



Allianz Insurance Lanka Ltd

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ALLIANZ TRAVEL POLICY

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PREAMBLE

This Overseas Travel Insurance Policy (hereinafter referred to as the “Policy”) is a legal contract between the Insurer, [ALLIANZ INSURANCE LANKA LIMITED], and the Policyholder, as named in the Schedule or the Schedule of Benefits (hereinafter individually referred to as “Insured”). This Policy provides comprehensive protection for individuals traveling internationally—whether for business, education, or leisure, subject to the terms, conditions, exclusions, and limitations set forth herein.

Coverage is granted solely on the basis of the representations and disclosures made at the time of the policy issuance and is conditional upon payment of the required premium. The benefits provided under this Policy are intended to mitigate certain financial risks arising from unforeseen events during travel, including but not limited to emergency accident and sickness medical benefit, trip delay, personal accident and loss of baggage.

It is the responsibility of the Policyholder to read this Policy Wording carefully and ensure a clear understanding of the scope of coverage, obligations, claim procedures, and exclusions applicable. By accepting this Policy, the Policyholder expressly agrees to be bound by all its terms and conditions.

Anura Perera
Chief Underwriting Officer

TABLE OF BENEFIT

The table below sets out the benefits that apply to each of the plans listed and the maximum amount we will pay for all claims combined under each benefit. This table is a summary only. Please carefully read the Allianz Travel Insurance Policy Wording in full before starting the journey to ensure you understand the extent of cover provided and limitations that apply.

ALLIANZ TRAVEL INSURANCE BENEFIT TABLES

Single Trip Plan

Section	Benefit	Limits - in USD	
		Gold	Platinum
A	Overseas Emergency Accident and Sickness Medical Expenses	50,000	100,000
	Sickness Dental Relief (Filling & Extractions only)	500	500
	Covid – 19 Cover	Included*	Included*
	Repatriation of Mortal Remains	Included*	Included*
	Emergency Medical Evacuation	Included*	Included*
	Medical Continuation	Included*	Included*
B	Personal Accident Cover (including common carrier)	10,000	15,000
C	Loss of Common Carrier Checked in Baggage	1,000	2,000
D	Delay of Common Carrier Checked-in Baggage Deductible	150	200
		6 Hours	6 Hours
E	Loss of Passport	250	250
F	Personal Liability Deductible	50,000	100,000
		100	100
G	Hijack Cover (provided up to 30 consecutive days) Deductible	N/A	500
		N/A	24 Hours
H	Trip Delay Deductible	120	500
		6 Hours	6 Hours
I	Golfer's hole in one	N/A	250
J	Missed Departure/Connection	75	100
K	Home Safety (cover up to 30 days from the departure) Single Article Limit	2,500	5,000
		100	100
L	Trip Cancellation	1,000	2,000
M	Trip Curtailment	1,000	2,000

*Included – Included under the benefit limit of Overseas Emergency Accident and Sickness Medical Expenses benefit.

Senior Citizen Plan

Section	Benefit	Limits - in USD
		Senior Citizen
A	Overseas Emergency Accident and Sickness Medical Expenses	50,000
	Deductible	300
	Sickness Dental Relief (Filling & Extractions only)	500
	Deductible	150
	Emergency Medical Evacuation	Included*
	Covid – 19 Cover	Included*
	Repatriation of Mortal Remains	Included*
	Medical Continuation	Included*
B	Personal Accident Cover (including common carrier)	10,000
C	Loss of Common Carrier Checked in Baggage	1,000
D	Delay of Common Carrier Checked-in Baggage	150
	Deductible	6 Hours
E	Loss of Passport	200
F	Personal Liability	75,000
	Deductible	75
G	Hijack cover (provided up to 30 consecutive days)	N/A
	Deductible	N/A
H	Trip Delay	120 total
	Deductible	6 Hours
I	Golfer's hole in one	N/A
J	Missed Departure/Connection	75
L	Trip Cancellation	1,000
M	Trip Curtailment	1,000

*Included – Included under the benefit limit of Overseas Emergency Accident and Sickness Medical Expenses benefit.

Annual Multi Trip Plan

Section	Benefit	Limits - in USD	
		Annual Multi-Trip	Annual Multi-Trip Premier
A	Overseas Emergency Accident and Sickness Medical Expenses	100,000	200,000
	Sickness Dental Relief (Filling & Extractions only)	500	500
	Covid – 19 Cover	Included*	Included*
	Repatriation and Repatriation of Mortal Remains	Included*	Included*
	Emergency Medical Evacuation	Included*	Included*
	Medical Continuation	Included*	Included*
B	Personal Accident Cover (including common carrier)	15,000	30,000
C	Loss of Common Carrier Checked in Baggage	1,000	2,000
D	Delay of Common Carrier Checked-in Baggage Deductible	200	200
		6 Hours	6 Hours
E	Loss of Passport	250	250
F	Personal Liability Deductible	200,000	200,000
		100	100
G	Hijack cover – USD 100 per day with a maximum of USD 500 in total Deductible	500	500
		24 Hour	24 Hour
H	Trip Delay Deductible	500	500
		6 Hours	6 Hours
I	Golfer’s hole in one	250	250
J	Missed Departure/Connection	100	100
L	Trip Cancellation	2,000	2,000
M	Trip Curtailment	2,000	2,000

*Included – Included under the benefit limit of Overseas Emergency Accident and Sickness Medical Expenses benefit.

Student Plan

Section	Benefit	Limits - in USD	Limits - in USD	Limits - in USD
		Silver	Gold	Premier
A	Overseas Emergency Accident and Sickness Medical Expenses	50,000	100,000	200,000
	Sickness Dental Relief (Filling & Extractions only)	500	500	500
	Covid – 19 Cover	Included*	Included*	Included*
	Repatriation and Repatriation of Mortal Remains	Included*	Included*	Included*
	Emergency Medical Evacuation	Included*	Included*	Included*
	Medical Continuation	Included*	Included*	Included*
B	Personal Accident (including common carrier)	10,000	10,000	15,000
C	Loss of Common Carrier Checked in Baggage	1,000	1,000	2,000
	Single Article Limit	100	100	100
N	Tuition Fee Coverage	10,000	10,000	10,000
O	Accident to Sponsor Coverage (Tuition fee)	10,000	10,000	10,000
P	Family Visit Coverage	7,500	7,500	7,500

*Included – Included under the benefit limit of Overseas Emergency Accident and Sickness Medical Expenses benefit.

COVERAGE

Section A - Overseas Emergency Accident and Sickness Medical Expenses, Evacuation and Repatriation

1. Emergency Hospitalization

We will pay the Usual and Customary Charges, subject to the Deductible shown in the Policy Schedule or the Schedule of Benefits (refer to Schedule of Benefits of this Policy), for emergency medical treatment incurred by the Insured outside the geographical limits of Sri Lanka (excluding Pre-existing Condition) up to the maximum stated in the Policy Schedule or the Schedule of Benefits (refer to Schedule of Benefits of this Policy).

The expenses covered would include Usual and Customary Charges of emergency medical treatment, physician services, hospital and medical services including the cost of an ambulance to take you to hospital.

2. Dental Coverage

Dental services for immediate relief of dental pain in respect of filling and extraction are covered up to the policy limits shown for this section in the Policy Schedule or the Schedule of Benefits (refer to Schedule of Benefits of this Policy). However dental care rendered necessarily as a result of a covered accident shall be subject to the limit of cover as stated in the policy.

