF BEFORE BUING THE INSURANCE.

*This brochure does not replace the insurance conditions. Please read below the complete insurance terms and conditions and exclusions.
TRAVEL GUARD® Travel Insurance, Terms & Conditions, valid from 16th August 2016

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AIG CUSTOMER SERVICE
If you have questions regarding the insurance or would like more information, please contact:

AIG Customer Service
Transom Este OÜ
Tel.: +372 6 867 800
Fax: +372 6 737 242
E-mail: aig@transcom-estonia.ee
Telephone service hours Mon-Fri 9am–8pm, Sat 9am–4pm

EMERGENCY ASSISTANT SERVICE
If you require medical emergency assistance on your trip, contact
Emergency Assistant Service SOS International AS
Copenhagen, Denmark
Tel.: +45 7010 5054
Fax: +45 7010 5056
E-mail: sos@sos.dk
The Emergency Assistant Service is available in English and Finnish 24/7/365. When contacting the Emergency Assistant Service, please give the following information:
Policy number (stated in your policy document), your name and address and your contact information at the travel destination.

AIG CLAIMS SERVICE
In case of loss events, please contact
AIG Europe Limited
Nimekast 7024
14003 Tallinn, Estonia
Tel.: +372 6 867 800
Fax: +372 6 737 242
E-mail: aig@transcom-estonia.ee
Telephone service hours Mon-Fri 9am–8pm, Sat 9am–4pm
Travel Guard® Insurance Terms and Conditions

Travel insurance

The insurer of this Travel Guard insurance is the Finland branch of the insurance organisation AIG Europe Limited (hereinafter "AIG"). AIG Europe Limited is an international insurance organisation registered in Great Britain that is entitled to sell insurance policies within the European Union. The insurance terms and conditions and policy document serve as proof of an insurance contract between the insured and AIG. These insurance terms and conditions include terms and limitations for different types of coverage as well as general terms and limitations that apply to all types of coverage.

1. Insured
Insurance is valid for the persons named in the policy document providing that the insurance premium has been paid. All insured must be under the age of 80 when the insurance is taken out, permanent residents in Estonia and have Estonian ID code.

This policy offers coverage only to individuals ordinarily resident in Estonia and is null and void as to non-residents of Estonia.

2. Insurance validity

2.1 Geographical limits
Insurance is valid on trips everywhere in the world, except on trips to or through the following countries: Cuba, Iran, Syria, Sudan, North Korea or the Crimea region of Ukraine.

This policy will not cover any loss, injury, damage or legal liability arising directly or indirectly from planned or actual travel in, to, or through Cuba, Iran, Syria, Sudan, North Korea or the Crimea region.

2.2 Insurance period
Insurance is valid for the time period specified in the policy document. Cancellation cover begins once a trip has been booked and the insurance premium has been paid. Cancellation cover ends once the insured’s trip has started from the insured’s home, workplace, place of study or another place of departure. The insurance cover for all other types of coverage begins once the insured departs from his/her home, workplace, place of study or another place of departure and ends once the insured returns home or to workplace, place of study or another place of departure. Insurance is valid for trips that do not last longer than 365 days. Annual multi trip insurance covers unlimited number of trips within the period of cover shown in the policy certificate. However no single trip may last for longer than 31 days. If a trip lasts continuously longer than the period specified in the policy document, the insurance period will end on the date marked on the policy document.

2.3 Sports cover
Insurance does not cover loss events caused in the following sports or activities:
• competitive sports or practice thereof;
• motor sports;
• scuba diving;
• winter sports: any form of downhill skiing, cross-country skiing or snow boarding, unless additional cover has been purchased;
• aviation sports, such as hang gliding, paragliding, parachute jumping or bungee jumping;
• off-piste skiing, speed skiing or downhill;
• martial arts and contact sports, such as boxing, wrestling, judo or karate;
• independent treks or expeditions or similar activities abroad to mountains, jungles, deserts, wilderness areas or other uninhabited areas;
• ocean sailing.

3. Beneficiaries
In case of death, the beneficiaries are the insured’s close family members, unless the insured has notified AIG of another beneficiary in writing. In other types of coverage, the insured is the beneficiary.
4. Insurance contents

Insurance covers the following types of coverage:

<table>
<thead>
<tr>
<th>Section</th>
<th>Types of coverage</th>
<th>Policy limit (EUR)</th>
<th>Policy Limit (EUR)</th>
</tr>
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<tbody>
<tr>
<td></td>
<td></td>
<td>Standard/Europe</td>
<td>Standard/worldwide</td>
</tr>
<tr>
<td>5</td>
<td>Medical expenses due to travel-time illness or travel accident</td>
<td>300 000 €</td>
<td>500 000 €</td>
</tr>
<tr>
<td>6</td>
<td>Dental treatment expenses (acute and unexpected toothache on a trip)</td>
<td>€ 200</td>
<td>€ 200</td>
</tr>
<tr>
<td>7</td>
<td>SOS International Emergency Assistant Service 24/7/365</td>
<td>included</td>
<td>included</td>
</tr>
<tr>
<td>8</td>
<td>Travel expenses of hospitalized insured’s next of kin</td>
<td>Reasonable transport, accommodation and meal expenses of one person for up to 5 days</td>
<td>Reasonable transport, accommodation and meal expenses of one person for up to 5 days</td>
</tr>
<tr>
<td>9</td>
<td>Repatriation to Estonia due to travel-time illness or travel accident</td>
<td>no upper limit</td>
<td>no upper limit</td>
</tr>
<tr>
<td>10</td>
<td>Repatriation expenses of a child travelling with the insured</td>
<td>€ 10 000</td>
<td>€ 10 000</td>
</tr>
<tr>
<td>11</td>
<td>Repatriation of remains</td>
<td>€ 30 000</td>
<td>€ 30 000</td>
</tr>
<tr>
<td>12</td>
<td>Accidental death, insured over 16 and under 80</td>
<td>no compensation</td>
<td>no compensation</td>
</tr>
<tr>
<td>12</td>
<td>Accidental death, insured under 16</td>
<td>no compensation</td>
<td>no compensation</td>
</tr>
<tr>
<td>13</td>
<td>Permanent disability due to accidental injury, 100%</td>
<td>no compensation</td>
<td>no compensation</td>
</tr>
<tr>
<td>14</td>
<td>Trip cancellation</td>
<td>€ 640</td>
<td>€ 1 278</td>
</tr>
<tr>
<td>15</td>
<td>Trip interruption</td>
<td>€ 640</td>
<td>€ 1 278</td>
</tr>
<tr>
<td>16</td>
<td>Missed departure</td>
<td>€ 640</td>
<td>€ 1 278</td>
</tr>
<tr>
<td>17.1</td>
<td>Compensation for delayed departure</td>
<td>€25/hours, up to €500</td>
<td>€25/hours, up to €500</td>
</tr>
<tr>
<td>17.2</td>
<td>Abandonment of a trip</td>
<td>€ 640</td>
<td>€ 1 278</td>
</tr>
<tr>
<td>18</td>
<td>Baggage</td>
<td>€ 320</td>
<td>€ 640</td>
</tr>
<tr>
<td>18.2</td>
<td>Delayed luggage – necessities</td>
<td>€ 250</td>
<td>€ 250</td>
</tr>
<tr>
<td>19</td>
<td>Legal aid</td>
<td>no compensation</td>
<td>no compensation</td>
</tr>
<tr>
<td>20</td>
<td>Liability compensation</td>
<td>no compensation</td>
<td>no compensation</td>
</tr>
</tbody>
</table>

