

SCHEDULED FLIGHT EVENT AND TRAVEL PERSONAL ACCIDENT INSURANCE – HSBC CORPORATE CARD

IMPORTANT NOTICE

- This policy is issued to You based on the information You provided Us when You applied for the Insurance. You should note that You must disclose to Us fully and faithfully the facts You know or ought to know that are relevant to Your Insurance application. If You had failed to disclose the relevant facts to Us, the Policy issued to You may be void and You and/or the Insured Person may not receive any benefit from it.
- This Policy, inclusive of the Schedule, any Memorandum and Endorsement, is an important document. It explains the insurance cover We provide, the rights the Policy gives You and/or the Insured Person, the conditions You and/or the Insured Person are to comply with and situations where We will not pay under the Policy. Please read this Policy carefully and ensure that it meets Your requirements. If the Policy does not meet Your requirements or You find any error in the Policy, kindly return it to Us and contact Us immediately for correction.

DEFINITIONS

Some words and phrases in this Policy have special meanings. These words and phrases have the following meanings wherever they appear in the Policy

Accident An unexpected, unintended and unforeseen event and which is not caused

by any illness or naturally occurring medical conditions or degenerative

process.

Cardholder Holder of the HSBC Corporate Card

Chinese Physician A registered practitioner in Chinese medicine who is licensed to practise within

the scope of his license, according to the laws of the country in which such practice is maintained, other than the Insured Person or someone related to

the Insured Person to which the claim concerns.

Chiropractor A registered practitioner in chiropractic medicine who is licensed to practise

within the scope of his license, according to the laws of the country in which such practice is maintained, other than the Insured Person or someone

related to the Insured Person to which the claim concerns.

Dental Treatment A treatment that is medically necessary to restore sound and natural teeth due

solely to an Accident and is carried out by a qualified and license dentist.

Deposit Any sum required to be pre-paid to a tour operator, a Public Conveyance

operator or the operator of any accommodation which the Insured Person has fully charged to the HSBC Corporate Card and is unable to recover or obtain a

refund by reason of Trip Cancellation.

Essential Items Personal items such as basic toiletries, undergarments and other basic

wear that are vitally necessary to get the Insured Person through the period

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of the luggage delay.

Family Member(s)

Legal spouse, parents and/or parents-in-law, siblings, legitimate children between one (1) and twenty-five (25) years of age, not married and not employed.

Injury

Bodily injury, including death, resulting directly, solely and independently of any other cause by an Accident.

Illness

Worsening physical health not caused by an Accident, for which the Insured Person needs medical treatment by a Medical Practitioner, commencing and manifesting itself whilst overseas and within the Period of Insurance and shall not include any Pre-Existing Medical Condition.

Insured Person

Employee of the Cardholder who has fully charged the fare of his/her Scheduled Flight and/or Deposit to the HSBC Corporate Card.

Loss

- Complete severance or permanent functional disablement of a body part
- Lasting a continuous and uninterrupted period of at least 365 days and at the expiry of the period, being beyond hope of improvement as medically certified by a Medical Practitioner.

Medical Expenses

Expenses necessarily and reasonably incurred for medical treatment of bodily Injury or Illness covered under this Policy. Any treatment by a specialist must be referred by the attending Medical Practitioner and shall not exceed the usual level of charges for similar treatment or medical supplies in the location where the expenses are incurred had this insurance not existed.

Medical Practitioner

A registered practicing member of the medical profession who is legally permitted to practice or render western medical or surgical services other than the Insured Person or someone related to the Insured Person to which the claim concerns.

Permanent Total Disability

Disability that according to medical evidence and certification by a Medical Practitioner that:

- prevents the Insured Person from engaging in any gainful employment for the rest of his life; and
- lasts a continuous and uninterrupted period of at least 365 days and at the expiry of the period, being beyond hope of improvement.

Pre-Existing Medical Condition

The existence of any Injury, Illness, disease or symptom of the conditions whether known or unknown to the Insured Person that existed within 182 days prior to the commencement of the Trip.

Public Conveyance

Any air, land or water conveyance duly licensed for regular transportation of fare-paying passengers and operating on scheduled routes and timetables. This excludes rental vehicles, taxis and all modes of transportation that are chartered or arranged as part of a tour, even if the services are regularly scheduled.

Scheduled Flight

Travel on a Public Conveyance as a fare-paying passenger.

Seriously Injured or III

Injury or illness, as the case may be, which is certified by a Medical Practitioner as life threatening and requires immediate medical or surgical treatment.