3. Medical Evacuation

When, in the opinion of the Assistance Company's medical panel, it is judged medically appropriate to move You to another location for treatment or return You to Sri Lanka, the Assistance Company will arrange the evacuation, utilizing the means best suited to do so, based on the medical evaluation of the seriousness of Your condition, and these means may include air ambulance, surface ambulance, regular airplane, railroad or other appropriate means. All decisions as to the means of transportation and final destination will be made by the Assistance Company. These expenses should be pre-approved by the Claims Administrator and subject to the Section A Sum Insured remaining (if any), prior to the medical evacuation.

4. Repatriation of Mortal Remains

The cost of repatriating the Insured's mortal remains to Sri Lanka, or up to an equivalent amount for the burial or cremation of the Insured in the country where the death occurred in the event of the Insured's death outside of Sri Lanka as a result of Accidental Bodily Injury and/or Sickness and/or Disease occurred or having first manifested itself during an insured journey. These expenses should be pre-approved by the Claims Administrator and subject to the Section A Sum Insured remaining (if any), prior to the remains being prepared for transportation to Sri Lanka or for local burial or cremation.

5. Medical Continuation

However if, You are still confined in a Hospital overseas after the Expiration Date of the Policy, and Emergency Medical Evacuation is not appropriate or recommended by the Assistance Company, and continued treatment overseas as an Inpatient in a Hospital is Medically Necessary, we will continue to provide the benefits for Covered Medical Expenses incurred to the earlier of your Hospital Discharge or 60 Days after the Expiration Date of the Policy.

or

In case of Medical Evacuation to hospital in Sri Lanka as per (3.) above and if approved by the Claims Administrator, and subject to the Section A Sum Insured remaining (if any), the Company will also indemnify the Insured in respect of the Medical Expenses incurred by him within Sri Lanka to continue medical treatment commenced by the Insured outside of Sri Lanka, as a result of the Insured first having sustained accidental bodily injury and/or sickness and/or disease during the course of the Insured's journey. The Company's liability to make payment hereunder shall be limited to a period of 60 days from and including the date upon which the aforesaid Accidental Bodily Injury and/or Sickness and/or Disease occurred or first manifested itself, and to Medical Expenses at the usual and customary level.

Exclusions Applicable for Section A

1. Any routine, physical or other examination where there is no objective indication of impairment or normal health, laboratory diagnostic or X-ray examinations except in the course of a disability established by the prior call or attendance of a Physician; or and for medical treatment obtained within Sri Lanka same

as provided for under section A-1.

2. The Company shall be under no liability to make payment of any medical expenses incurred beyond the expiry of the policy period.
3. The Company shall be under no liability to make payment hereunder in respect of any claim directly or indirectly caused by/ based on/ arising out of or how so ever attributable to any of the following:
Where the Insured is;
 - a) travelling against the advice of a Physician; or receiving or on a waiting list for receiving specified medical treatment, or is travelling for the purpose of obtaining treatment; or has received a terminal prognosis for a medical condition; or
 - b) service, supplies, or treatment, including any period of Hospital confinement, which were not recommended, approved, and certified as Medically Necessary by a Physician; or
 - c) Treatment for any illness/sickness which was pre-existing prior to purchase of the policy or any sickness and/or ailment due to pre-existing condition and/or exacerbate due to a pre-existing condition.
 - d) Elective, cosmetic, or plastic surgery, except as a result of an Injury caused by a covered Accident while Our Policy is in Force; or
 - e) Suicide, attempted suicide (whether sane or insane) or intentionally self inflicted Injury or Illness, or sexually transmitted conditions, mental or nervous disorder, anxiety, stress or depression, Acquired Immune Deficiency Syndrome (AIDS), Human Immune deficiency Virus (HIV) infection; or
 - f) Pregnancy and all related conditions, including services and supplies related to the diagnosis or treatment of infertility or other problems related to inability to conceive a child; birth control, including surgical procedures and devices; or
 - g) The cost of dentures, dental appliances, false limbs, hearing aids, eyeglasses, contact or corneal lenses or spectacles (prescribed or otherwise)
 - h) The diagnosis and treatment of acne; or
 - i) For any costs incurred in connection with rest cures or recuperation at spa or health resort, sanatorium, convalescence home or other similar institutions.
 - j) Treatment provided in a government Hospital or services for which no charge is normally made and Ayurvedic Treatment.
 - k) Treatment of any congenital anomalies/defects.
 - l) Professional fees charged by a member of the immediate family of the Insured.
 - m) The additional cost of single or private room at a hospital, clinic or nursing home except when the medical practitioner considers it necessary and approved by the Claims Administrator.

- n) Medical expenses are incurred as the result of alcohol and/or drug abuse, addiction or overdose.
 - o) Treatment or services provided by a health spa, convalescent, physiotherapist or nursing home or any rehabilitation center unless agreed by the Emergency Medical Assistance Service.
 - p) Travelling to a country, specific area or event when the Sri Lanka Government or regulatory authority in a country to/from which the Insured is travelling has advised against all travel.
4. All Exclusions Applicable for Section B (Personal Accident Section).

Section B – Personal Accident

1. The Company will pay the Section B Sum Insured specified in the selected plan or a percentage of it, in the event, the Insured sustains Accidental Bodily Injury resulting in one of the following losses shown in the Table of losses given below.

If more than one loss results from any one Accident, only one amount, the largest, will be paid.

Loss of:	% of Sum Insured Offer
Life	100%
Both Hands or Both Feet	100%
One Hand and One Foot	100%
Either Hand or Foot and Sight of One Eye	100%
Speech and Hearing in Both Ears	100%
Either Hand or Foot	50%
Sight of One Eye	50%
Speech	50%
Hearing in Both Ears	50%
Thumb and Index Finger of Same Hand	25%

2. Furthermore, in the event of following status of paralysis, compensation will be paid as follows.

Quadriplegia	100%
Paraplegia	50%
Hemiplegia	50%
Uniplegia	25%

- a) Provided always that the policy will not pay under more than of the foregoing sub clause in respect of the same Accident and in excess of the amount stated in the selected plan.
- b) The Company will be liable to pay 50% of the Sum Insured stated in the selected plan in respect of the death of the insured person if the Insured person's age is under 16 years; to be calculated at the time of affecting this insurance.

- c) Disappearance – The company will pay the benefit for loss of life whilst on trip, if insured person’s body cannot be located within 365 days after the forced landing, stranding, sinking or wrecking of a conveyance in which insured person was a passenger or as a result of any Act of God, in which case it shall be deemed, subject to all other terms and provisions of the policy, that insured person shall have suffered loss of life within the meaning of the policy. However, the burden of proving the insured’s loss of life beyond reasonable doubt will solely be upon the legal personal representative of the insured.

Exclusions Applicable for Section B

1. The Company shall be under no liability to make payment of any Accidental Death or Bodily Injury beyond the expiry of the policy period.
2. The Company shall be under no liability to make payment hereunder in respect of any Claim directly or indirectly caused by, based on, arising out of or how so ever attributable to any of the following.
 - a) Amateur sports involving physical contact and other sport activities in sports and leisure. In any event there shall be no cover under this insurance for skydiving, flying, acrobatics, stunting, mountaineering, randonnee, bungee jumping, rock climbing or mountaineering (normally requiring the use of ropes and Guides), caving or potholing, rafting or canoeing involving white water rapids in excess of grade parachuting, paragliding, motor sports or competitions, hunting or equestrian competitions, yachting or boating outside coastal water (12 miles), scuba diving at a depth of more than 30 meters, professional sports, riding or driving in races or allies.
 - b) Loss arising from accidents as a driver on a motorised vehicle, unless at the time of the accident the Insured is in possession of a valid international driving license and while riding a two-wheeler is wearing a safety crash helmet.
 - c) Aviation, other than solely as a fare paying passenger, and duly certified multi engine passenger carrying aircraft, flown in the course of licensed operations for the transportation of passengers by a properly licensed crew.
3. Losses arising directly or indirectly from manual work (not including bar work, waitressing, fruit picking and other similar light casual work not requiring the use of machinery or power tools) or hazardous occupation, self- exposure to needless perils (except an attempt to save a human life), or if engaging in any criminal or illegal act.
4. All exclusions applicable for Section A.