**WINTER SPORT BENEFIT**

<table>
<thead>
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<th>Section</th>
<th>Types of coverage</th>
<th>Policy limit (EUR)</th>
<th>Policy Limit (EUR)</th>
</tr>
</thead>
<tbody>
<tr>
<td>21.1</td>
<td>Winter sport benefit: travel accident caused by winter sport</td>
<td>€ 300 000</td>
<td>€ 500 000</td>
</tr>
<tr>
<td>21.2</td>
<td>Winter sport equipment</td>
<td>€ 600</td>
<td>€ 600</td>
</tr>
<tr>
<td>21.3</td>
<td>Slope closure</td>
<td>Travel expenses 20 €/24 h, up to 250 € or €30/24h or up to €250 if</td>
<td>Travel expenses 20 €/24 h, up to 250 € or €30/24h or up to €250 if insured</td>
</tr>
</tbody>
</table>
Travel Guard® Insurance Terms and Conditions

| 21.4 | Avalanche cover | € 320 | € 320 | € 320 | € 320 | - |
| 21.5 | Ski equipment hire | €25/24h, up to €150 | €25/24h, up to €150 | €25/24h, up to €150 | €25/24h, up to €150 | - |

GOLF COVER

| 22.1 | Golf equipment | 2 000€ (single article limit 500€) | 100 € |
| 22.2 | Golf equipment hire | 50€/day, up to max 300€ | - |
| 22.3 | Green fees | 50€/day, up to max 300€ | - |

PERSONAL BUSINESS COVER

| 23 | Business equipment | 1000€ (single article limit 500€) | 100 € |
| 23.1 | Business money | € 500 | 100 € |
| 23.2 | Replacing staff | € 1 500 | - |

TRIP CANCELLATION: CAUSED BY NATURAL DISASTER, BANKRUPTCY, STRIKE OR INTERRUPTION OF WORK

| 24 | Trip cancellation | 2 000€ or the cost of the original trip, whichever is lower | - |
| 24.1 | Additional expenses: delay in departure | € 100 | 24H |
| 24.2 | Additional cost for re-arranging departure | € 200 | 24H |
| 24.3 | Additional cost: stranded on an international connection | 150€/24h, up to 5 days (750€) | 24H |
| 24.4 | Additional cost: stranded on return journey | 150€/24h, up to 5 days (750€) | 24H |
| 24.5 | Additional cost: travel expenses to home | € 2 000 | 72H |
| 24.6 | Additional parking cost | 50€/24h, up to max 250€ | 24H |
| 24.7 | Additional kennel or cattery fees | 50€/24h, up to max 250€ | 24H |

Insurance limits given in the table indicate the maximum compensation per insured for each loss event covered by the insurance. Types of coverage, their coverability and limitations are defined in full detail in the sections indicated in the table.

5. Travel-time illness and travel accidents

A travel-time illness or travel accident that started or occurred during the insurance period is covered in accordance with the insurance terms and conditions.

5.1 Travel-time illness

A travel-time illness means an illness which required treatment by a physician and which started or clear symptoms of which first manifested on a trip, or which, on the basis of medical experience, is considered to have otherwise originated on the trip and required medical treatment during the trip or within 14 days of the end of the trip. In case of a communicable disease with a longer incubation period, the 14-day rule does not apply. An illness which the insured had before the start of the trip is not considered a travel-time illness. An illness whose symptoms manifested before the start of the trip or which was being investigated before the start of the trip is not considered a travel-time illness, even if the illness is diagnosed during the trip. However, if an illness that began before the beginning of the trip suddenly and unexpectedly worsens during the trip, the insurance will compensate the expense for necessary emergency treatment for no more than 7 days, but not any other expenses stated in the insurance terms. Insurance does not cover illnesses that began before the beginning of the trip and unexpectedly worsen during the trip, if they were being investigated or treated at the beginning of the trip.

5.2 Travel accidents

A travel accident is a sudden, unexpected, external occurrence beyond the control of the insured that causes bodily injury and takes place during the trip and requires medical treatment within 14 days of the accident. An injury caused to the insured on a trip by involuntary sudden exertion or movement that requires medical treatment within 14 days is also considered a travel accident. The following events occurring during a trip are also considered travel accidents: involuntary drowning, heatstroke, sunstroke, frostbite, injury caused by a major fluctuation in air pressure, gas poisoning and poisoning caused by a substance consumed by the insured by mistake. Insurance does not cover injuries caused by:

- an illness or physical injury which the insured has had before;
- a loss event caused by a pre-existing illness or physical defect;
- damage caused to teeth or dentures by biting or chewing, even if external factors affected the damage;
- surgery, treatment or another medical procedure, unless it is undertaken to treat an injury coverable as a travel accident;
- suicide or attempted suicide;
- intoxication caused by medicinal drugs, alcohol or any other substance used or consumed for purpose of intoxication;
- a bacterial or viral infection.
5.3 Coverage of medical expenses due to travel-time illness and travel accidents

Insurance covers medical expenses due to travel-time illness and travel accidents specified in sections 5.1 and 5.2 for the parts that are not covered under the Health Insurance Act or other legislation. Medical expenses are covered only for the parts that are not compensated based on legislation on compensation for traffic accidents or workmen’s compensation while abroad, EU legislation or EEA treaties or bilateral social security agreements. Medical expenses due to travel-time illness are covered for 60 days after the start of treatment. Medical expenses due to travel accidents are covered for one (1) year after the accident occurred. Insurance only covers the expenses, which the insured would have to pay for the treatment. If it is evident that an expense for which compensation is sought exceeds the generally accepted and followed reasonable level, the insurer has the right to reduce the amount of compensation. When paying medical expenses for which the insured is compensated based on legislation, the insurer reserves the right to recover the medical expenses it has paid up to the sum for which the insured has been compensated based on legislation.

5.4 Coverable medical expenses

Compensation of medical expenses requires that the examination or treatment of illness or injury is prescribed by a doctor. The doctor must be a registered doctor with appropriate accreditation for the country in question and must not be a relative or family member of the insured. In addition, examinations and treatments must be in accordance with generally approved medical understanding and necessary for the illness or injury in question. Treatment must be received at a facility classified as a hospital, which diagnoses and uses medical procedures to treat ill and injured persons. Coverable medical expenses include:

- Expenses of a generally approved and necessary examination or treatment given or prescribed by a doctor;
- Medical treatment;
- Hospital treatment;
- Hospital stay;
- Expenses of medicine sold with the permission of the national medicine agency and prescribed by a doctor for the treatment of a coverable illness or accident;
- Reasonable and necessary travel expenses to visit a local doctor or medical facility at the destination;
- Medical transport to the nearest hospital or medical facility where the insured can receive the necessary treatment;
- Extra reasonable travel costs on return trip, provided that the insured is not able to return to the home country according to the original travel plan and the return is delayed, necessarily due to a compensable travel accident or illness and the original and paid ticket therefore remains unused.
- Physiotherapy, up to 10 sessions per illness or injury.

Medical expenses are not covered:

- If the insured has prior to the trip refused treatment for an illness or injury or if treatment has been discontinued;
- For treatment of AIDS and HIV or consequences of STDs;
- If an illness or injury is due to intoxication caused by medicinal drugs, alcohol or any other substance used or consumed for the purpose of intoxication;
- For the psychiatric consequences of accidents;
- For stays at rehabilitation centres, health resorts, nature health clinics, hospices or treatment facilities for alcohol dependency or drug addiction;
- For further treatment, if the insured refuses repatriation in cases where a doctor approved by AIG has decided to repatriate the insured;
- If the insured after repatriation goes on a new trip without written approval from AIG;
- Prenatal examinations, pregnancy tests, abortion, sterilisation or related examinations;
- Childbirth after the 28th week of pregnancy or other consequences of pregnancy that manifest;
- Other indirect consequences, such as expenses due to telephone calls or interpreter services or similar expenses.