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Trip

A journey undertaken by the Insured Person and commencing in Singapore when the Insured Person leaves the place of residence or office for the place of embarkation, but not more than three (3) hours prior to the scheduled departure time, and ceasing upon the following, whichever is the earliest:

- a) The expiry of the Period of Insurance stated in the Policy Schedule;
- b) Upon return to the permanent place of residence;
- c) Three (3) hours upon arrival in Singapore.

We, Us, Our

AXA Insurance Singapore Pte Ltd

You, Your, Bank

The Hongkong and Shanghai Banking Corporation Limited, Singapore Branch

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INSURANCE COVER

This Insurance is arranged by the Bank for the Cardholder as herein defined. In consideration of the payment of the premium by the Bank, We agree to cover the Insured Person as set out in this Policy. The cover and Our liability to pay under the Policy are subject to the Terms set out herein and the Applicable Limits specified in the Schedule.

TABLE OF BENEFITS

Coverage		Maximum Limits Payable
Section 1	Trip Cancellation	S\$2,500
Section 2	Flight Delay	S\$300 (Time Excess: 8 hours)
Section 3	Missed Flight Connection	S\$300
Section 4	Luggage Delay	S\$300 (Time Excess: 48 hours)
Section 5	Loss of Luggage	S\$1,000 (Maximum \$500 per luggage)
Section 6	Emergency Travel and Medical Assistance (Including Funeral Expenses or Repatriation of Mortal Remains)	S\$50,000
Section 7	Accidental Death and Permanent Disability	S\$1,000,000
Section 8	Overseas Medical Expenses	S\$30,000
Section 9	Post Trip Medical Expenses	S\$5,000

Section 1: Trip Cancellation

If the Insured Person's scheduled Trip is cancelled within thirty (30) days from the date of commencement of the Trip due to any of the following events before the scheduled date of departure, We will pay the non-refundable fare of the Scheduled Flight and/or Deposit that has been actually fully paid with the HSBC Corporate Card subject to the maximum amount shown corresponding to this Section in the Table of Benefits.

- Insured Person dies or becomes Seriously Injured or III
- Insured Person's Family Member dies or become Seriously Injured or III.

We do not pay anything under this Section if:

- a) The Insured Person is aware or ought to be aware of at the time of the booking of the Trip any event that renders the cancellation of the Trip highly possible (such as Family Member receiving in-patient treatment in hospital or having received a terminal prognosis at the time of the booking of the Trip);
- b) The Insured Person fails to notify the travel operator or provider of transport or accommodation immediately when it is found necessary for the Insured Person to cancel the Trip;

Section 2: Flight Delay

If the departure of the Public Conveyance from a place of embarkation whilst on the Trip and in which the Insured Person is booked to travel is delayed for at least eight (8) hours from the scheduled time of departure stated in the itinerary due to strike, industrial action, adverse weather conditions or the delay is due to the Public Conveyance, We will pay one hundred dollars (\$100) for each full eight (8) hours' delay subject to the maximum amount shown corresponding to this Section in the Table of Benefits.

However, We will not pay anything under this Section if:

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- a) The full fare of the Scheduled Flight is not charged to the HSBC Corporate Card;
- b) The Insured Person fails to check in with the Public Conveyance according to the itinerary supplied
- c) The Insured Person fails to obtain written confirmation from the Public Conveyance confirming the actual number of hours of delay;
- d) The delay is caused by strike or industrial action which already existed on the date of the flight booking;
- e) The delay is at the Insured Person's departure point in Singapore.

Section 3: Missed Flight Connection

If the Insured Person fails to board a scheduled connecting flight due to the late arrival of the incoming Public Conveyance in which the Insured Person is traveling in, We will pay the necessary costs that the Insured Person actually incurred before the next available connecting flight for:

- hotel accommodation; and/or
- meals or refreshments

at the overseas connecting point subject to the maximum amount shown corresponding to this Section in the Table of Benefits.

Payment under this Section is conditional upon the Insured Person:

- Receiving a confirmed reservation on the connecting flight;
- Allowing sufficient time for and doing everything possible to get to the overseas connecting point for the time specified on the ticket or itinerary.

We will not pay anything under this Section if:

- a) The full fare of the Scheduled Flight is not charged to the HSBC Corporate Card;
- b) An alternative onward flight is made available within four (4) hours from the actual arrival time of the incoming flight to the connecting point;
- c) The Insured Person fails to obtain written confirmation from the Public Conveyance confirming the delay and the missed connection.

