China Pacific Property Insurance Company Co., Ltd
Overseas Travel Package & Emergency Assistance Insurance Clauses

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In the event of a discrepancy between the Chinese version and its English translation, the Chinese version shall prevail.
Remarks: Although the following translation aims at being as close as possible to the Chinese original, it cannot bear any contractual value as China Insurance Law stipulates that insurance policies are to be signed in Chinese.

Section 1 General Conditions

Provision I  Composition of the Insurance Contract

The insurance contract (hereafter “Contract”) consists of the insurance policy, attached clauses, endorsements, amendments, application form(s), insurance application documents, statements, and other relevant written agreements.

Provision II  Eligibility of Coverage

1. The applicant: Insured person with capability of civil conduct, person who has insurable interest on the insured person, or any registered group can be the applicant of this insurance policy.
2. The insured: Any person who has fixed address within the territory of People’s Republic of China (exclusive of Hong Kong, Macau and Taiwan) (hereinafter referred to as), physically healthy, is an eligible insured person of this insurance policy.

Provision III  Beneficiary

The insured person or applicant can designate one or several persons as the beneficiary of death benefit, and should designate the sequence of beneficiary or share of the sum assured, or all the beneficiaries have the equal right in the event of a claim.

Unless stipulated otherwise, the beneficiary of disability and medical benefits is the insured person himself, and the beneficiary of oversea emergency assistance is the insured person himself or family. The company will reject all other designation and change of beneficiary.

The insured person or applicant has the right to change the beneficiary. All beneficiary designation should be in writing, and endorsed on the policy by the company.

In the event of the death of the insured, the benefit shall be handled as inheritance of the insured and payable to the insured’s heir(s) under one or more of the following circumstances:

(I) No beneficiary is designated either by the applicant or the insured.
(II) The beneficiary predeceases the insured and no other beneficiary is designated.
(III) The beneficiary gives up the right to receive the Policy proceeds or is deprived of the right to receive the Policy proceeds as per the law and no other beneficiary is designated.

where the beneficiary and the insured decease in the same incident and no deceased sequence can be determined, presumption shall be made that The beneficiary predeceases the insured.

Provision IV  Benefits

The insurance liability is based on the stipulation between the applicant and the company. Benefit 1 - 3 is compulsory, and the benefit 4 - 5 is optional.
1. Oversea accident benefit
2. Oversea emergency assistance benefit
3. Liability of Terrorism
4. Oversea emergency inpatient medical expenses benefit (optional)
5. Oversea emergency outpatient medical expenses (optional)

Provision V  Disclosure

Upon establishment hereof, the Insured shall be obliged to providing the faithful data when
clarifying such inquiries about the insurance subject or the Insured as raised by the Insurer.

If the Insured conceals facts deliberately or fails to perform the duty of disclosure due to gross negligence that would be enough to affect the Insurer from making the decision of whether or not to agree to accept the insurance or to raise the premium rate, the Insurer has the right to terminate the contract.

If the Insured deliberately refuses to perform the duty of disclosure, the Insurer shall not undertake to pay indemnity or insurance money for insured accident that occurs before the contract is terminated and shall not return the insurance premium.

If the Insured fails to perform the duty of disclosure due to gross negligence, thereby seriously affecting the occurrence of insured accident, the Insurer shall not undertake to pay indemnity or insurance money for the insured accident that occurs before the contract is terminated but shall return the insurance premium.

The Insurer shall not cancel this Contract if it’s been aware, upon establishment hereof, of any such conditions as not having been faithfully disclosed by the Insured; in the event of any insured accident, the Insurer shall undertake to pay either indemnity or insurance money.

Provision VI Notice of Insured Event

1. When suffered accident injury or sudden sickness, the insured person or his/her family or traveling companions shall contact Emergency Assistant Organization (hereafter “EAO”) immediately, and inform the telephone and fax number. Owing to an extreme medical emergency that prevents the Insured from informing EAO immediately, the Insured is still obligated to contact EAO within 24 hours following the incident. Failing which, the Insured will bear all such expenses incurred.

The Insurer shall not undertake to pay any indemnification for any such undeterminable part of the insured accident as of which the nature, causes and losses etc. can hardly be determined due to either willful reluctance or failure of the Insured to give such notice in a timely manner though in absence of any material misconduct, unless, however, the Insurer has otherwise promptly known, or shall have promptly known, of the occurrence of such insured accident; However, delay due to Force Majeure is excluded.

2. The insured person must inform EAO at the first contact if the emergency medical expenses have been or will be paid by any other assistance organization, national assistance plan, insurance policies.