6. Dental treatment expenses

Expenses of necessary treatment of acute toothache are covered up to the insurance limit specified in section 4, if the toothache starts and treatment is given at the destination during a trip. Dental treatment in Estonia is not covered.

7. Emergency Medical Assistant Services by SOS International

SOS International is an emergency medical assistance company that assists insured who need emergency assistance on trips. Based in Copenhagen, SOS International AS serves customers around the clock in several languages. The insured is advised only to contact SOS International in serious medical emergencies and when coverability requires that SOS International has given permission for necessary procedures prior to a treatment or another type of service can be arranged or started (sections 8–11). The emergency medical assistance company can organise direct billing with the treatment facility, for example. In these cases, please contact SOS International as soon as possible after the start of hospital treatment.

8. Travel expenses of a hospitalised insured’s next of kin

Insurance covers the reasonable expenses due to travel, accommodation and meals of one next of kin of the insured for up to five (5) days, as organised by SOS International, to allow the family member to visit the insured at the destination if the insured does not have next of kin at the destination and if the insured cannot be repatriated for medical reasons and must stay in hospital for over 10 days due to a coverable travel-time illness or travel accident.

9. Repatriation to Estonia due to travel-time illness or travel accident

Insurance covers repatriation of the insured to Estonia due to travel-time illness or travel accident, if it is arranged and approved beforehand by SOS International. Repatriation of the insured arranged by SOS International must always be medically justified in accordance with instructions of a doctor approved by AIG. AIG may demand that the insured is transported to Estonia for medical treatment at AIG’s expense if treatment at the location would be significantly more expensive than corresponding treatment in Estonia.

10. Repatriation expenses of a child travelling with the insured

Insurance covers, up to the insurance limit specified in section 4, repatriation of children under the age of 16 travelling with the insured, arranged and approved beforehand by SOS International, if the insured cannot be transported to Estonia for medical reasons and must remain in hospital. Children’s repatriation expenses are not covered if the other parent is also on the trip.
11. Repatriation of remains and casket expenses
If the insured dies due to a travel-time illness or travel accident, repatriation of the remains arranged and approved beforehand by SOS International and casket expenses are covered. Expenses due to repatriation of remains and casket expenses are covered up to the insurance limit specified in section 4.

12. Accidental death
Insurance compensates the insured’s beneficiary for accidental death in accordance with section 4. A death benefit is paid if an accident leads to the death of the insured within a year of the accident.

Benefits paid to the insured for accidental permanent disability is deducted from the death benefit if the death was caused by the same accident. However, accidental death benefit is not paid if the insured dies more than one (1) year after the accident occurred.

13. Permanent disability due to accidental injury
Insurance covers permanent disability caused by a coverable accidental injury up to the insurance limit specified in section 4. Permanent disability means a medically assessed general disability due to an injury sustained by the insured. In determining disability, only the nature of the injury is taken into account; the individual circumstances of the injured, such as his/her profession or leisure-time pursuits, do not affect the determination of disability.

Insurance covers permanent injury to an upper limb, a lower limb, the cervical spine, the back and/or the head, the eyes and hearing. The degree of disability thus caused is determined in accordance with the Table of Losses, or if not written in the Table of Losses, to the best of one’s judgement or after a medical examination by a doctor specialist.

Insurance indemnity is not paid until the injury is acknowledged as a permanent and irreversible loss.

### Table of Losses

<table>
<thead>
<tr>
<th>The Disablment</th>
<th>Right</th>
<th>Left</th>
</tr>
</thead>
<tbody>
<tr>
<td>Loss of one arm</td>
<td>60%</td>
<td>50%</td>
</tr>
<tr>
<td>Loss of one hand or forearm</td>
<td>60%</td>
<td>50%</td>
</tr>
<tr>
<td>Loss of one leg above the knee</td>
<td>60%</td>
<td>60%</td>
</tr>
<tr>
<td>Loss of one leg from or below the knee</td>
<td>50%</td>
<td>50%</td>
</tr>
<tr>
<td>Loss of one foot</td>
<td>40%</td>
<td>40%</td>
</tr>
<tr>
<td>Loss of sight of one eye</td>
<td>50%</td>
<td></td>
</tr>
<tr>
<td>Loss of sight of both eyes</td>
<td></td>
<td>100%</td>
</tr>
<tr>
<td>Complete loss of speech</td>
<td></td>
<td>100%</td>
</tr>
<tr>
<td>Complete deafness of both ears</td>
<td></td>
<td>100%</td>
</tr>
</tbody>
</table>

If the insured is a left-handed person, then percentage specified for insurance indemnity estimate for left and right limb trauma are changed respectively.

If several parts of the body have been injured in a single accident, the maximum amount of compensation that will be paid will be based on an estimated degree of disability of 100%.

Permanent disability is determined one (1) year after an accident, at the earliest. If the degree of disability is raised before three (3) years have elapsed since the indemnity for permanent disability was paid for the first time, a revised amount of indemnity will be paid corresponding to the rise in the disability category.

A change in the degree of disability after the stated period will not affect the amount of indemnity paid. No indemnity for permanent disability is payable if the permanent disability becomes manifest for the first time more than three (3) years after the accident.

Insurance covers only one personal accident benefit per insured person during the period of insurance, as shown on the policy.

14. Trip cancellation
Insurance covers trip cancellation; situations where the insured is prevented from embarking on a trip necessitated by:

- an acute and serious illness, an accident or the death of the insured or his or her next of kin. The necessity is assessed on medical grounds;
- unexpected significant financial losses in the insured’s assets in the home country, which make it necessary for the insured to remain;
- theft of travel documents or identification, which has been reported to the police, within 24 hours of the start of the trip.

The above-mentioned next of kin of the insured include his or her husband, wife, non-marital partner living together with the insured permanently in the same household, child, adopted or foster child, child of the husband/wife or non-marital partner living together with the insured permanently in the same household, grandchild, parent, adoptive or foster parent, parent-in-law, parent of non-marital partner living together with the insured permanently in the same household, grandparent, sibling, half-sibling, step-sibling, daughter-in-law, son-in-law, fiancé or fiancée or a travel companion with whom the insured has booked a trip for two.

In case of cancellation, the insured will be compensated for expenses equal to the insurance limit specified in the coverage chart (section 4) due to travel, accommodation, unused services, excursions and travel at the destination which the insured has already paid and cannot get a refund. The refund or reimbursement that the insured is or would be entitled to receive from the transportation company or tour operator when the cause of the cancellation manifested will be deducted from the compensation. Travel arrangements must be stopped and the insured must cancel all travel arrangements with the transportation company or tour operator immediately when the insured becomes aware that the trip must be cancelled.

### 14.1 Limitations connected to trip cancellation

Insurance does not cover expenses due to trip cancellation if:

- the insured does not want to travel;
- the cause of cancellation manifested before the insurance period or before the trip was booked and paid. Insurance only covers expenses due to trip cancellation if the illness or injury or other cause of cancellation was sudden and unexpected and not known when the trip was booked;
- the acute illness or accident was caused by abuse of alcohol, medicinal drugs or other intoxicants;
- the expenses are incurred due to using an airline bonus system or a similar method;
• insured fails to obtain the required inoculations, vaccinations, passport or visa;
• the trip cancellation is due to pregnancy or childbirth.

15. Trip interruption
Insurance covers trip interruption if the insured is forced to return home prematurely due to sudden acute illness, accident or death of insured or a next of kin. In case of trip interruption, insurance also covers a guardian’s premature return to Estonia if a child who is travelling with the guardian must be repatriated for necessary medical reasons. Expenses due to trip cancellation are covered up to insurance limit specified in section 4.