Section 4: Luggage Delay

If the Insured Person's check-in luggage with the Public Conveyance is not delivered after six (6) hours, but before forty-eight (48) hours, of his/her arrival at the scheduled overseas destination, We will reimburse the reasonable expenses incurred at the scheduled overseas destination for replacement of Essential Items subject to the maximum amount shown corresponding to this Section in the Table of Benefits.

We will not pay anything under this Section for:

- Purchases made within the first six (6) hours of arrival at the scheduled overseas destination;
- Purchases made after the delivery of the luggage or after forty-eight (48) hours of arrival at the scheduled overseas destination whichever is the earlier;

For the avoidance of doubt, this Section does not cover delay in the delivery of the luggage at the home destination. We will also not pay anything under this Section if:

- a) The full fare of the Scheduled Flight is not charged to the HSBC Corporate Card;
- b) The Insured Person fails to produce the original receipt of purchase of the replacement items; and/or
- c) The Insured Person fails to obtain written confirmation (and/or a luggage irregularity report) from the Public Conveyance confirming the number of hours the check-in luggage is delayed.
- d) The Insured Person fails to take all reasonable steps to recover them.

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Section 5: Loss of Luggage

If the Insured Person's check-in luggage with the Public Conveyance is not delivered to the Insured Person within forty-eight (48) hours of his/her arrival at the scheduled overseas destination, the Insured Person's luggage is deemed permanently lost and We will reimburse the reasonable expenses incurred for replacement of Essential Items within the forty-eight (48) hour period of arrival at that destination subject to the maximum amount shown corresponding to this Section in the Table of Benefits.

For the avoidance of doubt, this Section does not cover delay in the delivery of any luggage at the home destination. We will also not pay anything under this Section if:

- a) The full fare of the Scheduled Flight is not charged to the HSBC Corporate Card;
- b) The Insured Person fails to produce the original receipt of purchase of the replacement items; and/or
- c) The Insured Person fails to obtain written confirmation (and/or a luggage irregularity report) from the Public Conveyance confirming the number of hours that the Insured Person is without the check-in luggage.
- d) The Insured Person fails to take all reasonable steps to recover them.

Section 6: Emergency Travel and Medical Assistance (Including Funeral Expenses or Repatriation of Mortal Remains)

AXA Assistance Singapore will provide the Insured Person with the following services for a period not exceeding 60 consecutive days per Trip for:

- Telephone medical consultation and referral arrangements
- Emergency medical transfers and evacuation
- Overseas funeral expenses or costs of cremation necessarily and reasonably incurred at the place of death
- The cost of returning the Insured Person's remains to Singapore or his country of origin
- Medical repatriation to the country of residence including mortal remains
- Arrangement of Compassionate Visit (air ticket and hotel accommodation) for one (1) relative to visit the Seriously Injured or III Insured Person.

We will pay the incurred costs of the above falling within the policy limit. All decisions as to its means of transportation and the final destination will be made by AXA Assistance Singapore and will be based solely upon medical necessity.

We will not pay anything under this Section for:

- a) Any service not provided or not arranged through AXA Assistance Singapore;
- b) Any Trip undertaken against the medical advice of a Medical Practitioner;
- c) Any Trip undertaken for the purpose of seeking medical or surgical treatment:
- d) Failure to keep and produce the original receipt of the expenses incurred;
- e) Any administrative charge levied by hotels and/or Telecommunication Company for connecting the telephone call to AXA Assistance Singapore.

Section 7: Accidental Death and Permanent Disability

If the Insured Person suffers Injury as a result of an Accident occurring during the Period of Insurance whilst he/she is travelling on, boarding or alighting from a Public Conveyance anywhere in the world outside the Insured Person's country of residence; and provided the fare of such conveyance has been fully charged to the Cardholder's HSBC Corporate Card; and

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If the Injury results in the Insured Person's death or Permanent Disability (described in the Table of Compensation) within one hundred and eighty (180) days from the date of the Accident, We will pay an amount in accordance to the Applicable Limit as shown in the Table of Compensation, subject to the following:

- a) This Policy does not pay for Permanent Disability that is not expressly described in the Table of Compensation;
- b) If a disability forms part of another disability, the higher of either benefit, but not both, will be payable and the total benefits payable shall not exceed the Applicable Limit;
- Our maximum aggregate liability arising out of one conveyance and from one single Accident shall be limited to US\$2.200.000:
- d) Death shall be presumed by reason of the Insured Person's disappearance following an Accident provided that one (1) calendar year has passed since the disappearance and We, having examined all the evidence, are satisfied that the Insured Person has died as a result of Injury and on condition that a written undertaking is given to Us from the claimant that the death benefit payment will be immediately refunded to Us if the Insured Person is subsequently found to be alive.