Section C – Loss of Common Carrier Checked In Baggage

The company will pay benefits, in the case of permanent loss of an entire piece of Checked Baggage, held in care, custody and control of a Common Carrier, due to theft or due to misdirection, while the Insured is a ticketed passenger on the Common Carrier during the course of an Insured Journey. Benefits will only be payable in case of the loss of an entire piece of checked baggage, and not for damage to the baggage or partial loss of its contents.

We will reimburse the Insured, subject to the Deductible and up to the maximum limit shown in the Policy Schedule or the Schedule of Benefits, for the cost of replacement of the entire baggage and its contents. All claims must be verified by the Common Carrier.

The maximum amount to be reimbursed per bag is 50%, and the maximum value per article contained in any bag is 10%, of the amount stated in the Policy Schedule or the Schedule of Benefits.

1. The Company's liability to make payment shall not arise until liability is admitted by the Airline. If any compensation paid or payable by the Airline, Company's liability is only to indemnify the excess amount if any.
2. In case of the same baggage being covered under any other insurance, the policy will contribute its ratable proportion.
3. Loss of Checked in Baggage during the trip will be covered only subject to proof of ownership of the lost baggage.
4. The Company reserves the right to replace or pay the intrinsic value of any lost article maximum up to the amount stated in the selected plan.

Exclusions Applicable for Section C

In addition to the General Exclusions listed in this Policy coverage section shall not cover any non-Documented Loss and We will not be liable under this section for any:

1. Excluded classes of property: animals, motor vehicles(including accessories), motorcycles, boats, motors, any conveyance, (except bicycles while checked as baggage with a Common Carrier), snow skis, household effects, antiques, electronic equipment such as computers (including software and accessories), personal data assistants or handheld computers, cellular phones, digital video disc player, compact disc player, video camcorder, contact/corneal lenses, spectacles dentures, eyeglasses or prosthetic limbs, hearing aids, personal money, stamps, all kind of securities such as credit cards, debit cards, checks, traveler checks, membership cards, tickets or documents, fragile articles or business good and samples, data recorded on tapes, cards, discs or otherwise, musical instruments, jewellery, gemstones, perishables and consumables;
2. Loss to the Insured's personal or checked in baggage as a result of the confiscation or detention by customs, police or any other authority.
3. Loss caused by the Insured's failure to make reasonable steps to safeguard against the loss of the baggage.
4. Benefits for Baggage Loss will be in excess of all other valid and collectible insurance.
5. Benefits for Baggage Loss will be in excess of any amount paid or payable by the Common Carrier responsible for the loss.
6. Loss of Your baggage sent in advance or souvenirs and articles mailed or shipped separately.

Section D – Delay of Common Carrier Checked in Baggage

The Company will reimburse the insured up to the Section D Sum Insured specified in the selected plan in respect of the insured's emergency purchases of toiletries, medication and clothing to replace those contained in checked baggage, the arrival of which is delayed more than the deductible shown on the Policy Schedule or the Schedule of Benefits from the time the insured arrive at the destination outside of Sri Lanka, as stated on the Insured's ticket. The Insured must be a ticketed passenger on a Common Carrier. Additionally, all claims must be verified by the Common Carrier who must certify the delay or misdirection.

1. It is a condition precedent to the Company's liability hereunder that upon discovering the delay in arrival of the checked in baggage the insured shall obtain written non delivery confirmation from the Airline along with period of delay, which must be submitted to the Claims Administrator in the event of a Claim.
2. The Company's liability to make payment shall not arise until liability is admitted by the Airline. If any compensation paid or payable by the Airline, Company's liability is only to indemnify the excess amount if any.
3. The Claim payment is subject to the submission of the original purchase receipts and evidence to prove the period of delay.

Exclusions Applicable for Section D

1. Any Baggage Delay incurred in Sri Lanka.

Section E – Loss of Passport

In the event of the Insured's loss of passport outside the geographical limits of Sri Lanka, the Company will pay the Insured the Section E Sum Insured specified in the selected plan towards expenses necessarily incurred by the Insured in obtaining a duplicate and or fresh passport.

Exclusions Applicable for Section E

1. Loss of Insured's passport as a result of the confiscation or detention by customs, police or any other authority.
2. Loss of Insured's passport which is not reported to the appropriate police authority within 24 hours of the discovery of the loss and in respect of which an official report from such police authority has not been obtained.
3. Loss of Insured's passport caused by the Insured's failure to take reasonable steps to guard against such loss.
4. Any loss of passport whilst left unattended at any time.
5. Liability for travel expenses incurred in relation to obtaining a fresh passport.

Section F – Personal Liability

The Company will indemnify the insured up to the Section F Sum Insured (less the deductible) specified in the Policy Schedule or Schedule of Benefits against any legal liability incurred by the Insured in his private capacity to pay damages for third party civil claims arising out of third party accidental death, bodily injury or accidental property damage occurring during the insured journey.

1. No deductible shall be applicable in respect of the legal liability incurred by the Insured in his private capacity to pay damages for third party Accidental Bodily Injury.
2. The Company's liability to indemnify the Insured under this section shall be to the expenses finally determined by a foreign court of law or otherwise as consented to in advance by the Company. In the event that legal action is taken against the Insured within Sri Lanka, it is a condition precedent to the Company liability hereunder that the Insured shall:

- a) Give immediate written notice to the Company to the address specified in the schedule, and

Not incur any defense costs or expenses, admit liability for or settle or attempt to settle, make any admission or offer any payment or otherwise assume any contractual obligation with respect to any claim or claimant without the prior written consent of the Company, which shall be entitled (but in no case obligated) at any time to take over and conduct in the name of the Insured the defense and/or settlement of any action or Claim and shall be entitled at all times to receive the Insured's corporation and assistance and to appoint lawyers on the Insured's behalf. Any and all costs and expenses incurred by the Company or the lawyer appointed by the Company shall be a first charge on the Sum Insured hereunder.

- b) The Company shall not settle any Claims without the express consent of the Insured, but if the Insured refuses an available settlement recommended by The Company then the Company's liability shall thereafter be restricted to the amount by which the Claim could have been settled.

Exclusions Applicable for Section F

1. the Insured's liability to any employee (whether under a contract of or for service).
2. bodily Injury to and/or damage to property belonging to the Insured's family, any co-worker of the Insured, and any travelling companion of the Insured;
3. any liability for bodily injury and/or property damage arising directly or indirectly from or due to:
 - (a) livestock belonging to the Insured or in the Insured's care, custody or occupation.
 - (b) any willful malicious, criminal or unlawful act, error, or omission
 - (c) the pursuit of any trade, business or profession, employment or occupation;
 - (d) parachuting , hang gliding, hot air ballooning or the use of firearms or any other dangerous or hazardous activity
 - (e) the ownership, possession or use of vehicle, aircraft, or watercraft
 - (f) the use or misuse of any alcohol, hallucinogenic substance, drugs (except those used medically prescribed), or drug addiction;
 - (g) the supply of goods or services
 - (h) any claim resulting from transmission of an illness or disease by Insure
 - (i) any form of ownership or occupation of land or building (other than occupation only of any temporary residence)

- (j) liability arising out of sexual molestation, corporal punishment or physical or mental abuse.
- (k) liability arising out of the use, sale, manufacture, delivery, transfer or possession of a controlled substance or contraband as defined by any appropriate authority.
- (l) bodily injury to any person eligible to receive any benefit voluntarily provided or required to be provided by insured person under any workman compensation law, non occupational disability law or occupational disease law or any other similar law.