The above-mentioned next of kin of the insured include his or her husband, wife, non-marital partner living together with the insured permanently in the same household, child, adopted or foster child, child of the husband/wife or non-marital partner living together with the insured permanently in the same household, parent, adoptive or foster parent, parent-in-law, parent of non-marital partner living together with the insured permanently in the same household, grandparent, grandchild, brother, sister, half-siblings, step-siblings, daughter-in-law, son-in-law, fiancé or fiancée or a travel companion with whom the insured has booked a trip for two.

Compensation for trip interruption covers:
• unavoidable additional travel and accommodation expenses due to the insured’s journey home, but not meal expenses;
• unused services, excursions and travel at the destination which the insured had paid for separately in advance.

Insurance does not cover:
• in case of trip interruption, insurance does not cover expenses due to transportation of vehicles to Estonia;
• trip interruption, if the cause of the interruption manifested before the insurance period or before the trip was booked. Insurance only covers expenses due to trip interruption if the illness or accident was sudden and unexpected and not known when the trip was booked;
• compensation for the original return trip;
• trip interruption if the insured is forced to cancel the trip but does not return to Estonia.

16. Missed departure
Insurance covers missed departure if the insured is unable to reach the place of departure of a booked flight in accordance with the original itinerary due to a delayed bus, train or scheduled flight or traffic damage to a private vehicle or taxi, where the vehicle in which the insured is travelling is directly involved. In case of missed departure, reasonable additional and necessary travel and accommodation expenses are covered. In case of delay of scheduled flight, the missed departure is covered if the first flight is delayed because of weather conditions, technical reasons or action by an authority. Expenses due to missed departure are covered up to the insurance limit specified in section 4.

The insured must acquire a written statement of the delay and reasons for the delay from the airline, transportation company or tour operator. Original receipts and an account of the bookings must be appended to the notification of claim. If the missed departure is due to traffic damage, the insured must submit an official’s statement on the traffic damage.

Insurance does not cover:
• expenses due to missed departure, if the insured has not followed the airline’s instructions for arriving to the airport and thus has not reserved enough time to arrive at or before the recommended time;
• expenses that the insured is or would be entitled to from the travel organizer or the airline company;
• missed departure caused by airline timetable changes or route cancellations, which prevents the insured from reaching the place of departure of the connecting flight in time;
• any claims due to strikes or other labour disputes of which the insured was aware before the start of the trip.

17. Compensation for delay due to delayed flights and abandonment of a trip

17.1 Compensation for delay
The insurance cover applies to situations where the insured is, due to a delayed or overbooked flight, forced to wait for a flight that is on the itinerary for over six (6) hours. Necessary and reasonable meal expenses and, where needed, accommodation expenses, are covered up to the insurance limit specified in section 4. The refund or reimbursement that the insured is entitled to receive from the transportation company or tour operator will be deducted from the compensation.

Any purchases must be made and accommodation must take place during the delay at the destination where the delay occurred.

The insured must acquire a written statement of the delay and reasons for the delay from the airline or tour operator. Original receipts and an account of the bookings and booking confirmations must be appended to the notification of claim.

17.2 Abandonment of a trip
Abandonment of a trip is covered if the insured is forced to abandon a trip due to a transport company’s delay lasting more than 48 hours. Insurance covers the cost of the abandoned trip up to the insurance limit specified in the coverage chart (section 4). The refund that the insured receives from the airline or tour operator will be deducted from the compensation.

17.3 Limitations connected to compensation for delay and abandonment of a trip
Insurance will not cover compensation for delay if:
• the flight is not a registered charter or scheduled flight,
• the delay is due to the insured failing to check in for the flight according to the airline’s instructions,
• the delay is due to a strike or other industrial actions of which the insured was aware before the start of the trip, or if
• the delay is due to a grounding or similar action announced by an aviation authority or another authority before the start of the trip.

18. Luggage compensation

18.1 Luggage compensation
Insurance covers up to the insurance limit specified in section 4 damaged or lost normal luggage, either taken on the trip or purchased during the trip, due to a sudden or unexpected event. It also covers the replacement of the documents listed below. Normal luggage means utility articles carried with and accompany the traveller. Coverable documents include passports, identification cards, driving licences and vehicle registrations as well as credit and ATM cards. For these
documents, insurance covers the renewal expenses of the cards.

18.2 Compensation amount
The compensation for items that are less than one (1) year old and in good condition is based on the purchase price of equivalent items. Valuable items, such as photographic, audio, video and electrical equipments, mobile phones, antiques, jewellery, watches, furs, leather goods, precious stones or articles made of gold, silver or platinum, are covered up to overall limit of 300€ (with the single article limit of 200€). Otherwise compensation will be determined based on the value of the item at the time of occurrence, in which case the following age reductions is deducted from the purchase price based on the item’s age starting from the second year of use:

Age reduction for items per year %:

<table>
<thead>
<tr>
<th>Item Description</th>
<th>Reduction</th>
</tr>
</thead>
<tbody>
<tr>
<td>digital cameras</td>
<td>20</td>
</tr>
<tr>
<td>other electronic and optical equipment</td>
<td>10</td>
</tr>
<tr>
<td>navigators</td>
<td>20</td>
</tr>
<tr>
<td>bicycles, motor-driven tools and machines</td>
<td>10</td>
</tr>
<tr>
<td>IT devices (computers), mobile phones and their accessories and other data devices</td>
<td>40</td>
</tr>
<tr>
<td>camping and fishing equipment</td>
<td>20</td>
</tr>
<tr>
<td>clothes, accessories, footwear, sportswear and sports equipment</td>
<td>25</td>
</tr>
<tr>
<td>suitcases and handbags</td>
<td>25</td>
</tr>
<tr>
<td>children’s push chairs</td>
<td>25</td>
</tr>
</tbody>
</table>

Age reduction does not apply to repair costs based on invoices. Damaged items will be replaced mainly by having them repaired. If the repair costs exceed the value at the time of occurrence determined according to the above, the insurer will compensate for value at the time of occurrence.

18.3 Limitations connected to luggage compensation
The following items are not considered baggage:
• cash, cheques, travel tickets or receipts;
• spectacles or contact lenses, sunglasses, dentures, hearing aids or other personal aid equipment;
• motor vehicles or motor-driven equipment, sleeping caravans and other trailers, watercraft or aircraft, or parts or equipment for the above;
• work tools, computer software and files or parts thereof, fax machines and copiers;
• manuscripts, collections or parts thereof;
• merchandise, tool samples, promotional materials, commercial and educational films and recordings, photographs, drawings or programme diskettes;
• animals or plants;
• household effects in transit and freight;
• goods and equipment that have been stored at the destination for over three (3) months;
• windsurfing boards and sails;
• property or items that were rented or borrowed during the trip or damage thereto.

Insurance does not cover damage caused by:
• losing or forgetting items;
• damage due to normal use of luggage items;
• misuse of means of payment, such as credit or ATM cards;
• losing and forgetting cash or credit cards or other means of payment;
• financial losses connected to illicit use of mobile phones;
• damage due to normal use, abrasion, scratching or inadequate protection of items;
• actions of officials;
• repair, cleaning or other treatment of items;
• gradual damage due to weather conditions or humidity, for example;
• pressure waves from a supersonic aircraft;
• damage to bicycles, skis or other sports equipment from appropriate use;
• property or items that were rented or borrowed during the trip.

Insurance will not cover damages that are compensated based on a special act, warranty or another insurance policy. In addition, insurance will not cover theft that has not been reported to the local police authorities within 24 hour or, if this is not possible, to the tour operator, transportation company or hotel.

18.4 Safety instructions and their importance
The safety instructions are aimed at preventing damage and minimising the scope of damage. Intentional or larger than minor failure to follow the safety instructions may lead to reduced compensation or refusal of compensation.