Provision VII Change

Any change, amendment or deletion in the contract will not be valid unless the applicant submits his / her request in writing, and that such endorsement is being made on the contract by the Insurer within the period of insurance. Any change, amendment or deletion should be complied with relevant laws, regulations and statutes.

Provision VIII Cancellation

1. If the insured person requests to cancel the contract in a written form in prior to the effective day of the policy. The premium will be refunded however the 10% cancellation fees are charged.

2. If the Insurer receives the cancellation request in a written form within 90days from the effective day of the policy, all insurance liability will be ceased from the date that the insurer received the cancellation application form, and the unearned premium will be refunded to the applicant.

3. If the insurer received the cancellation request in a written form more than 90 days from the effective day of the policy. All insurance liability will be ceased from the date that the insurer
received the cancellation application form. And the unearned premium will be refunded to the applicant.

4. When the applicant requests to cancel the Contract, the certificates and materials must be provided as follows: the original Insurance policy and other insurance certificates; receipt of premiums paid; application for cancellation of the Insurance contract; certification of the organization as applicant.

Provision IX Dispute Settlement

All disputes under this insurance arising between the insured and the Company shall be settled through friendly negotiations. Where the two parties fail to reach an agreement after negotiations, such disputes shall be submitted to arbitration as stated in the policy or submitted to court of People’s Republic of China (Hong Kong, Macao and Taiwan excluded) for legal actions if there is no arbitration stated in the policy and no agreement upon arbitration be worked out.

Provision X Governing Law

This policy of insurance shall be governed by and construed in accordance with the laws of the People’s Republic of China. This contract shall be governed by and construed in accordance with the laws of the People’s Republic of China. However, it must be noted that the insurer shall through its EAO carry out its obligations stipulated in this contract in accordance with and subject to the local laws and regulations of the country where incident took place.

Provision XI Other General Conditions

All premiums, benefit amounts, loss, Sums Insured and other amounts under this Policy are expressed and payable in Renminbi. If award is rendered, settlement is denominated or any benefit, sum Insured or element of loss is stated in a currency other than Renminbi, then payment under this Policy shall be made in Renminbi at the rate of exchange published by the People’s Bank of China on the date the final award is entered, the amount of settlement is agreed upon or any benefit, Sum Insured or element of loss is due, respectively.

Any final decision will be made by the doctors appointed by EAO, and EAO has the right to reject any request which has negative impact on the insured person’s health or safety.

Section 2 Insurance Benefits

Provision XII Oversea Accident Injury Benefits

If the insured person sustains accidental injury abroad during the period of insurance, the insurer shall pay the following benefits:

1. If the accidental injury sustained by the insured person directly results in death within 180 days of the date of the accident, the insurer shall pay the sum assured stated in the policy as the death benefit.

2. If the accidental injury sustained by the insured person directly results in any disablement stated in “the personal insurance disablement benefits table” within 180 days of the date of the accident, the insurer shall pay the disablement benefits in accordance with the relevant of the percentage of the sum insured per the level of disablement stated in the above schedule. If the treatment has not completed in 180th day after the occurrence of accident, the insurer shall make an evaluation of the status of the insured person on that day and pay the benefit accordingly.

In case of multiple disablements resulted from on single accident, the insurer shall pay the total sum of each disability benefit. Among the multiple disablements sustained to the same arm or the same leg, only the highest disablement shall be paid.

3. The total amount of death/disability benefit payable to any individual insured person is limited to the sum assured stated in the policy for that insured person.
Provision XIII Oversea Emergency Assistance Benefits

If the insured person sustains accident injury or sudden illness abroad, the insurer should carry out the liability of emergency assistance benefit and the expense occurred through its EAO.

A, Overseas Medical Assistance
1, Hotline Service
To provide the 24 hours hotline service to the Insured.

2, Expense occurred in dispatch of Essential Medicine
When medically necessary and whenever possible, EAO will dispatch essential medicine which is not available locally. The delivery of such medical commodities will be subject to the laws and regulations applicable for the importation or delivery of such products. The insurer only pay for the dispatch fees.
If the insured suffers any accidental injury or sudden illness requires immediate medical treatment, the insurer through its EAO shall
1) To Arrange the insured person's admission to the nearest suitable hospital, or which is deemed suitable by the EAO's appointed doctors;
2) To bear the insured person's medical expenses; certain related transportation expenses and any related additional expenses incurred during his/her hospitalization.
The EAO will decide whether provide the emergency repatriation service or not.

3, Arrangement of Emergency Medical Evacuation
To arrange for the provision of air and/or surface transportation, medical care during transportation, communications and all usual ancillary services required to move the User to the nearest hospital where appropriate medical care is available.