TABLE OF COMPENSATION		
Death / Permanent Disability	Applicable Limits	
Death	100%	
Permanent Total Disability	100%	
Loss of two (2) Limbs	100%	
Loss of sight in both eyes	100%	
Loss of one (1) Limb and Loss of sight in one (1) eye	100%	
Loss of one (1) Limb	50%	
Loss of sight in one (1) eye	50%	
Loss of a thumb and index finger of the same hand	25%	

Section 8: Overseas Medical Expenses

If the Insured Person suffers Injury or Illness and seek medical treatment whilst overseas and within ninety (90) days from the date of the Injury or Illness, We will reimburse the reasonable and necessarily incurred Medical Expenses subject to the maximum amount shown corresponding to this Section in the Table of Benefits.

Section 9: Post Trip Medical Expenses

If the Insured Person suffers Injury or Illness whilst overseas and seek medical treatment upon return to Singapore, We will reimburse the reasonable and necessarily incurred Medical Expenses provided the date of return to Singapore is within the Period of Insurance and subject to the maximum amount shown corresponding to this Section in the Table of Benefits.

The medical treatment in Singapore must fall within the following time limit:

- If medical treatment is sought whilst overseas, the Insured Person has up to fourteen (14) days from the date of return to Singapore to seek medical treatment; or
- If prior treatment has not first been sought whilst overseas, he/she has up to five (5) days from the date of return to Singapore to seek the first treatment and up to fourteen (14) days from the first treatment in Singapore to seek follow up treatment.

Our maximum liability under Sections 8 and 9 is \$500 per trip for Dental Treatment or treatment by Chinese Physician or Chiropractor.

We will not pay anything under Sections 8 and 9 for:

a) Meals and other incidental expenses except for those incurred during hospitalization.

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- b) Medical equipment and aids (such as prostheses, crutches) unless prescribed by the attending Medical Practitioner.
- c) Hearing aids, dentures and any treatment for cosmetic purposes.
- d) Dental Treatment due to tooth or gum or oral diseases, or from normal wearing of teeth.
- e) Medical Expenses incurred before the trip.

GENERAL EXCLUSIONS

This Policy does not cover and We do not pay for any loss or expenses directly or indirectly resulting from:

- 1. Any Pre-Existing Medical Condition.
- 2. Suicide or attempted suicide or deliberately self-inflicted Injury, regardless whether the Insured Person is sane, insane or under any mental distress;
- 3. Any criminal or illegal act committed by the Insured Person;
- 4. Participation (including any act of provocation) in strike, riot, civil commotion, hijack, murder or assault;
- 5. Detention or confiscation by customs or other authorities;
- 6. War, invasion, act of foreign enemy, hostilities or warlike operations (whether war be declared or undeclared), civil war, rebellion, revolution, insurrection or military or usurped power, terrorism howsoever arising or any act thereof;
- 7. Any act of nuclear, chemical or biological terrorism, regardless of any other cause or event contributing concurrently or in any other sequence to the Injury;

GENERAL CONDITIONS

1. Entire Contract, Changes and Delivery of Notices

This Policy (including the application, declaration, endorsements and any attached documents) shall constitute the entire contract of insurance between You and Us and any word or expression to which a specific meaning has been attached in any of them shall bear such meaning throughout.

No change in this Policy shall be valid unless approved by and endorsed in writing by Us. Every notice or communication to be given or made under this Policy shall be delivered to Us in writing.

2. Due Observance

Your and/or the Insured Person's due observance and fulfilment of the Terms of this Policy insofar as they relate to anything to be done or complied with by You and/or the Insured Person and the truth of statements and any declaration made by You shall be a condition precedent to Our liability to make any payment under this Policy.

3. Policy Commencement and Automatic Renewal

This Insurance takes effect at midnight on the Effective Date stated in the Schedule and, subject to the Termination of Cover provision, shall remain in force up to the anniversary date. At the anniversary date, this Policy shall be automatically renewed for a further one (1) year period provided premium has been paid by You to Us.