18.4.1 Public spaces
The insured must not leave luggage unattended in public spaces such as traffic stations, market places, restaurants, stores and other commercial enterprises, lobbies of accommodation businesses, beaches, sports fields, public transport and public tourist attractions and sites. If bicycles, skis, snow boards or other sports equipment must be left outdoors or in spaces that are in public use without supervision, they must be locked in racks reserved for this purpose or locked to another appropriate fixed object.

18.4.2 Indoor and storage facilities
Items and equipment that are kept in a hotel room, ship cabin or other equivalent accommodation and whose value exceeds €350, must be kept in a separately locked space if this is possible considering the item’s purpose, size and conditions. It is not allowed to store items and equipment that are worth more than €200 euro in a tent or dormitory accommodation unless arrangements have been made for security.

18.4.3 Vehicles and their equivalents
On motor vehicles, caravans, boats or equivalent vehicles, property must be kept in a locked compartment. A ski box, side bag or tank bag is not an appropriate locked compartment. If luggage is kept in the boot of an estate car or equivalent vehicle, the luggage must be covered.

18.4.4 Other instructions
The insured must follow the instructions for use issued by the manufacturer, retailer or importer. The insured must also follow the instructions and packing regulations of the transportation company. Liquids and staining and corrosive substances must be transported separately and packed so that they cannot contaminate other luggage items. Fragile and easy-to-steal items, such as laptop computers, tablets, cellular phones and
jewellery, must be carried in hand luggage in public transport.

18.5 Compensation for delayed luggage
In case of delayed luggage, insurance will compensate expenses arising from the purchase or rental of necessities up to the insurance limit specified in section 4 if registered/checked-in luggage is over six (6) hours late. Necessities may include sanitary equipment and clothes, for example. The purpose of the trip will be considered in the assessment of the necessity of the items acquired. Compensation unconditionally requires a certificate from the transportation company regarding the delayed luggage and original receipts for the purchase or rental of personal items. The primary liability always lies with the transportation company to whom the insured must always present the claim first. The payment of compensation requires that:
- the luggage must have been left with the airline to transport as accompanying luggage;
- the insured has undertaken reasonable measures in order to reclaim the luggage;
- the delayed luggage has been reported to the appropriate transportation company without delay and the transportation company’s certificate regarding the delayed luggage and a certificate about its return have been submitted with the claim;
- the necessities were purchased or rented before the luggage was reclaimed;
- the insured has submitted original receipts for the purchased or rented necessities.

18.5.1 Limitations connected to the compensation for delayed luggage
There is no compensation for delayed luggage, if:
- the flight is not registered in the global computer reservations system;
- the luggage has been confiscated by Customs or another authority;
- the delay is due to a strike or other industrial actions of which the insured was aware before the start of the trip;
- the delay is due to a grounding or similar action announced by an aviation authority or another authority before the start of the trip;
- the luggage is delivered on the return trip.

19. Legal aid
Insurance will compensate legal advice and aid arranged by SOS International up to the insurance limit specified in section 4 if the insured has been involved in a traffic accident and has consequently been arrested. Compensation of the services above requires that AIG has approved the measures before the service was arranged and initiated. SOS International shall advise the insured regarding the most appropriate course of action for each loss event and inform the insured about his/her right to choose an advocate to represent the insured.

20. Liability compensation
Personal liability compensation means that insurance will compensate, up to the insurance limit specified in section 4, damage to property or people for which the insured is liable according to applicable law if the damage is caused by the actions of the insured during the insurance period. In addition, AIG will investigate the grounds and amount of the presented claims and handle the trial if the claim leads to court proceedings.

20.1 Limitations concerning liability compensation
Insurance does not cover damage caused:
- to property that was in the insured’s possession, including borrowed or rented property, when the act or failure to act that caused the damage occurred;
- by possession or use of a motor vehicle, motor-driven equipment or a ship or boat or aircraft that requires registration;
- by spreading a communicable disease;
- by a fine or similar consequence.

Insurance does not cover:
- damages caused intentionally by the insured;
- damages caused by the insured in professional, commercial and industrial or wage-earning activities;
- damages whose claims provision is based on an agreement, commitment, promise or warranty;
- damages for which the insured is liable as the owner or possessor of a property;
- damages for parts which are compensated from another valid third party insurance of the insured.

20.2 Compensation of loss
Insurance covers damages up to the insurance limit specified in section 4. Damages caused by the same event or situation are considered a single loss event. If there is more than one person jointly liable for damages, insurance covers up to the insured’s share of the overall damages determined by the number of persons who are liable for damages.

20.3 Claim investigation and legal proceedings
AIG will investigate whether the insured is liable for damage, negotiate with the claimant and pay the compensation required by the damages. The insured must give AIG the opportunity to assess the amount of damages and reach an amicable settlement. If a loss event leads to legal proceedings, the insured must immediately notify AIG. If the insured has not notified AIG of legal proceedings and AIG suffered damage as the result of a violation of the notification obligation, AIG is entitled to reduce compensation for expenses arising from legal proceedings to the extent of such damage. If the insured compensates for damages, makes a settlement or approves a claim without AIG’s advance approval, AIG will not be bound unless the compensation sum and grounds are obviously correct. If AIG is ready to make a settlement with the injured party and the insured refuses, AIG is not liable for any costs incurred after this and will not conduct any further investigation on the matter.

21 – 24. Additional benefits
Please note that the following sections 21-24 only apply if insured has paid the appropriate premium for additional benefits and those are shown on your policy certificate.

21. Winter Sport benefit
21.1 Medical expenses for travel accident
Medical expenses are covered (up to the maximum limit shown in section 4) under this section for accidents caused by practising winter sports. The cover is only valid under if insured has paid the appropriate additional premium. The first 50€ of each claim for each insured person is not covered.

Winter sports are defined as all forms of downhill skiing, cross-country skiing and snow boarding in marked slopes, as well as off-piste skiing (only when accompanied by an official guide), and sledgeing.
21.2 Winter sport equipment
Insurance will cover up to the maximum limit shown in section 4 (with a limit for any one item, set or pair) if insured’s winter sports equipment is damaged, stolen or destroyed during the trip. Depending on the age of the equipment, a deduction will be made for wear, tear and loss of value.

Winter sport equipments are skis, poles, boots and bindings or snow boards.

What is not covered:
- the first €100 of insurance excess for each claim for each insured person;
- any loss due theft which is not reported to the police within 24 hours of discovering it and for which insured do not get an official written report;
- any loss due fact that winter sports equipment is left unattended in a public place;
- any loss due theft or damage to winter sports equipment carried on a vehicle roof rack;
- theft or damage to winter sports equipment during a journey unless it is not reported immediately this to the carrier and any property irregularity report is not received;
- loss due theft or damage of winter sports equipment while not in insured control or in the control of any person other than an airline or transport company.

21.3 Slope closure
(This cover is valid only for the period 15 December to 15 April).

Insurance covers transportation expenses or compensation up to the maximum limit shown on the section 4 if, as a result of not enough snow in the pre-booked holiday resort and all lift systems are closed for more than 24 hours. We will pay for either:
1. The cost of transport to the nearest resort up to €20 for each full 24-hour period; or
2. Up to €30 for each full 24-hour period if insured is unable to ski and there is no other ski resort available.

It is a condition of the cover provided under this section that:
- insured gets a written statement from the management of the ski resort confirming the reason for the closure and how long it lasted;
- the pre-booked hotel where insured is staying is at least 1000 metres above sea level; and
- If insured buys this insurance within 14 days of the date insured plans to leave, coverage is subject to confirmation that no ski-lifts or ski-schools in the pre-booked resort were closed at the time the policy was issued.