4, Repatriation to the People’s Republic of China
Upon completion of the Insured's medical treatment, or the EAO’s doctors consider that the Insured is medically fit for travel, the appointed EAO will arrange for the Insured to return to the People's Republic of China by regular commercial airline only. The using of original return ticket would be appreciated. A medical escort will be provided, if deemed medically necessary by the EAO's doctors.

If EAO’s doctors deem that it is medically necessary for the Insured to be re-admitted in a hospital upon arrival in the People’s Republic of China, the appointed EAO will transfer him/her to the Insured's designated hospital located in any one of the three cities as above stipulated. If the Insured is unable to ascertain his / her choice of hospital, EAO will arrange to transfer him / her to a designated hospital in any one of the stipulated cities and the repatriation of Insured to the People’s Republic of China will terminate thereon.

5, Arrangement of Compassionate Visit
If the insured person is in hospital for more than consecutive 7 days, EAO will arrange one relative or deputy to join the insured person and bear the expenses including one return airfare, 5 days’ hotel accommodation (limited to RMB1,200 per day), and the accumulation limit is RMB 20,000. EAO will not take the responsibility of VISA.

6, Return of Dependent Children (less 12 years old)
If the dependent children is left unattended as a result of the Insured’s accidental injury or sudden illness and when there is no immediate next-of-kin with the children, EAO will assist the Insured person in making arrangement for the unattended children to return to the People’s Republic of China. The original ticket of the dependent children will be used whenever possible. If the dependent children have no return tickets, the Insured is responsible to pay for his / her dependent children tickets to return to the People’s Republic of China.

7, Arrangement of Recuperation Accommodation
If the doctor in charge of the case and the EAO’s appointed doctors consider that the insured need recuperation after he/she leaves hospital, EAO will arrange the accommodation which is limited to 5 days, and the expenses are limited to RMB 1,200 per day, and the accumulation

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limit is RMB 20,000.

8. Repatriation of Mortal Remains
If the Insured dies while traveling as the result of an accidental injury or illness, EAO shall provide one of the following benefits according to the wishes of the Insured prior to his/her demise, or that of his/her family members, the sum insured limit is RMB 100,000:
1) Repatriation of Remains to the People’s Republic of China.
   EAO will arrange and pay for the repatriation of mortal remain by regular commercial air transportation from the place of occurrence to the nearest international airport of the Insured’s home in the People’s Republic of China. The cost of the coffin is payable up to RMB 10,000.
2) Cremation
   EAO will pay for the cost of cremation at place of occurrence and the cost of transporting (by regular commercial airline only) the deceased Insured’s urn back to the People’s Republic of China. The cremation cost will be paid in accordance with the ordinary standard of the country of occurrence.
3) Local Burial
   As requested by the deceased Insured family members, the appointed EAO will arrange and pay up to RMB 10,000 for the burial of Insured in the country of occurrence.

B. Internal Trip Assistance
1. Trip Assistance
   The appointed EAO will assist the Insured with the replacement of lost ticket or travel documents if needed, all such expenses incurred in rendering such assistance will be borne by the Insured.

2. Legal Assistance
   The appointed EAO will provide legal assistance if the Insured requires, all such expenses will be borne by the Insured.

3. Interpreter Referral
   The appointed EAO will provide the names, telephone numbers and, if possible and requested, hours of opening of interpreters’ office in foreign countries.

4. Other Services
   Including trip information, accompany of minor children, transmission of emergency documents.
   The liability of international trip assistance is only service, the insurer and EAO will not bear any the third party expenses which should be borne by the insured person.

Provision XIV Liability of Terrorism
In the period of insurance, the insurer will bear the liabilities of death, disability, medical expenses or emergency assistance directly or indirectly due to any act of terrorism or any action taken in controlling, preventing terrorism, excluding the use of or threat of using nuclear, chemical, and biological weapon.

The liability of insurer to pay the above benefit shall be limited to the relevant sum insured indicated on the Policy.

Provision XV Overseas Emergency Inpatient Medical Expenses Benefits
If the insured person be in hospital abroad due to accidental injury or sudden illness, the insurer shall through its EAO bear the following insurance liabilities:
1. The insurer shall through its EAO pay the medical expenses incurred overseas including room & board, meal, supplies, treatment, and services.
2. If the insured person who is in hospital is under age 12, the insurer shall through its EAO arrange the accommodation of the accompanying parent. The cost is limited to 600 per, max 5 days.
3. The amount of medical expenses benefit payable to any one insured person is limited to the sum assured stated in the policy for that insured person. Once the claim amount reaches the sum insured, this insured benefit should be terminated.