Section G – Hijacking

For each 24 hour period the Insured is detained by hijackers following hijacking of any aircraft in which the insured is travelling, the Company will pay the sum specified in the selected plan.

Section H – Trip Delay

If the aircraft on which the Insured is booked to travel is delayed beyond 06 hours than the original scheduled departure time, the Company will reimburse Reasonable Additional Expenses for Trip Delay, subject to the maximum shown in the Policy Schedule or the Schedule of Benefits in the selected plan (Excluding domestic aircraft).

Exclusions Applicable for Section H

1. For any departure which is delayed as a result of the Insured or the Insured's traveling companion, failing to check-in on time as required by the Airline.
2. For any delayed departure caused by strike or industrial action known to exist or was anticipated at the time the trip was booked.
3. If the aircraft is taken out of service on the instructions of the Civil Aviation Authority or similar authority
4. Any expenses incurred in Sri Lanka

Section I – Golfer's hole in one

Company shall reimburse expenses incurred in celebration of achieving a hole-in-one by the insured during the trip, anywhere in the world excluding Sri Lanka, in a United States Golf Association (USGA) recognised golf course subject to maximum limit in the selected plan.

1. Hole-in-one must be scored in an official game (not practice).
2. It must be certified/attested by the club and other players.

Section J – Missed Departure/Connection

Company will pay up to the amount stated in the schedule of the selected plan for reasonable additional travel and accommodation expenses necessary to reach your booked holiday destination should the Insured arrive at his/her international departure point too late to commence his/her journey (or if any intermediate connecting

point) as a result of failure of public transport services due to strike, industrial action, adverse weather conditions, traffic flow congestion or mechanical breakdown of the vehicle in which you were travelling to reach your international departure point (or if any intermediate connecting point). The Company shall reimburse expenses incurred for travel and accommodation up to the maximum amount stated in the selected plan.

Section K – Home Safety

Company will pay up to the amount stated in the schedule of the selected plan for the loss or damage to your household contents caused by burglary (forcible, violent and external means only) when the Insured's principal residence in Sri Lanka is left vacant whilst he/she is overseas up to a maximum of 01 (One) month.

The company at its option will reinstate, repair or make payment to indemnify the insured against such loss or damage.

1. The Insured shall take all reasonable precautions for the safety of the Property including securing all doors and windows and other means of entry, and otherwise.
2. If at the time of any loss or damage there be any other insurance effected by or on behalf of the Insured covering any of the Property the liability of the Company hereunder shall be limited to its ratable proportion of such loss or damage.
3. Upon the discovery of any loss or damage to the Property,
 - a. The insured must give notice to the police and render upon discovery all reasonable assistance in causing the discovery and punishment of any guilty person and in tracing and recovering the property.
 - b. Give immediate notice thereof to the Company and give written notification within seven days along with all such detailed proof and particulars as may be reasonably required.

Section L – Trip Cancellation

The company will pay for the loss of deposits up to the amount stated in the schedule of the selected plan, if prior to the contracted departure date, the insured trip is cancelled and the insured is prevented from taking the trip due to a serious sickness, serious injury or death to the insured, insured persons travelling companion, insured's immediate family member or travelling companion's immediate family member.

The company will reimburse the insured for the non-refundable, unused portion of the hotel cost and/or common carrier ticket charges provided that the insured booked and paid for these costs, before such sickness, injury or death occurred.

The Insured must notify the company immediately in the event of a trip cancellation. The company will not be liable for any additional charges incurred, if any, resulting from the non notification of the cancellation immediately.

Section M – Trip Curtailment

The company will reimburse the insured person up to the amount stated in the schedule of the selected plan, for the non refundable unused portion of travel or accommodation costs or additional accommodation and/or travel expenses (excluding telephone cost, meals and beverages) paid by the insured following necessary curtailment of the insured journey and if the insured person has to directly return to Sri Lanka from overseas due to,

1. the aircraft on which insured person is on board as a passenger is hijacked.
2. natural disaster which has prevented the insured from continuing with the scheduled trip.
3. unexpected strike, riot or civil commotion which are beyond the insured's control.
4. unexpected death, serious injury or sickness of the insured person, insured person's travelling companion, insured person's immediate family member or insured person's traveling companion's immediate family member.

Section N – Tuition Fee Coverage

In the event the Insured is unable to continue the school semester due to any of the following reasons, arising during the policy period, the Company shall reimburse the tuition fee paid in advance for the current semester, subject to the maximum limit shown in the schedule or schedule of benefits of the selected plan:

1. Serious Injury or Sickness to the Insured requiring hospitalization, as per the policy coverage.
2. Death or serious injury requiring hospitalization of either parents of the insured.

This coverage is also subject to the exclusions of Personal Accident and Medical Expenses section of the policy.

Section O – Accident to Sponsor Coverage

In the event of the sponsor named in the policy schedule meets with an accident during the policy period, which results in his/her death or permanent total disability during the policy period, the company shall reimburse the remaining school fees subject to maximum the limit shown in the schedule or schedule of benefits of the selected plan. The coverage is also subject to the exclusion under the personal accident section of the policy.

1. Section P – Family Visit Coverage

In the event of the Insured being hospitalized as a result of an accidental injury or sickness covered under the policy and the attending physician in writing advise the necessary attendance of an family member of the Insured, the Company will reimburse the actual cost of economy class transportation by the most direct route via a common carrier subject to the maximum Sum Insured. For this purpose, family members shall mean spouse, parent, sibling and in laws of the insured.

KEY DEFINITIONS

The following words or terms will have the meaning described below wherever they appear in this Policy, and reference to the singular will include the plural wherever the context so permits:

The Company, We, Our, Us

Means Allianz Insurance Lanka Ltd

You, Your, Yourself

Means the insured

Immediate Family Member

Means an Insured Person's legal spouse; children; parents; parents-in-law; legal guardian; ward; step-parents; Children-in-law; who reside in Sri Lanka

Claims Administrator

Means the person or organization named in the Schedule

Medical Advisors

Means the medical practitioner appointed by the Claims Administrator

Physician

Means a qualified medical practitioner holding a valid license (issued by the appropriate authority in the jurisdiction within which he/she operates) and acting within the scope of such license. "**Physician**" shall not include any member of the Insured's family.

Medical Expenses

Means medical expenses (including those for medicines, Physicians, hospitals, ambulances, medical procedures and services) that in the written opinion of the Claims Administrator and the treating Physician, expressed at the time of examination or treatment of the Insured, are medically necessary in order to maintain life and/or relieve immediate pain or distress caused by Sickness and/or Disease and/or Accidental Bodily Injury, first manifested and/or sustained during the policy period.

Loss of Eye

Means the total and irrecoverable loss of sight from either or both eyes.

Loss of Limb

Means the loss of one or both hands or one or both feet by permanent physical severance at or above the wrist or ankle and includes the total and permanent loss of use of either or both hands or either or both feet.

Permanent Total Disablement

Means disablement which entirely prevents you from engaging in or attending to any occupation whatsoever for at least 6 months after the date of accident causing the disablement and at the expiry of that period being beyond hope of improvement.