21.4 Avalanche cover
Insurance will cover up to the maximum limit shown on the section 4 for reasonable extra travel and accommodation expenses that insured needs to pay if the pre-booked outward or return journey is delayed for more than 12 hours from the scheduled arrival time because of an avalanche.

It is a condition of the cover provided under this section that insured gets a written statement from the appropriate authority confirming the reason for the delay and how long it lasted.

21.5 Ski hire
Insurance will cover €25 for each full 24-hour period for the costs of hiring other ski equipment up to the maximum limit shown on the section 4 if:
- the skis that insured owns are lost during the flight or delayed during the trip for over 12 hours from the realized landing time of the airplane; or
- the skis that insured owns are lost or damaged during the course of the trip.

What is not covered:
- any loss due theft which is not reported to the police within 24 hours of discovering it and which is not reported in writing by police;
- any loss due theft, delay or damage to the ski equipment while it is transported unless insured reports this without delay to the carrier and get a property irregularity report.

22. Golf cover
22.1 Golf Equipment
Insurance will cover up to the maximum limit shown in section 4 (with a limit for any one item, set or pair) if the golf equipment owned by insured (not borrowed or hired) is damaged, stolen or destroyed on the trip. Depending on the age of the equipment, a deduction will be made for wear, tear and loss of value.

Golf equipment are: golf clubs, golf bags, non-motorised trolleys and golf shoes.

What is not covered for:
- the first €100 of insurance excess for each claim for each insured person.
- any loss due theft which is not reported to the police within 24 hours of discovering it and for which insured does not get a written report.
- any loss due fact that golf equipment left unattended in a public place.
- theft or damage to golf equipment during a journey unless insured reports this to the carrier and gets a property irregularity report at the time of the loss.
- loss due theft or damage of golf equipment while not in insured control or in the control of any person other than an airline or transport company.
- whole set of woods or irons. If only one item is damaged or stolen. Insurers liability is solely based upon the golf equipment which has been stolen or damaged and would not extend to the replacement of whole set of woods, or irons.

22.2 Golf Equipment hire
Insurance will cover €50 for each full 24-hour period for the costs of hiring other golf equipment up to the maximum limit shown on the section 4 if:
- the golf equipment that insured owns are lost during the flight or your golf equipment is delayed during the trip for over 12 hours from the realized landing time of the airplane; or
- the golf equipment that insured owns are stolen or damaged during the course of your trip.

What is not covered:
- any loss due theft which is not reported to the police within 24 hours of discovering it and get a written report;
- any theft, delay of or damage to insured’s golf equipment while it is transported unless insured reports this immediately to the carrier and get a property irregularity report.

22.3 Green fees
Insurance will cover up to the maximum limit shown in the section 4 for the unused percentage of the green fees, golf tuition fees or golf equipment hire expenses which insured has already paid for and cannot get back if:
• insured becomes ill or injured during the trip and cannot take part in the golfing activities as planned; or
• theft of documents prevents insured from taking part in the prepaid golfing activity.

Claim will be based on the number of complete days not used. Insured must get written confirmation of the nature of illness or injury from the treating doctor along with confirmation of how many days insured have been unable to take part in the golfing activities and original receipts for unused services. Insured must report the theft of documents to the local police within 24 hours of discovery and get a written police report.

23. Personal Business Cover

23.1 Business equipment
Insurance will cover replacement or repair for the essential business equipment owned by insured up to the amount shown in section 4 if:
• business equipment is stolen or damaged during the trip; or
• the business equipment is delayed on outward international journey for more than 12 hours.

Business equipments are: computer equipment, communication devices and other business-related equipment which insured needs in the course of the business and which is not insured elsewhere. The equipment must be owned by insured’s employer or if insured is self-employed it must be owned by insured.

Insured must get written confirmation of the length of the delay from the appropriate airline or transport company and must keep all original receipts for the essential business items bought. A deduction will be made for wear, tear and loss of value.

Limitations and safety instructions at the section 18 apply to the Business Equipment cover also.

23.2 Business money
Insurance will cover the amount shown in the section 4 for the theft of business money (meaning cash or traveller's cheques) which is the property of the insured (if self-employed) while it is being carried with the insured or is held in locked safety deposit facilities.

Limitations and safety instructions at the section 18 apply to the Business Money cover also.

23.3 Replacing staff
Insurance will cover necessary and reasonable additional travel and accommodation expenses for a replacement business associate to travel from Estonia to go to the meeting, up to the amount shown in the section 4, if an acute and serious sickness, accident or death prevents insured from going to a planned business meeting during the trip.

Insured must provide following documents:
• proof of travel for insured (confirmation invoice, travel tickets); 
• invoices, tickets and receipts for business associate’s expenses; and
• an official document from the treating doctor to confirm insured’s illness and inability to take part in the planned business meeting.

23.4 Limitations concerning Personal Business Cover
What is not covered for under sections 23.1 – 23.3:
• the first €100 of insurance excess for each claim for each insured person;
• business equipment that is left unattended in a public place;
• any claim for loss due theft which is not reported immediately to the police and which insured do not get a written police report for;
• any claim for loss due theft, damage or delay to business equipment which is not reported to the relevant airline or transport company within 24 hours of discovering it and which insured do not get a written report for. In the case of an airline, a property irregularity report will be required.
• any loss due theft or damage to photographic, audio, video, electrical and computer equipment not carried in the hand luggage while travelling; and
• claims where insured is unable to provide receipts or other reasonable proof of ownership wherever possible for the items being claimed.

24. Trip cancellation caused by natural disaster, bankruptcy, strike or interruption of work

Insurance will cover up to the amount shown in section 4 for cancelled trip if it is necessary and reasonable to cancel the trip if the final international departure from Estonia by aircraft, sea vessel, coach or train is delayed for more than 24 hours due to a strike, interruption of work, bankruptcy or the occurrence of a natural catastrophe.

Natural catastrophe can be: volcanic eruption, flood, tsunami, earthquake, landslide, hurricane, tornado or wildfire.

Insurance will cover for the following costs which have already been paid for and cannot be refunded:
• travel expenses;
• accommodation expenses; and
• the cost of visas.

Insurance does not cover expenses due to trip cancellation if the payment has been made by using a frequent flyer points, airmails, loyalty card points or the like.

24.1 Additional expenses: delay in departure
Insurance will cover additional expenses if insured has checked in for the departure on the outward part of the trip and the departure from Estonia is delayed by more than 24 hours due to the occurrence of a natural catastrophe.

Reasonable and unexpected expenses caused by delay are paid up to the amount shown in section 4 for:
• accommodation;
• making alternative travel arrangements to return home or to reach the final point for international departure if insured is on a connecting flight within Estonia;
• food and drink; and
• necessary emergency purchases.

24.2 Additional expenses for re-arranging departure
Insurance will cover additional costs to reach to the destination if insured decides to go on the trip after being delayed by more than 24 hours in Estonia due to the occurrence of a natural catastrophe. Insurance will cover up to the amount shown in section 4, for the additional and unexpected costs to re-arrange the outbound travel to reach to the original destination.
24.3 Additional expenses: stranded on an international connection
Insurance will cover additional and reasonable costs up to amount shown in the section 4, if the international connection is delayed more than 24 hours due to the occurrence of a natural catastrophe and insured is stranded at the international connection, waiting to make the final, international connection. Maximum of 5 days is covered throughout the duration of the trip. Compensation is covered for:
- accommodation;
- ground travel (with taxi, bus or train) to an alternative point of departure;
- ground travel (with taxi, bus or train) from the accommodation to the point of intended departure;
- food and drink; and
- necessary emergency purchases.