Provision XVI Overseas Emergency Outpatient Medical Expenses Benefits

If the insured person sustains accidental injury during the period of insurance, the insurer shall through EAO provide medical consultation and bear the following liabilities and expenses incurred overseas, if necessary:

1. Emergency outpatient medical expenses:
   1) If the EAO’s appointed doctors deem that it is medically necessary for the Insured to receive emergency medical investigation and treatment, the Insurer through its EAO, will pay for the related emergency outpatient expenses (including consultation fee, examination fee, X-ray fee and prescription fee). However, payments of such emergency outpatient expenses exclude ultrasonic examination, CT and MRI which shall be borne by the Insured.
   2) The Insurer through its EAO will pay for the emergency outpatient expenses (including the first visit and follow-up consultation) up to an overall maximum of RMB 8,000 per event. The Insured person is responsible to bear RMB 800 per event when seeking emergency outpatient treatment.

2. Emergency dental outpatient medical expenses:
   1) If the Insured receives emergency medical treatment for dental illness directly resulted from an accidental injury or sudden illness, the insurer through its EAO shall will pay for the reasonable and necessary expenses.
   2) The Insurer through its EAO will pay for such emergency dental outpatient treatment up to an overall maximum of RMB 4,000 per incident. The Insured is responsible to bear RMB 800 per incident when seeking emergency dental outpatient treatment.
   3) The Insurer shall not be liable for any dental outpatient treatment expenses arising from any dental medical record, non-emergency or pre-arranged dental treatment, bridgework and crown.

3. The amount of oversea emergency outpatient medical expenses benefits payable to any one insured person is limited to RMB 20,000.

Section 3 Exclusions

Provision XVII Liability Excluded

The insurer is not liable for the followings:
1. The willful or illegal conduct by applicant;
2. Any illegal or unlawful act by the Insured;
3. Fights, alcohol abuses, suicide and self-inflicted injury, addiction or abuse of drug;
4. Any accidents caused by and under the influence of alcohol, drug and derivative products;
5. Driving of motor vehicle that Insured is not licensed or restricted by law or drunk driving;
6. The insured participating in hazardous professional extreme sports and activities, such as diving, parachuting, skiing, hangliding, hunting, cliff climbing, exploring, martial art, wrestling, stunt, riding on horse, vehicle competition, bungee jumping;
7. Any historical illness and sudden sickness suffered domestically;
8. Emergency medical evacuation or repatriation not approved in advance by the EAO’s appointed hospital;
9. Any expenses arising from the acquisition of organs transplants or organs donation and the psychiatric or psychological treatment; the failure of kidney or dialysis; Venereal related disease, confinement, Pregnancy, Inherited Disease, Congenital Disease;
10. The insured person is suffering from the AIDS or infected by HIV (HIV positive);
11. War, military action, riot or military usurped power;
12. Explosion, radioactivity or contamination arising from atomic or nuclear waste;
13. Terrorism with use or threat of use nuclear weapon, chemical weapon or biological
weapon.

The insurer is not liable for any expenses due to the following actions:

1. Emergency medical evacuation or repatriation not approved in advance by the EAO’s appointed doctors;
2. Outpatient treatment, hospitalization because of prevention, check-up or recuperation;
3. Any expenses incurred without following the doctor’s suggestion during the trip;
4. Any claim arising from an accident occurring during professional activity on sites such as (but not limited to) construction sites, mining sites, oil platforms or oil and chemical industry sites;
5. Any expenses related to search and rescue operations;
6. Any non-emergency medical treatment request whereby EAO’s doctors deemed that such treatment could be reasonably delayed until the Insured returns to the People’s Republic of China;
7. Any consequence arising from use of drugs without obtaining proper permission from EAO’s doctors

The EAO is not responsible for loss or delay arising from other organizations beyond its control.

The Insurer shall not be liable for any expenses arising from hospitalization examination and treatment in care the insured don’t follow the insurer arranged treatment process.

Provision XVIII Countries and Territories Excluded

The insurer and assistance organization is not liable for any insurance liability or related expenses occurred in those countries and areas where had been in the time of war or announced emergency in prior to the insured’s leaving oversea. Including the following countries and territories.

In Europe: Bosnia & Herzegovina, Balkan
In Asia: Afghanistan, Iraq, Cocos Islands, East Timor, British Indian Ocean Territories.
In Africa: Algeria, Rwanda, Somalia, Western Sahara, Saint Helena Island.