Checked In Baggage

Means the baggage checked-in by the insured and accepted by the Common Carrier for international transportation in the same common carrier as the Insured and for which the common carrier has provided a baggage receipt, and

the contents of the baggage checked-in by the Insured, so long as such contents do not violate any common carrier policy or rules.

Personal Baggage

Means your suitcases and similar containers, their contents and articles carried or worn by you including your valuables (as defined below) stamps, documents, contact or corneal lenses, dentures, hearing aids, spectacles, fragile articles or business goods and samples.

Professional Sports

Means a sport, which remunerates a player in excess of 50% of his or her income as a means of their livelihood.

Valuables

Means photographic equipment, audio, video, computer, telecommunications and electrical equipment, telescopes, binoculars, spectacles, antiques, watches, jewellery, furs and articles made of precious stones and metals which the insured has proof of the values and ownership.

Intrinsic Value

Means the actual cash value of the item at the time of loss or damage including appropriate deductions for wear and tear.

Personal money

Means Sri Lankan Bank notes and coins, foreign currency, travellers cheques, cheques, postal and money orders, travel tickets, petrol coupons and credit vouchers being carried by you or whilst in a locked safe or safety deposit box.

Policy Period

Means the period between the commencement date specified in the Policy Schedule, being the date upon which the Insured first boards the common carrier by which it is intended that he/she shall finally leave Sri Lanka for the Insured Journey, or the actual date upon which the Insured boards as aforesaid so long as that is within 14 days of the commencement date as specified in the Policy Schedule, and the expiry date specified in the Policy Schedule or provided that this Policy is automatically extended for a period of 7 days and if the Insured Journey is delayed solely due to delay by the Scheduled Airline, which is beyond the control of the Insured, and no alternative air transportation is made available to the Insured or the date upon which the Insured returns to Sri Lanka, whichever is earlier.

Accident and Accidental

Means a sudden, unforeseen, uncontrollable and unexpected physical event to the Insured Person caused by external, violent and visible means occurring during the Insured Period.

Bodily Injury

Means any accidental physical bodily harm evidenced by external signs such as contusion, bruise and wound except in cases of drowning and internal injury but does not include any sickness or disease.

Usual and Customary Level

Means a reasonable charge which is;

- 1) charged for medical treatment, supplies or medical services that are medically necessary to treat Your condition;
- 2) does not exceed the usual level of charges for similar medical treatment, supplies or medical services in the locality where the expense is incurred.
- 3) does not include charges that would not have been made if no insurance existed.

Policy

Means the proposal, the Schedule, the Policy documents and any endorsements attaching to or forming part hereof either on the commencement date or during the Policy Period.

Sickness

Means a condition or an ailment affecting the general soundness and health of the Insured's body that first manifests itself during the Policy Period and for which immediate treatment by a Physician is necessary.

Disease

Means an affliction of the bodily organs having a defined and recognized pattern of symptoms that first manifest itself during the Policy Period and for which immediate treatment by a Physician is necessary.

Deductible

Means the amount stated in the Schedule or Schedule of benefits, which shall be borne by the Insured in respect of each and every Claim made under this Policy. The Company's liability to make any payment under the Policy is in excess of the Deductible.

Theft

Means dishonest misappropriation by any person of the Insured's property with the intention to permanently deprive the Insured of that property.

Sum Insured

Means the amount stated in the Schedule against each relevant section, which shall be the Company's maximum liability under this Policy (regardless of the number of Claims made) for any one Claim and in the aggregate for all Claims under such section.

Claim

Means a Claim under an operative part of this Policy in respect of an insured event that has taken place or is likely to take place. All Claims resulting from one and the same event or circumstance shall jointly constitute one Claim under this Policy and as having been made at the time when the first Claim was made in writing, and the Deductible shall be applicable to each section independently.

Common Carrier

Means any civilian land or water conveyance or scheduled aircraft in each case operated under a valid license for the transportation of passengers for hire.

Schedule

Means the schedule, and any annexure to it, attached to and forming part of this Policy.

Insured Journey

Means any journey undertaken during the Trip which commences when the passenger boards the common carrier from Sri Lanka for onward overseas journey and terminates when he disembarks on return to Sri Lanka or the Expiration date whichever is earlier.

Medical Evacuation

Means the removal of the Insured from abroad to a hospital within Sri Lanka, where necessary medical care can be provided, including any medical care required en route.

Property Damage

Means actual physical damage to tangible material property belonging to a third party.

Damages

Means monetary sums payable pursuant to judgements or awards but shall not include fines, penalties, punitive damages, exemplary damages, any non-pecuniary relief, or any other amount for which an Insured is not financially liable, or which is without legal recourse to the Insured, or any matter that may be deemed to be uninsurable under Sri Lankan Law.

Pre-existing condition

Means any injury, sickness, disease or other physical, medical, mental or nervous condition, disorder or ailment that, with reasonable medical certainty, existed at the time of obtaining the insurance or existed any time prior to departure, whether or not previously manifested or symptomatically diagnosed, treated or disclosed prior to the effective date, including any subsequent chronic or recurring complications or consequence related thereto or arising therefrom.

Hijacked

Means the unlawful seizure or wrongful exercise of control of an aircraft or other Common Carrier, or the crew thereof, in which You are traveling as passenger.

Reasonable Additional Expense

Means any expenses for meals and lodging which were necessarily incurred as the result of a trip delay and which were not provided by the Common Carrier or any other party free of charge.

Travelling Companion

Means up to two (2) person(s) who is / are booked to accompany an Insured Person on the Insured Journey.

Serious Injury or Sickness

Means injury or sickness certified as being dangerous to life by a legally qualified physician.

Sound Natural Teeth

Means natural teeth that either are unaltered or are fully restored to their normal function and are Disease-free, have no decay and are not more susceptible to Injury than unaltered natural teeth.

Prevented From Taking the Trip

(i) Means with regard to Serious Sickness or Injury to the Insured or the Insured's Traveling Companion, a Physician has recommended that due to the severity of the condition it is Medically Necessary that the Insured or the Insured's Traveling Companion cancel the Trip. The Insured or the Insured Traveling Companion must be under the direct care and supervision of a Physician.

(ii) Means with regard to Serious Sickness, Injury or death of the Immediate Family Member of the Insured or the Insured's Traveling Companion, the severity or acuteness of their condition or the circumstances surrounding that condition is/are such that an ordinarily prudent person must cancel the Trip.

(iii) Death to the Insured, the Insured persons travelling companion, the Insured person's immediate family or the Insured persons travelling companion's immediate family.

CONDITIONS

1. The deductible applicable as per the selected plan would be applicable in respect of each and every Claim made under the policy and the Company's liability would be restricted to the Section A Sum Insured as per the selected plan during the policy period.
2. The Insured shall not admit any liability or make any offer or promise of payment without the prior written consent of the Company.
3. The Insured shall take all reasonable and proper steps to safeguard and protect himself and his possessions against any fact, matter, circumstance or cause that might result in a claim under this Policy, and shall not do or cause to be done anything that might enhance the likelihood of a claim under this Policy (except in an attempt to save human life).
4. This Insurance Policy is a contract between the Company and the Insured Person. The Insured Person shall not transfer, assign, alienate or in any way pass the benefits and/or liabilities to any other person, Institution, Hospital, Company or Corporate Body without specific prior approval in writing by a duly authorized officer of the Company, However, if the Insured Person(s) is permanently incapacitated or deceased, the legal heirs of the Insured may represent him in respect of claim under the Policy.
5. No sum payable under this policy shall carry interest.
6. The Company shall be under no liability to make payment in respect of any claim until such time as the Insured has provided it and/or the Claims Administrator with whatever documentation and/or information may be requested and established the quantum of any amount claimed to the Company's satisfaction.
7. The obligation of the Company to make payments to the Insured in respect of claims incurred overseas shall be to make payment in Sri Lankan Rupees only. Charges incurred in any other currency shall be payable as per the US dollar conversion rate used by us on the date that the claim was incurred.
8. Specifically in respect of a claim under Sections A and/or B:

If requested by the Claims Administrator and/or the Company, the Insured shall (at his own expense) furnish all certificates, information, proofs or other evidence in support of the Claim, and or the Company, and the Insured agrees that the Claims Administrator and/or the Company may approach anyone who may have treated the Insured for information and/or documentation in respect of the Claim.