24.4 Additional expenses: stranded on the return journey
Insurance will cover additional and reasonable costs up to amount shown in the section 4, if the return journey home is delayed by more than 24 hours due to the occurrence of a natural catastrophe. Reasonable and unexpected costs are paid to, up to 5 days, for:
- accommodation;
- ground travel (with taxi, bus or train) to an alternative point of departure;
- ground travel (with taxi, bus or train) from the accommodation to the point of intended departure;
- food and drink; and
- necessary emergency purchases.

Travel expenses home, if customer is delayed more than 72 hours, are paid from the section 24.5.

24.5 Additional expenses: travel to home
Insurance will cover additional and reasonable costs for alternative travel arrangements for insured to get to the home. Additional expenses are paid up to amount shown in the section 4, if the return journey home is delayed by more than 24 hours due to the occurrence of a natural catastrophe and the carrier, the insured is originally booked to travel home with, is unable to make arrangements for the return journey within 72 hours of the original date.

Insured must contact SOS International before making alternative travel arrangements, because if appropriate under the circumstances, SOS International will make these arrangements for the insured.

24.6 Additional parking expenses
Insurance will cover additional and reasonable costs up to amount shown in section 4, for additional car parking costs that incurs if the return to Estonia is delayed by more than 24 hours due to the occurrence of a natural catastrophe.

Insured must provide parking receipts and proof from airline for delay.

24.7 Additional kennel or cattery expenses
Insurance will cover additional and reasonable costs up to amount shown in section 4, for additional kennel or cattery fees that incurs if the return journey to Estonia is delayed by more than 24 hours due to the occurrence of a natural catastrophe.

24.8 Limitations concerning section 24
What is not covered for under sections 24 – 24.7:
- the costs which are refundable from any other source, for example an airline or a tour operator;
- any expenses that the airline company is liable for under the law;
- additional expenses that are not reasonable and necessary and are not incurred as a direct result of a natural catastrophe;
- any expenses of which insured can not provide an official letter from the carrier confirming the cause and length of the delay or cancellation; or
- expenses for return flight if insured has not contacted SOS International before making arrangements to return home under section 24.5.

25. General limitations concerning all types of coverage

25.1 War
AIG is not liable for damages caused by war or armed conflict, revolution, civil commotion or use of military force.

25.2 Nuclear damage and radioactive, biological and chemical weapons
Insurance does not cover loss events caused by:
- nuclear damage as specified in the Nuclear Liability Act, regardless of where the nuclear damage occurs;
- the use or emissions of radioactive substances which directly or indirectly lead to nuclear reaction, radioactive radiation or pollution;
- the spread, use or emissions of toxic biological or chemical substances when they are used intentionally in an act of terrorism.

25.3 Intent and gross negligence
If the insured has caused a loss event intentionally or due to gross negligence, AIG’s liability may be reduced or compensation may be refused completely in accordance with what is reasonable for the situation.

25.4 Other limitations connected to all types of coverage
There is no compensation, if:
- any loss, injury, damage or legal liability sustained directly or indirectly by any individual or entity identified on any applicable government watch list as a supporter of terrorism, narcotics or human trafficking, piracy, proliferation of weapons of mass destruction, organized crime, malicious cyber activity, or human rights abuses;
- the loss event is caused by participation in violent industrial action, insurrection or other violent riot in a public space;
- the insured is participating in active military, police, militia or peacekeeper operations or practices thereof;
- the insured is carrying out duties assigned to flight crew or connected to flight in an aviation accident;
- the loss event is caused by an earthquake, volcanic eruption, flood, tsunami, hurricane, tornado or wildfire, landslide, avalanche, or any other natural catastrophe, unless the additional cover has not been purchased to extend this;
- the insured is participating in criminal activity;
- the sudden illness was a result of abuse of alcohol or medicine or use of intoxicants;
- the insured is involved in a fight, excluding self-defence;
- the claim submitted by the insured is due to new laws or instructions specified by Customs or other authorities;
- the claim arise from or as a result of civil commotion, strike, lock-out, blockade, riot of any kind, action of government of any country or threat of such event;
- any claim arising from the tour operator, airline or any other company, firm or person becoming insolvent, or being unable

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or unwilling to fill any part of their obligation to insured, unless the trip cancellation cover for strikes have not been purchased;
- damages are compensated legally by motor insurance or an insurance policy of the employer.

The Insurer shall not be deemed to provide cover and the Insurer shall not be liable to pay any claim or provide any benefit hereunder to the extent that the provision of such cover, payment of such claim or provision of such benefit would expose the Insurer, its parent company or its ultimate controlling entity to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union or the United States of America.
Compensation procedure

26. Compensation procedure

26.1 Loss event procedure

The insured must immediately notify AIG of the occurrence of an incident. If AIG suffers damage as the result of a violation of the obligation to immediately notify AIG of the occurrence of an incident, AIG may reduce compensation to the extent of such damage.

The insured must submit to AIG all documents and information necessary to determine the insurer’s liability. Travel insurance claims must be submitted as soon as possible on a signed form of the insurer. AIG may transfer the information to its centralised system and store personal data in accordance with the Personal Data Act (523/1999) and privacy protection regulations.

If a loss event occurs, contact the insurer or the Emergency Assistant Service SOS International.

Emergency Assistant Service: SOS International AS
Copenhagen, Denmark
Tel.: +45 70 10 50 54
Fax: +45 70 10 50 56
E-mail: sos@sos.dk
(24h service in Finnish, Swedish and English)

Insurer:
AIG Europe Limited, Finland branch
Kasarmikatu 44
FI-00130 Helsinki, Finland
Tel.: +372 6 867 800
Fax: +372 6 737 242
E-mail: aig@transcom-estonia.ee
(Mon–Fri 9am–8pm, Sat 9am–4pm)

In cases where the expenses are minor, the insured must handle the situation and submit a claim for compensation with original receipts after returning from the trip. Claims must be submitted to AIG within three (3) years of the end of the calendar year during which the claim falls due. A claim falls due after the occurrence of an insured event and the completion of the process of determining the extent of the AIG’s performance.

If AIG has been informed of a claim, the running of the limitation period shall be suspended until the insured receives the decision made by AIG concerning the claim. In this case, the claim expires ten (10) years after the end of the calendar year during which the claim fell due.

If the insured submits a claim to AIG and AIG notifies the insured in writing of the denial of the claim, AIG shall be released from the performance obligation if the insured does not file an action for compulsory performance of the obligation within one (1) year as of the receipt of the response denying the claim and legal consequences of the expiry of the one (1) year term.

26.2 Compensation procedure for medical expenses

The insured must pay the medical expenses and apply first for compensation in accordance with the Estonian Health Insurance Act. The insured is advised to submit an application to the Health Insurance Fund of Estonia without delay. AIG shall process the insured’s claim after the insured has submitted to AIG the original certificate of the compensation paid by Health Insurance Fund and copies of the receipts and documents submitted to Estonian Health Insurance Fund. The original receipts for which the insured has not received compensation based on the Estonian Health Insurance Act or any other legislation must be delivered to AIG. If the insured has lost the right to compensation in accordance with the Estonian Health Insurance Act, AIG will deduct the part that would have been paid in accordance with the Estonian Health Insurance Act from the compensation.