Section 4 Periods of Insurance, Sum Assured and Premium

Provision XIX Period of Insurance

The period of insurance of this contract is one year effective from 0:00 of the effective day to 24:00 of the expiry day as specified in the contract. The period of insurance of provision 14 and provision 15 is limited to 90 days per oversea travel.

The period of insurance of this contract is based on the Beijing Time.

Provision XX Sum Assured and Premium

1. The insurance liability, benefits period, and package plan are based on the stipulation between the applicant and the insurer. They are not allowed to change in the period of insurance.
2. The premium for the “accident loss or damage” should be not more than the limit regulated by the insurance committee if the insured is a minor who is 16 years old or below.
3. The applicant should pay the entire premium when applying for the policy and the policy will not be effective until the entire premium is paid.

Section 5 Claims

In the event of a discrepancy between the Chinese version and Its English translation, the Chinese version shall prevail.
Provision XXI  Claim Application

1. For the accident death benefit, the death beneficiary as the claimant shall provide the following documents to apply for benefit payment:
   1) Original insurance policy;
   2) Accident certificate issued by public security department Chinese embassy settled in that country;
   3) Death certificate issued by public security department Chinese embassy settled in that country;
   4) ID card of the beneficiary;
   5) Other documents and information provided by the beneficiary to identify the nature, cause of the accident.

2. For the benefit of accident disablement occurred overseas, the beneficiary as the claimant shall provide the following documents to apply for benefit payment:
   1) Original insurance policy;
   2) Accident certificate issued by public security department Chinese embassy settled in that country;
   3) Disablement evaluation certificate issued by the approved medical institution or doctor.
   4) ID card of the beneficiary;
   5) Other documents and information can be provided by the beneficiary to identify the nature, cause and degree of accident.

3. In the event of the insured's disability or accidental injury, the insured's medical expense shall fill in the Benefit Claim as claimant and provide the following documents when claiming for benefit:
   1) Original insurance policy,
   2) Medical diagnosis report attached with original receipts of medical treatment expenditure, detailed expense list and prescriptions issued by a medical institution recognized by the insurer.
   3) The receipts of salvation expense occurred,
   4) Accident certificate issued by public security department Chinese embassy settled in that country;
   5) The ID card or household registry certificate of the insured,
   6) The ID card or household registry certificate of the beneficiary and its approved relation with the insured
   7) Other documents and information can be provided by the beneficiary to identify the nature, cause and degree of accident.

4. After the insured receives the documents as listed above in item 1 and 2 and 3, if the event is confirmed to be under the coverage of this contract, benefit payment shall be made within 10 days after the claimant and the insurer reach agreement on the payment amount; If the Insurer has made verifications according to the preceding clauses, a notice of rejection of any such claim as proven not to be covered by the insurance policy shall be issued to the Insured together with the explanations within three (3) days following the said verifications.

5. If the insurer is unable to finalize the payment amount within 60 days after the insurer received the documents as listed above in item 1 and 2 and 3, the insurer can pay the amount that can be defined based on the existing certificates and documents. Upon final confirmation, the insurer shall make up the balance if there is any.

6. In the case where the Insured survives after being declared dead, any death benefit paid should be returned to the insurer by the applicant or other claimant within 30 days from the date of knowing or being reasonably assumed to have the knowledge of the fact that the insured is still alive.

Provision XXII  Time Limit for Claim

In the event of a discrepancy between the Chinese version and its English translation, the Chinese version shall prevail.
The Insured shall have a 2-year valid litigation term to raise claims to the Insurer for indemnities, which term shall commence as of the date when he/she has known or should have known of any such insured accident as occurred.

Section 6 Definitions

Provision XXIII Definitions

Unless as otherwise set forth herein, the following terms as applied herein shall bear such meanings as given below:

Insurer: refers to China Pacific Property Insurance Co., Ltd
Overseas: the countries and territories out of the People’s Republic of China, but Taiwan Hong Kong Macau will also fall in the insurance liability.
Accident Injury: External, unexpected, unintentional, no-disease-related event that injures the body of the insured person.
Sudden illness: the illness that the insured person sustains the first time during the travel.
Reasonable and necessary (medical expense): the patient in the same range of sex; age and same symptom of disease. The total expense of the similar medical treatment, service and materials used should be not more than the local general expenditure level.
History of disease symptom: any disease or illness which is, arises out of or is caused by a condition or defect for which medical treatment was recognized, advised, sought out, or should have reasonably sought out, or received at any time before the Period of Insurance.
Economic way of transportation: the assistant department should designate the most economic transportation for the insured and its family regarding to their actual situation.
Terrorism: activities against persons, organizations or property of any nature, the effect is to intimidate or coerce a government or the civilian population that involve but not limited to use or threat of force or violence.
Overseas Stay: Period from the time the Insured leaves the territorial limits of the country of residence, and ends when the Insured returns to the territorial limits of the country of residence.
AIDS: Abbreviated form of Acquired Immunodeficiency Syndrome.
HIV: Abbreviated form of Human Immunodeficiency Virus (HIV). The WHO definition of AIDS shall be the standard to follow. A person can be confirmed AIDS contracted or HIV infected if the result of the serum test is positive for HIV anti-body.
Unearned Premium:
1. Less than 90 days after the expiration of policy:
   (Premium – rate of premium counted from the effective day of policy to the cancellation date).
2. More than 90 days after the expiration of policy:
   Premium × (1 - days of period expired/benefit period) × (1-30%), the time of less than one day is calculated as one day, 1 year is regarded as 360 days.

In the event of a discrepancy between the Chinese version and its English translation, the Chinese version shall prevail.
Additional Personal Oversea Travel Inconvenience Benefits Clause

Provision I  Composition of the Insurance Contract
The additional Personal oversea travel inconvenience benefits contract (hereafter “additional insurance Contract”) consists of Overseas Travel Package& Emergency Assistance Insurance contract (hereafter“basic contract”). The basic contract will be concluded once the application has been approved by insurer.

Provision II  Travel Delay

Chapter 1. Coverage
If the travel is delayed for over 6 hours in the period of insurance due to the accidental injury, the insurer shall bear the reasonable expenses of accommodation, meal and transportation change:
1. The delay of the public transportation vehicle due to a traffic accident, mechanical failure or overbooking, and no other transportation can be available.
2. Loss, theft or robbery of the travel documents.
3. Typhoon, earthquake, flood or other natural disaster.
4. The delay which is due to a strike is excluded.

Chapter 2. Sum Assured
The reimbursement due to travel delay is limited to RMB1200. The maximum amount in respect of any claim or claims accumulated shall not exceed the total amount of sum insured.

Chapter 3  Claim Application
In the event of a claim, the insured should submit:
1. The original policy and other insurance documents.
2. The Proof of the occurrence of accident issued by the local security institution or custom.
3. Certification documents of booking.
4. All relative receipts and invoices

Provision III  Loss or Delay of Baggage

Chapter 1. Coverage
The insurer is liable for the following benefits in the period of insurance:
1. Any purchase of emergency necessities in the event of baggage delay for over 12 hours from the time of arrival at destination.
2. Delay of the baggage which has been checked in as registered baggage for over 24 hours from the time of arrival at destination is regarded as baggage loss.

Chapter 2. Sum Assured
The baggage delay benefit is limited to RMB300 per travel. The baggage loss benefit is limited to RMB1000 per travel. The maximum amount in respect of any claim or claims accumulated shall not exceed the total amount of sum insured.

Chapter 3. Claim Application
In the event of a claim, the insured person should submit:
1. The original policy and other insurance documents.
2. The proof baggage delay or document loss issue by the airline company.
3. The copy of baggage check
4. The original purchase receipts

Provision IV Replacement of travel document

Chapter 1. Coverage
The insurer is liable for the reasonable expenses arising from the loss, theft and robbery of travel documents. And the insurer must have reported it to the police within 24 hours.
Travel documents means passport, VISA and other necessary documents, but not including airticket of public traffic vehicles, cash, credit card and travel check.

Chapter 2. Sum Assured
This benefit is limited to RMB1000. The maximum amount in respect of any claim or claims accumulated shall not exceed the total amount of sum insured.

Chapter 3. Claim Application
In the event of a claim, the insured person should submit:
1. The original policy and other insurance documents
2. The proof of accident in writing issued by the Police, transportation company or custom.
3. The proof of replacement of travel document
4. Receipts and detailed expense record.

Provision V Exclusions
The insurer is not liable for the claim if:
1. The basic contract is invalid
2. The claims fit the exclusions stated in the basic contract

Provision VI Period of Insurance
It should be consistent with the basic contract.

Provision VII The other remaining issues should be referred to basic contract.
Additional Oversea Travel Legal Liability Benefits Clause

Provision I Composition of the Insurance Contract

The Additional oversea travel legal liability benefits contract (hereafter “additional insurance Contract”) consists of Overseas Travel Package & Emergency Assistance Insurance contract (hereafter “basic contract”). The basic contract will be concluded once the application has been approved by insurer.