In the event of the Insured's death, the Company shall have the right to carry out a postmortem at its own expense.

Where the Insured is incapacitated or otherwise unable to give a valid release for the claim, the Company may make arrangements to pay the claim to the Insured's legal guardian or legal representative. Any payment made by the Company thereby in good faith shall operate as a complete and effective discharge of the Company's liability in respect of the Claim.

9. The Company shall not pay medical expenses except at the usual and customary Level.
10. The coverage is effective only if the policy is purchased before the insured person is aware of any circumstances that could lead to disruption of his/her trip.

11. In respect of loss of or damage to any article forming part of a pair or set, the value of the particular part or parts which may be lost or damaged without reference to any special value which such part or parts may have as forming a pair or set, but in any event not exceeding a proportionate part of the Sum Insured in respect of the pair or set.
12. The Single Trip Insurance is non-renewable.
13. The Annual Multi Trip Insurance may be renewed with Our consent by the payment in advance of the total premium specified by Us, which premium shall be at Our premium rate in force at the time of renewal. We, however, are not bound to give notice that it is due for renewal. Unless renewed as herein provided, this Policy shall terminate at the expiration of the period of which premium has been paid.
14. Fraud
The entire policy will be void if, whether before or after a loss, the insured person has, related to this insurance,
 - a) intentionally or recklessly or otherwise concealed or misrepresented or not disclosed , what the company consider to be any material fact or circumstance ,
 - b) engaged in what the company consider to be fraudulent, dishonest or deceitful conduct or
 - c) made false statements.
15. Policy Cancellation
Policies are non-refundable. However, the policy can be cancelled at the request of the Insured due to VISA Rejection, a fee of LKR 1,500 will be charged to the Insured.
16. Notifications & Declarations
Any and all notices and declarations for the attention of the Company shall be submitted in writing and shall be sent to the address specified in the Schedule.
17. Subrogation
The Insured and any claimant under this Policy, shall at the expense of the company do or concur in doing or permit to be done all such acts and things that may be necessary or reasonably required by the Company for the purpose of enforcing any rights and remedies or obtaining relief or indemnity from other parties to which the Company shall be or would become entitled or subrogated upon the Company paying for or making good any loss or damage under this Policy whether such acts and things shall be or become necessary or required before or after the insured's indemnification by the Company.
18. Governing Law
The construction, interpretation and meaning of the provisions of this policy shall be determined in accordance with the laws of Sri Lanka. The section headings of this Policy are included for descriptive purposes only and do not form part of this Policy for the purpose of its construction or interpretation. The terms of this policy shall not be waived or changed except by endorsement issued by the Company.
19. Entire Contract
The Policy constitutes the complete contract of insurance. No change or alteration in this Policy shall be valid or effective unless approved in writing by the Company, which approval shall be evidenced by an endorsement on the Policy. No agent shall or has the authority to change in any respect whatsoever any term of this Policy or waive off any of its provisions.
20. Due Observance
The due observance of and compliance with the terms, provisions, warranties and conditions of this Policy

in so far as they relate to anything to be done or complied with by the Insured shall be a condition precedent to the Company's liability under this Policy.

21. Contribution

If a loss or damage covered by this Policy occurs and there is any other insurance in effect, regardless of whether it was purchased by the Insured or not, the Company shall not be liable to pay or contribute more than its ratable proportion of any loss or damage.

GENERAL EXCLUSIONS

Exclusions Applicable For All Sections

The Company shall be under no liability to make payment hereunder in respect of any claim directly or indirectly caused by, based on, arising out of or howsoever attributable to any of the following:

1. The Insured's participation in any naval, military or airforce operations whether in the form of military exercises or war games or actual engagement with the enemy, whether foreign or domestic.
2. War, invasion, acts of foreign enemy, hostilities (whether war be declared or not), civil war, civil unrest, rebellion, revolution, insurrection, military or usurped power or confiscation or nationalisation or requisition of or destruction of or damage to property by or under the order of any government or local authority.
3. The loss or destruction or damage to any property whatsoever or any loss or expenses whatsoever resulting or arising therefrom or any consequential loss directly or indirectly caused by or contributed to by or arising from ionizing, radiation or contamination by radioactivity from any nuclear waste from combustion of nuclear fuel; or the radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof,
4. Asbestosis or any related sickness or disease resulting from the existence, production, handling, processing, manufacture, sale, distribution, deposit or use of asbestos, or products thereof.
5. The Insured's actual or attempted engagement in any criminal or other unlawful act.
6. Any kind of consequential losses.
7. In respect of travel by the Insured to any country against whom the Republic of Sri Lanka has imposed general or special travel restrictions, or against whom it may be impose such restrictions, or any country which has imposed or may impose subsequently, such restrictions against travel by a citizen of the Republic of Sri Lanka to such country.
8. The insured engaging in air travel unless he flies as a passenger on an Airline.
9. Pandemic and Epidemic diseases are excluded.

Notification of Claims

It is a condition precedent to the Company's liability under this Policy that, upon the happening of any event giving rise to or likely to give rise to a Claim under any Section of this Policy, the Insured complies with the provisions set out below:

1. In respect of any Claim under Sections A and/or B, the Insured or, if deceased, his legal or other representative, shall immediately notify the 24-hour International Assistant Center and provide them with the name of the Physician, the name and telephone number of the hospital at which treatment is being obtained, and the fact or matter giving rise to the need for medical treatment, and any other documentation or information that might be required or requested by the International Assistant Center. No claim will be entertained for any Hospitalization under Sections A and/or B, if a notification has not been made to the International Assistant Center whilst as an inpatient in a hospital. [excluding any ayurveda treatment.]
2. The 24-hour emergency medical assistance center must be informed immediately. If the insured person may require emergency medical evacuation or repatriation of mortal remains

For all overseas claims – Indoor claims only

Telephone No: +44 - 203 808 0090 Emails: ccnmclaims@allianz.lk

For OPD and all other claims

Telephone No: +94 11 2 303 300 Emails: ccnmclaims@allianz.lk

The claims forms can be obtained from

- *Emergency Accident and Sickness Claim Form - [accident and sickness claim for travel companion](#)*
- *Non Medical Claim Form - [Non Medical Claim Form](#)*

3. For all other claims, the Insured shall immediately, and in any event not later than 30 days after his return to Sri Lanka, notify the Claims Administrator and obtain a Claim Form for completion and return to the Claims Administrator along with supporting invoices and any other documentation or information that might be required or requested by the Claims Administrator.
4. The obligation of the Company to make payments to the Insured in respect of claims made after the Insured's return to Sri Lanka shall be to make payment in Sri Lankan Rupees only. Charges incurred in any other currency shall be payable as per the US dollar conversion rate used by us on the date that the claim is incurred.
5. The Insured shall not admit any liability or make any offer or promise of payment without the prior written consent of the Company.

Event of Hospitalization

24-hour emergency medical assistance center will facilitate payment guarantees and/or arrange direct settlement to overseas hospitals.

You may contact the claims administrator on No: +44 - 203 808 0090 or email for assistance Email: ccnmclaims@allianz.lk.