4. Premium

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- The actual premium payable for this Insurance is calculated by applying the premium per Cardholder to the total number of Cardholders for the Period of Insurance.
- On or before the Effective Date (or anniversary date thereafter), You must first pay Us a Provisional Annual Deposit Premium.
- At the end of each Period of Insurance, if the actual premium payable exceeds the Provisional Annual Deposit Premium, You must pay Us the difference. Actual premium payable shall be computed by applying a rate of 50% on the difference between the actual premium payable and the Provisional Annual Deposit Premium.

5. Cancellation of Your Policy

You may cancel this Policy at any time by giving Us prior written notice. We may cancel this Insurance by giving You no less than one hundred and twenty (120) days' notice, or any shorter period of notice as mutually agreed, to Your last known addresses. After cancellation, We will refund You the pro rated unearned portion of the premium You have paid.

6. Termination of Cover

Cover for each Insured Person shall terminate on the earliest of:

- An anniversary date of this Policy unless otherwise extended by payment of premium;
- The cancellation of the Policy;
- The death of the Insured Person:
- When the maximum payment in respect of the Insured Person has been made under the Policy.

7. Claim Notification and Co-operation

On the happening of any event likely to give rise to a claim under this Policy, the Insured Person (or their legal personal representative in the event of death of the Insured Person) must promptly take reasonable steps to notify Us of the event. The Insured Person (or their legal personal representative in the event of death of the Insured Person) must complete Our claim form and send it to Us as soon as reasonably practicable and provide Us with any other information and/or documents or help which we may request to support the Insured Person's claim. Written notice of claim must be given to Us no later than thirty (30) days from the date of the Accident. The Insured Person or their legal personal representative must also give Us, at their expense, all the help and information and/or documents We request failing which We have the right not to make any payment under the Policy.

8. Physical Examination and Autopsy

At Our expense, We shall have the right to examine the Insured Person when and as often as it may reasonably require. In the event of death of the Insured Person, reasonable notice shall be given to the Company before the interment or cremation and We may require or be represented at a post-mortem examination on the body of the Insured Person. At Our expense, We shall also have the right to make an autopsy where it is not forbidden by law. Immediate notice of time and place shall be given to Us before the holding of any inquest.

9. To Whom Payments Are To Be Made

Any payment under the Policy is payable to the Insured Person. In the event of death of the Insured Person, payment under the Policy is payable to the estate of the Insured Person.

10. Fraudulent, Wilful or Wilfully Negligent Acts

No payment shall be made if the Insured Person's claim is found to be fraudulent or intentionally exaggerated or if any false declaration or statement be made in support thereon.

11. Notice of Trust or Assignment

We shall not be bound to accept or be affected by any notice of any trust, charge, lien, assignment or other dealing with or relating to this Policy.

12. Maintenance of Records and Declarations

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You shall maintain records of the Insured Persons showing with respect to each Insured Person, the essential particulars of this Insurance. You shall within 14 days from the last day of each calendar month, declare to Us in such manner and in such form We shall require, the total number of Cardholders.

13. Arbitration

If any difference and/or dispute shall arise under this Policy, such difference shall be referred to an arbitrator to be appointed in accordance with the statutory provisions for the time being in force. Where any difference and/or dispute is by this condition to be referred to arbitration, the making of an award shall be a condition precedent to any right of action against Us. Unless any such action or suit be commenced within six (6) months of the making of an award, We shall not be liable to make any payment in excess of the amount of the award.

14. Legal Proceedings and Operation of Law

This Policy shall be construed according to and governed by Singapore law. No action shall be brought to recover any sum under this Policy prior to the expiration of sixty (60) days after written proof of claim has been furnished in accordance with the requirements of this Policy. The parties submit themselves to the exclusive jurisdiction of the Singapore courts for the resolution of any conflict or dispute with regards to this Policy except where the circumstances are governed by the Condition 15 (Arbitration).

15. Currency

All amounts shown in this Policy are in Singapore dollars. Premiums and claims payable under this Policy shall also be in Singapore dollars.

16. Exclusions of Rights Under the Contracts (Rights of Third Parties) Act

A person who is not a party to this Policy shall have no right under the Contracts (Rights of Third Parties) Act (Cap. 53B) to enforce any of its terms.

17. Sanction Clause

Under no circumstances shall this insurance contract be deemed to provide cover and no liability be incurred 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 Us to any sanction, prohibition, or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, United Kingdom, United States of America or Singapore.

18. Illegality Clause

Under no circumstances shall this contract of insurance be deemed to provide cover and no liability be incurred to pay or provide any benefit hereunder to the extent that the provision of such cover, payment of such claim or provision of such benefit would cause us to be in breach of, or expose us to any prohibition, or restriction under the laws or regulations of Singapore.

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