Provision II Personal Liability Coverage

If while this Policy is in force a claim is made against the Insured person for the body injury, death, or property damage to third party, for whom the Insured Person is legally liable, the insurer shall bear the expenses arising from the followings:
1. other person's body injury, death, or property damage which is due to the insured person’s negligence in public. Public means such place as showplace, historic site, artistic institute, restaurant, hotel, shop, etc.
2. reasonable expenses arising from demur and suit getting consent from the insurer. This kind of expense can be calculated without regarding to the sum insured, however the maximum should not be more than the 10% of sum insured.
3. the maximum amount in respect of any claim or claims accumulated shall not exceed the total amount of sum insured.

Provision III Special Exclusions

The insurer is not liable for the followings:
1. Any indirect loss;
2. liability assumed in accordance with any agreement between the Insured and other parties, unless such liability would have been attached to the Insured notwithstanding such agreement.
3. Property Damage to property rented to, occupied, or used by or in the care of the Insured Person.
4. Liability arising out of or in connection with a business engaged in by then Insured Person.
5. liability arising out of the ownership, maintenance, or use water craft, aircraft, or vehicle.
6. any claims arising from any Immediate family member, employee against an Insured Person.
7. Liability arising out of the transmission of a communicable disease by an Insured Person.
8. Liability arising from any sports, match, stunt performance caused by an insured.

Provision IV Notice of Claim

The insured person should abide by the followings:
1. Any admission, compromise and claim by the insured person should seeking for the consent from the insurer.
2. The insured person may make a claim after getting the judgment or settlement issued by the court or arbitration institute. the Insurer may pay indemnifications directly to such third party in compliance with notice of the the insured.
3. The insured person should seek for liability exclusions legally. The insurer is not liable if the insured is not doing so due to the fraud.
4. For the liability which should be borne by the other person, the insurer will get the right to claim on him/her on the behalf of the insured person after effecting the payment.
In the event of an insured accident, the Insurer shall bear no liability for indemnification if the Insured has waived any claim against the relevant responsible party even before the payment of any indemnities hereunder by the Insurer. Once the Insurer has paid the Insured the indemnities, any such action taken by the Insured as to have waived any claim against the relevant responsible party without the Insurer’s consent shall be deemed null and void. The Insurer may either deduct or request refunding of the equivalent amount of such

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indemnities in the event of the Insurer’s failure to exercise the claiming right on behalf of the Insured due to the latter’s willful reluctance or material negligence.

**Provision V  Demur and Suit**

If a suit brought against the insured person for an accident injury,
1. The insurer must get the consent from the insured person in writing for any abnegate, admission and compromise.
2. The expenses arising from the insured person’s civil action which was got consent from the insurer should be borne by the insurer. If the compensation exceeds the sum assured, the insurer will only pay the proportion of the sum assured bears the compensation.
3. Any expenses arising from the insured person’s criminal action should be borne by himself/herself

**Provision VI:** The other remaining issues should be referred to basic contract.
## Life Insurance Disability Benefits Table