26.3 Notification of claim

A notification of claim must include the following information and documents:
• policy number;
• short description of the loss event;
• ticket or other type of transport receipt;
• original receipts for unused and non-refunded services;
Medical expenses:
• appropriately dated and signed doctor’s certificate, which indicates the exact description of the illness or injury;
• original receipts for the acquired medical and medicinal expenses and service charges and prescriptions;
Repatriation to Estonia due to travel-time illness or travel accident:
• contact SOS International.
Repatriation expenses of a child travelling with the insured:
• contact SOS International.
Repatriation of remains:
• contact SOS International.
Accidental death:
• death certificate and any post-mortem report and documents specifying beneficiaries (e.g., inventory of the estate, genealogy);
• any record of a police investigation.
Permanent disability due to accidental injury:
• description of the loss even and any witnesses and their contact information;
• appropriately dated and signed doctor’s certificate which indicates the exact description of the injury;
• the date of the medical examination and the doctor’s contact information.
Cancellation or interruption of a trip:
• appropriately dated and signed doctor’s certificate that includes an exact description of the illness or injury another type of certificate;
• a certificate of refund or compensation received from the transportation company or tour operator;
• original receipts of additional expenses;
• in case of death, a death certificate.
Missed departure:
• the transportation company’s certificate regarding the missed departure;
• original receipts of transport and accommodation expenses;
Compensation for delay – flight or another public vehicle
• the transportation company’s certificate regarding the missed departure;
• original receipts of meal and accommodation expenses;
Loss of luggage:
• description of the lost luggage items;
• complaint to the transportation company, tour operators or hotel and/or report of an offence to the police;
• in case of delayed luggage, the transportation company’s certificate of the delay and a certificate of the return of the luggage;
• original receipts of purchased or rented necessities.
26.4 Fraudulent information
If the insured gives fraudulent statements or hides information that would be relevant to compensation for damages, the compensation may be reduced or refused completely.

26.5 Force majeure
Insurance does not cover losses due to war, warlike conditions, insurrection, civil commotion or other similar events.

26.6 Procedure if the insured is dissatisfied with claims handling
If the insured is dissatisfied with the insurer’s decision on a claim, the insured must always first contact the claims handler. The insured may also contact the Estonian Consumer Protection Board, which is the function to advice consumers in insurance and indemnity matters.

27. Processing personal data
Upon conclusion of the contract with AIG, the insured gives his/her consent to AIG for processing his/her personal data pursuant to these general terms and conditions. Upon processing the personal data, AIG shall adhere to the requirements of the Personal Data Protection Act, Insurance Activities Act and other relevant legislation.

Personal data collected may include identification and contact information, payment card and bank account information, credit reference and scoring information, sensitive information about health or medical condition or treatment procedures, and other personal data.

Personal data may be used for the following purposes: issuing and managing insurances, other insurance administration, e.g. communications, claims processing and payment; decision-making on insurance terms and conditions and payment terms; providing assistance and advice on matters concerning medical treatment and travelling; prevention, detection and investigation of crime, including fraud and money laundering; protection and defense of legal rights; taking care of legal and regulatory compliance, including compliance with laws and regulations in force outside the country of residence of the registered party; monitoring and recording of telephone calls for quality, training and security purposes; and marketing, market research and analysis.

After termination of the customer relationship AIG transfers data of its customer register to its marketing register and may use it for marketing of AIG’s products. One may opt out of receiving marketing communications by contacting AIG by e-mail at: aigfinland@aig.com or by writing to: AIG Europe Limited (Finland), Kasarmikatu 44, 00130 Helsinki, Finland. We ask to note that despite opting out of marketing communications AIG may still send other notifications relating to administration of insurance policy and concerning insurances or claims.

For the above purposes AIG may transfer personal data to its group companies, brokers and other distribution parties, insurers and reinsurers, credit reference agencies, healthcare professionals, physicians appointed by AIG and other service providers. For a list of our group companies to which personal data can be transferred, go to: http://www.aigcorporate.com/AIG_All_Entities.pdf. Personal data will also be transferred to other third parties (including governmental or other public authorities) if required by law. Personal data (including sensitive data about health) may be shared with other insurers in cases provided by law. Personal data may be transferred to purchasers or prospective purchasers upon a sale or other transfer of AIG’s business of preparation thereof.

Upon an insured event, third parties may submit, without the consent of the insured person, to AIG personal data or enable access to personal data that are necessary to AIG to ascertain the obligation to perform the contract or the scope of its non-performance. This shall also apply to the information concerning the health condition of the insured person, if it is necessary to AIG for the performance of the contract or it is necessary to identify the obligation to perform the contract and the scope of such obligation.

AIG shall use appropriate security and other measures to protect personal data. AIG’s service providers are selected carefully and also they are required to use necessary protective measures. Personal data will be retained for the period deemed justifiable with respect to the purposes described above, or for the period required or permitted under legislation.

Everyone shall have the right of access, right to request rectification of personal data and the right to prohibit processing of personal data for purposes of direct marketing. With respect to requests on access to personal data or rectification of inaccurate personal data or prohibiting processing of personal data, please contact us by e-mail at: aigfinland@aig.com or write to: AIG Europe Limited (Finland), Kasarmikatu 44, 00130 Helsinki, Finland. More details about the usage of personal data can be found in our full Privacy Policy at https://www.aig.fi/en/privacy or by requesting a copy of it using the contact details above.

28. Termination of the insurance contract
The insurance contract cannot be terminated if the insurance period is shorter than 30 days. If the insurance period is longer than 30 days, AIG will return the insurance premium to the insured if the insurance contract is terminated in writing before the start of the trip. If the insured terminates the insurance contract after the trip has started, AIG is entitled to the insurance premium for the time that the insurance has been valid, and AIG will return the unused part of the insurance premium to the insured.

In addition to the stated above, AIG and the insured shall have the right to unilaterally terminate the insurance contract in cases set forth in the law.

29. Applicable law
The insurance contract is subject to these terms and conditions as well as Finnish Law.
About our insurance services

1. Financial Supervisory Authority
The Financial Supervisory Authority is the authority for supervising Finland’s financial and insurance sectors, operating independently under the Bank of Finland. The duties of the Financial Supervisory Authority include supervising that insurance companies operating in Finland comply with legislation and good practice.

2. Who regulates us?
AIG Europe Limited, Finland branch is authorised and regulated by the Financial Supervisory Authority. If you wish, you can verify it at the Financial Supervisory Authority website www.finanssivalvonta.fi or by contacting the Financial Supervisory Authority by telephone at +358 10 83151 or by post: The Finnish Financial Supervisory Authority, P.O. Box 103, FI-00101 Helsinki, Finland.

3. Ownership
AIG Europe Limited, Finland branch is a local branch of the international insurance organization AIG Europe Limited registered in Great Britain. We are entitled to sell insurance policies within the European Union. The supervisory authority for the operations of AIG Europe Limited is UK Financial Conduct Authority and the Prudential Regulation Authority, address 25 The North Colonnade, Canary Wharf, London E14 5HS United Kingdom, telephone: (+44) 20 7066 1000, www.fca.org.uk.

4. AIG Customer Service and insurance claims:
• By telephone: +372 6 687 800 (Mon–Fri 9am–8pm, Sat 9am–4pm)
• By e-mail: aig@transcom-estonia.ee
• By mail: AIG Europe Limited, c/o Transcom Eesti OÜ, Pärnu mtn. 160, 11317 Tallinn, Estonia

Claims handling if a notification of claim has already been filled in:
• By mail: AIG Europe Limited, Nimekast 7024, 14002 Tallinn, Estonia
• By telephone: +372 6 687 800 (Mon–Fri 9am–8pm, Sat 9am–4pm)

If you are dissatisfied with our service, please contact AIG Customer Service first. If you are dissatisfied with a decision, you may also contact the Estonian Consumer Protection Board for advice and counselling.

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14002 Tallinn
Estonia
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Within the UK, AIG Europe Limited is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority (FRN 202628). This can be checked by visiting the FSA Register (www.fca.org.uk). Registered in England: company number 1486260. Registered address: The AIG Building, 58 Fenchurch Street, London, EC3M 4AB.