Overseas Treatment

All overseas treatment must be pre-approved by the Claims Administrator of the Company.

In the event of any payment made under the payment guarantee or direct settlement which should have been paid by you such as deductibles / excess, such payment should be reimbursed to us within 30 days of being notified.

Claims Settlements

The company shall process the payment on liability accepted claims within 3 working days, subject to the claimant accepting the payable amount offered and submitting all final requirements stated in the offer to the company.

Documents Required For Claims Processing

1. Claim forms for all claims can be obtained from Allianz Insurance Lanka Ltd. or by sending an email to ccnmclaims@allianz.lk.
2. All claims must be intimated / submitted within 30 days of returning to Sri Lanka.
3. Documents required and the procedure in respect of each type of claim. The additional documents may be required based on the nature of the claim.

Type of Claim	Documents Required	Procedure
Overseas Emergency Accident & Sickness Medical Expenses (Outside Sri Lanka)	The beneficiary of the insured should submit the following. <ul style="list-style-type: none">○ Duly completed claim form○ Doctor's reports○ Original administration/ discharge card○ Original bills/receipts/prescriptions○ Original X-Ray reports/pathological/investigative reports○ Copy of passport/visa with entry and exit stamp○ Policy certificate	In case of hospitalization, immediately contact Allianz International Assistants please keep all your medical reports / bills / invoices / receipts safely. Any OPD (outpatient department) claims will be settled on reimbursement basis. Fill in the Claim Form and send all documents to our Claims Department.

Sickness Dental Relief (Filling & Extractions only)	Same as Emergency Accident Sickness Medical Expenses claims.	For accidental injuries to sound natural teeth only - Fill in the claim form and send all documents to our Claims Department.
Accidental Death	<p>The beneficiary of the insured should submit the following;</p> <ul style="list-style-type: none"> ○ Claim form ○ Birth certificate ○ Death certificate ○ Postmortem report ○ Policy certificate <p>Allianz Insurance Claims Dept. will advise upon receipt of claim notification for any additional documentation / information.</p>	In case of a death or dismemberment whilst on a common carrier, all documents pertaining to the loss including correspondence with carrier should be submitted.
Accidental Dismemberment	Same as Emergency Accident Sickness Medical Expenses claims.	Accidental Dismemberment
Loss of Common Carrier Checked in Baggage	<ul style="list-style-type: none"> ○ Claim Form ○ Copy of the passport / visa with entry and exit stamp ○ Copies of baggage tags ○ List of contents including the estimated price & date of purchase of each item containing the baggage ○ Proof of purchase / invoices / bills relevant to items lost ○ Copies of correspondence with the airline authorities / common carrier / others about loss of checked baggage ○ Property irregularity report (obtained from airline / common carrier) ○ Details of compensation received from airline / common carrier, if any 	<p>Intimate the airline / common carrier about your loss and lodge complaints.</p> <p>All records pertaining to your complaint and their response should be submitted.</p> <p>Keep a track of your check-in and delivered baggage weight.</p> <p>Fill in the Claim Form and send all documents to our Claims Department.</p>
Delay of Common Carrier Checked in Baggage	<ul style="list-style-type: none"> ○ Claim Form ○ Copy of the passport / visa with entry & exit stamp ○ Copies of baggage tags ○ Copies of correspondence with the Airline authorities about the delay original bills / receipts / invoices pertaining to expenses incurred / purchases made during the period of delay 	<p>Obtain confirmation of the delay from the airline.</p> <p>Keep a record of hours of delay from the scheduled time.</p> <p>Keep receipts of all additional expenses incurred due to the delay.</p> <p>Fill in the Claim Form and</p>

	<ul style="list-style-type: none"> ○ Details of compensation received from Airlines / other authorities, if any Property irregularity report (obtained from airline / common carrier) 	send all documents to our Claims Department.
Loss of Passport	<ul style="list-style-type: none"> ○ Copy of new passport ○ Original bills / invoices of expenses incurred for obtaining a new passport ○ Copy of police report ○ Copy of the complaint made to the Sri Lankan Consulate / relevant authorities 	<p>File a complaint with the local police.</p> <p>Contact the Sri Lankan embassy / consulate wherever possible.</p> <p>Submit all documents to our corporate office at the address given below, along with a detailed statement.</p>
Personal Liability	<ul style="list-style-type: none"> ○ Full statement of the facts in writing Witness statements ○ Any other documents relevant to the incident, including summons, legal notices etc. ○ Any other information relevant to the incident 	<p>Contact. Allianz International Assistant immediately.</p> <p>Do not commit any benefit / compensation or enter into any agreements.</p>
Hijacking	<ul style="list-style-type: none"> ○ Full statement of the events in writing ○ Airline correspondence / briefings regarding the event ○ Ticket / boarding pass 	Fill in the Claim Form and send all documents to our Claims Department.
Trip Delay	<ul style="list-style-type: none"> ○ Claim Form ○ Original bills of purchases made / expenses incurred during the delay ○ Copy of ticket and boarding pass ○ Copies of correspondence with the Airline authorities certifying about the delay 	<p>Please obtain a written clarification from the airline / common carrier regarding the delay and the cause of delay.</p> <p>Keep a record of hours of delay from the scheduled time.</p> <p>Fill in the claim form and send all</p>
Missed Departure/Connection	<ul style="list-style-type: none"> ○ Claim Form ○ Proof of additional travel cost ○ Documentary evidence to delay 	
Home Safety	<ul style="list-style-type: none"> ○ Claim Form 	

	<ul style="list-style-type: none"> ○ Police Report ○ List of the Items lost 	
Trip Cancellation	<ul style="list-style-type: none"> ○ Claim Form ○ Original travel tickets / bills of prepaid non-refundable expenses (travel and accommodation only) ○ Allianz Insurance Claims Department will advise upon receipt of claim notification for any additional documentation / information 	
Trip Curtailment	<ul style="list-style-type: none"> ○ Claim Form ○ Original travel tickets / bills of prepaid non-refundable expenses (travel and accommodation only) ○ Allianz Insurance Claims Department will advise upon receipt of claim notification for any additional documentation / information 	

GRIEVANCES/COMPLAINTS HANDLING AND DISPUTE RESOLUTION PROCEDURE

1. How to make a complaint

In the event of a customer feels that he/she is dissatisfied with the manner in which they have been served at any of our customer touch points or if our products do not meet their expectation there are many avenues open to our customers to reach the Complaints Handling Unit and make a complaint.

Following facilities are made available for complaints to be lodged;

(i) By visiting or writing to: The Customer Experience Management Unit at Allianz Insurance Corporate office premises or by visiting any branch office or by visiting to our Customer Care Centre, No 323, Union Place, Colombo 2.

(ii) Direct Telephone contact: Manager – Customer Experience / Complaints Management Unit 0114788796 and 0114788814

(iii) Complaints can be made via 24hrs

- Hotline - General Insurance 0112303300
- Hotline - Life Insurance 0112300400

(iv) Email: email to reach us via info@allianz.lk

(v) Website : customer feedback form available at www.allianz.lk

(vi) Standard notice board displayed at every branches at the front office with the contact numbers/email to reach the Customer Complaints Handling Unit

(vii) Letters addressing to the Complaint officer in-charge as shown below Manager – Customer Experience Allianz Insurance Lanka Limited, Levels 25-27, One Galle Face Tower, No 1 A, Centre Road, Galle Face, Colombo 02.

1.1.1 Language of preference: Customers could make the complaints in Sinhala, Tamil or English at their convenient and all correspondence with the complainant is followed in the language in which the complaint was made.