<table>
<thead>
<tr>
<th>Class</th>
<th>Item</th>
<th>Degree of Disability</th>
<th>Benefit</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1</td>
<td>Loss of sight of both eyes. (Remark 1)</td>
<td>100% of the limit of liability</td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>Loss of both upper limbs above the wrist joint or of both lower limbs above the ankle joint.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>3</td>
<td>Loss of one upper limb above the wrist joint and of one lower limb above the ankle joint.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>Loss of sight of one eye and loss of one upper limb above the wrist joint.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>5</td>
<td>Loss of sight of one eye and loss of one lower limb above the ankle joint.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>6</td>
<td>Permanent and total loss of functions of joints of four limbs. (Remark 2)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>7</td>
<td>Permanent and total loss of ability of mastication (Remark 3).</td>
<td></td>
</tr>
<tr>
<td></td>
<td>8</td>
<td>Permanent Total Loss of the central nervous system or the thorax and all abdominal organs resulting in the complete inability to engage in any job and the inability to carry out daily activities essential to life without the assistance of others. (Remark 4)</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>9</td>
<td>Permanent and total loss of functions of two out of three major joints on two upper limbs, two lower limbs or one upper limb and one lower limb. (Remark 5)</td>
<td>75% of the limit of liability</td>
</tr>
<tr>
<td></td>
<td>10</td>
<td>Loss of ten fingers. (Remark 6)</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>11</td>
<td>Loss of one upper limb above the wrist joint or permanent and total loss of functions of the three joints of one upper limb.</td>
<td>50% of the limit of liability</td>
</tr>
<tr>
<td></td>
<td>12</td>
<td>Loss of one lower limb above the ankle joint or permanent and total loss of functions of the three joints of one lower limb.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>13</td>
<td>Permanent and total loss of hearing in both ears. (Remark 7)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>14</td>
<td>Permanent and total loss of functions of ten fingers. (Remark 8)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>15</td>
<td>Loss of ten toes. (Remark 9)</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>16</td>
<td>Loss of sight of one eye.</td>
<td>30% of the limit of liability</td>
</tr>
<tr>
<td></td>
<td>17</td>
<td>Permanent and total loss of the functions of two of three major joints of one upper limb.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>18</td>
<td>Permanent and total loss of the functions of two of three major joints of one lower limb.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>19</td>
<td>Loss of four fingers of one hand with the thumb and the index finger included.</td>
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</tr>
<tr>
<td></td>
<td>20</td>
<td>Permanent shortening of one lower limb by more than 5 centimeters.</td>
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<tr>
<td></td>
<td>21</td>
<td>Permanent and total loss of speech. (Remark 10)</td>
<td></td>
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<tr>
<td></td>
<td>22</td>
<td>Permanent and total loss of the functions of ten toes.</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>23</td>
<td>Permanent and total loss of the functions of one of three major joints of one upper limb.</td>
<td>20% of the limit of liability</td>
</tr>
<tr>
<td></td>
<td>24</td>
<td>Permanent and total loss of the functions of one of three major joints of one lower limb.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>25</td>
<td>Loss of thumb of both hands.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>26</td>
<td>Loss of five toes of one foot.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>27</td>
<td>Significant injury to eyelids of both eyes. (Remark 11)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>28</td>
<td>Permanent and total loss of hearing in one ear.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>29</td>
<td>Nose injury with permanent impediment to the smelling function of the nose. (Remark 12)</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>30</td>
<td>Loss of the thumb and index fingers of one hand or of any three fingers with thumb or index finger included.</td>
<td>15% of the limit of liability</td>
</tr>
<tr>
<td></td>
<td>31</td>
<td>Permanent and total loss of functions of any three fingers of one hand with the thumb or the index finger included.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>32</td>
<td>Permanent and total loss of the functions of five toes of one foot.</td>
<td></td>
</tr>
</tbody>
</table>
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### 7. Loss of a thumb or an index finger or any two of the other fingers of one hand.
Permanent and total loss of the function of the thumb and the index finger of one hand.

#### REMARKS:
1. Loss of sight shall mean loss or removal of eyeball, inability of distinguishing light and shade, or barely tell hand movement in front of eyes, with the best sight remaining after correction at 0.02 in the international standard sight schedule, or the sight scale less than 5 degrees, according to the diagnosis of qualified ophthalmologist.
2. Loss of function of joint shall mean permanent stiffness, numbness or immobility of joint.
3. Loss of ability of mastication shall mean the loss of ability to take or swallow any food except liquid food due to the disability of chewing and swallowing resulted from physical or functional handicap other than the reason of teeth.
4. Inability to carry out daily activities essential to life without the assistance of others shall mean that the activities such as food taking, urine or faces discharging, dressing or taking off clothes, general living activities, walking and taking a bath etc. cannot be accomplished without the assistance of others.
5. The three major joints of the upper limb shall mean shoulder joint, elbow joint and wrist joint; the three major joints of the lower limb shall mean hip joint, knee joint and ankle joint.
6. Loss of finger shall mean severance at proximal interphalangeal joint of the finger (or at the interphalangeal joint of the thumb).
7. Loss of hearing shall mean loss of average language frequency ability higher than 90 decibels, when tested with the frequency of 500, 1,000 and 2,000 Hertz.
8. Loss of function of finger shall mean severance through distal interphalangeal joint, or permanent immobility from proximal interphalangeal joint or joint immobility of the finger.
9. Permanent total loss of toe shall mean severance through the metatarsal-phalangeal joint.
10. Loss of speech shall mean disability of articulating of any three out of four language functions of labial sound, alveolar sound, palatal sound and valor sound; or aphasia resulted from brain injury diagnosed by the qualified E.N.T. medical doctor, but aphasia resulted from any mental handicap is excluded.
11. Significant injury to lid of both eyes shall mean the eyelids could not completely cover the corneas when closing the eyes.
12. Nose injury with permanent impediment to the smelling function of the nose shall mean loss of all or above 50% of nasal cartilage and incurable obstruction in two nasal canals and respiration difficulty, or loss of smelling function of two nasal canals. Permanent and total shall mean the situation that the function is still completely lost after 180 days of the date of accident, except for that of removal of eyeball and other apparent irrecoverable cases.