1.1.2 Documents and information to be produced along with a complaint by the policy holder/insured:

- (i) Name of policy holder
- (ii) Policy number/vehicle number/claim number
- (iii) Contact details such as telephone no's/email, postal address
- (iv) Subject of the complaint
- (v) Description of the complaint -in writing preferably (email/letter/fax/social media)
- (vi) Documents or evidence supporting the complaints
- (vii) Category of the insurance -Life, Motor or Non-Motor

1.2 Complaint Review Process

1.2.1 Registering/Recording of Complaints Every service, related complaints received at ranches/departments/Customer care centre should be forwarded to Manager – Customer Experience via email or via the Complaint Management System. (CMS)

Each complaint is recorded in the Complaint Management System by the Complaints Handling Officers. The system records are maintained with all the necessary information on the complaints, including;

- a) Name of policy holder
- b) Policy number/vehicle number
- c) Contact details/email
- d) Description of the complaint
- e) Date of receiving the complaint
- f) Category of the insurance -Life, Motor or Non Motor
- g) Date of acknowledgement
- h) Status of the complaint - Resolved/pending/Partially resolved
- i) Date of closing the complaint
- j) Date of Resolution
- k) Description of Resolution

1.2.2 Acknowledgement of complaints

All complaints are recorded in the Complaints Management System within 3 days from the receipt of such complaint. CMS is an in-house developed application enabling to enter and monitor the complaints until the resolution is reached. A reference number for each complaint is provided along with an acknowledgement.

After receiving complaint in writing, acknowledgement shall be sent within 3 working days. The

acknowledgement contains the ‘‘Reference number’’ and ‘‘contact details’’ of the person to be contacted in the event that customer requires to know the status of the complaint.

1.2.3 Analysis of complaints

- i. Every incoming complaint is categorized by the nature of the complaint. If the complaints are premium fraud related, misappropriation, wrong selling/mis selling, procedural violation, malpractices, data privacy & information security related, then complaints will be forwarded to the internal investigation unit for further investigations.
- ii. Customer Experience Management should also conduct the preliminary investigation in order to find out the facts and to resolve the complaints. However, the respective Department Head or Head of Branch/Regional Sales Manager and Provincial Sales Manager are required to support the Customer Experience Management unit to resolve the complaint within the set timelines.
- iii. If Complaint handler views that further inquiry needs to be conducted based on the preliminary findings, the respective head of the department or head of branch should be informed of the same. Accordingly, explanation should be called from the respective employee within (3) working days as per the Complaint Handling Procedure of the Company.

Role of Complaint Handling Unit

- a) The complaint shall be addressed to the respective department or operational unit by the Complaints Handling Unit. The status of the complaint should be kept informed and updated to customer.
- b) A Complaint Register shall be maintained and updated by Complaints Handling Unit of CRM and by the respective Departments.
- c) Complaints Handling Unit should update the Complaint Management System of the outcome. Meantime, HR should take appropriate action based on the findings by the Inquiry and the copy of the decision should be filed in the personal file of the employee/agent.
- d) The outcome of the inquiry should be informed to the respective Department head and internal Investigation unit and Legal & Compliance for their information and records.
- e) The complaints Register must be orderly maintained at the respective Branch as well.

1.2.4 Timelines in complaints handling and communicating resolution

Activity	Timeline
Recording of Complaints	Within 3 days from the receipt date
Acknowledgement of Complaints	Within 2 days from the receipt date
Resolution for the service related complaints	Within 8 working days
Resolution for the Premium Misappropriation related complaints	28 Days –Subject to availability of the facts and evidences
Communicating the resolution to customer	Within 2 days from the decision taken the facts and evidences
Responding to the appeal	Within 4 weeks from the receipt date

In case an appeal, if the complainant not satisfied with the resolution given, he or she could contact the following officer.

Name	Kasun Yatawara
Designation Head of Market Management	Head of Market Management
Address	Allianz Insurance Lanka Limited, Levels 25-27, One Galle Face Tower, No 1 A, Centre Road, Galle Face, Colombo 02.
Mobile	775144972
Email	info@allianz.lk

Dispute Resolution Mechanisms / Legal Proceedings

In the event the customers are not satisfied with the resolution given by the company, we would advise them to refer their complaint to the either Insurance Ombudsman or Insurance Regulatory Commission of Sri Lanka (IRCSL).

In addition to the above, arbitration clauses are incorporated in non motor and motor policies with regard to determining quantum and/or terms of the policy depending on the policy. Further, Life policies do not have an arbitration clause included.

Office of Insurance Ombudsman No 143A, Vajira Road, Colombo 5.

Telephone – +94 11 250 5542 / +94 11 250 5041

Email – info@insuranceombudsman.lk Website – <https://insuranceombudsman.lk/>

Director Investigations

Insurance Regulatory Commission of Sri Lanka Level 11 East Tower, World Trade Center, Colombo 01.

Telephone – 0112396184-9 / 0112335167

Email – investigation@irsl.gov.lk / info@irsl.gov.lk

No action in law or equity shall be brought to recover under the policy until after the expiration of 60 days from the date of which proof of claim has been furnished in accordance with the policy conditions. The parties have agreed that the laws of the Republic of Sri Lanka shall apply in the event of any dispute, claim, question, or disagreement arising from or relating to this contract or the breach thereof, the parties shall use their best efforts to settle the issue. They shall consult and negotiate with each other in good faith, recognizing their mutual interests, and attempt to reach a just and equitable solution satisfactory to both parties through the Company's Complaint Handling Procedure. Failing which, parties may refer such disputes to a competent court of jurisdiction in Sri Lanka.

Data Privacy & Protection

The Insurer is strongly committed to conducting its business in full compliance, and in accordance with applicable Data Privacy protection laws and regulations. All privacy related matters are governed by Allianz Privacy Notice which is available on the Insurer's official website <https://www.allianz.lk/data-privacy-notice.html>. The said privacy notice explains how and what type of personal data will be collected, why it is collected and to whom it is shared or disclosed. Further, the Insurer is committed to keep your Personal Data only so long as necessary to fulfill the purposes for which the data was collected for or to fulfill legal obligations.

Definition:

Personal Data

means any information relating to an individual pre-approved by the Claims Administrator of the Insurance Company

Sanctions Clause

No insurer shall be deemed to provide cover and no insurer shall 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 that insurer 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 or United States of America.

Premium payment warranty

(i) Notwithstanding anything herein contained but subject to (ii) and (iii) hereof, it is hereby agreed and declared that the full premium due and payable in respect of this insurance is required to be settled to the insurer (the company) on or before the premium due date agreed with the company (which shall be a date not exceeding 30 days from the date of inception of the policy) and in the absence of any such premium due date, the full settlement of the premium is required to be made or effected on or before the expiry of the 30th day from the date of inception of this policy. (hereinafter referred to as the "due date").

(ii) It is also declared and agreed that the settlement of the full premium on or before the due date shall operate as a condition precedent to the insurer's (the company's) liability or obligation to settle a claim under this policy.

In the event of any claim arising between date of commencement of this insurance and the "due date" for the settlement, the insurer (the company) may defer any decision on liability or postpone the settlement of any such claim until full settlement of the premium is effected on or before the "due date".

(iii) It is also declared and agreed that where the full premium payable hereunder remains outstanding as at the closure of business of the insurer on the "due date" then the cover under this insurance and any obligation assumed or imputed under this insurance shall stand to be cancelled, ceased and revoked immediately. However, such cancellation will not prejudice the right of the insurer (the company) to invoke any legal defenses or to recover the full or any part of the defaulted premium attributable to the expired period of insurance.