

Camp Counselors USA (CCUSA) Travel Insurance

Combined Financial Services Guide and Product Disclosure Statement
(including Policy Wording)

Australia

Effective 27 October 2011

Financial Services Guide

This Financial Services Guide (FSG) explains the insurance services that you receive when you purchase CCUSA travel insurance through Camp Counselors USA Pty Limited, an authorised representative of Cerberus Special Risks Pty Limited (Cerberus). Cerberus is underwritten by certain underwriters at Lloyd's. It also covers the charges for those services, how any complaints you may have will be dealt with and our professional indemnity insurance arrangements. We give it to you when you ask us to arrange travel insurance for you to help you decide whether to use our services.

Included with this guide is a Product Disclosure Statement (PDS). This describes the main features of the policy and will help you decide if it is suitable for you.

ABOUT US

Cerberus Special Risks Pty Ltd, ABN 81 115 932 173, AFS Licence No 308461 of level 5, 24 York St, Sydney, NSW 2000, Telephone 1300 625 229, is licensed to advise on and deal in general insurance. Cerberus has a binding agreement with certain underwriters at Lloyd's which allows it to issue, vary and renew travel insurance and to handle claims for them; this means Cerberus acts on behalf of the insurer and not on your behalf.

Camp Counselors USA Pty Limited, Authorised Representative Number 390625, ABN 85 054 266 518, are an authorised representative of Cerberus and are authorised to arrange travel insurance. See below for information about how to contact Cerberus and CCUSA.

SERVICES PROVIDED

CCUSA can give you information about this travel insurance and can arrange, issue, vary or renew your insurance. They can also provide some general advice about this travel insurance. If you need any more advice than CCUSA are able to provide, you can call Cerberus on 1300 625 229.

CCUSA act on behalf of Cerberus and certain underwriters at Lloyd's and not on your behalf. Cerberus is responsible for the insurance services that are provided to you.

PROFESSIONAL INDEMNITY INSURANCE ARRANGEMENTS

Cerberus has professional indemnity insurance arrangements which cover errors and mistakes relating to our insurance services. The policies meet the requirements of the Corporations Act and provides cover for claims relating to the conduct of Cerberus or its employees and authorised representatives, even after that person ceases to be employed or authorised by Cerberus, provided that the claim is notified to the insurer when it arises and within the relevant policy period.

HOW WE ARE PAID

For providing these services, Cerberus and CCUSA each receive a percentage of the premium when you buy a policy. The employees and representatives of CCUSA receive an annual salary and may include bonuses based on performance criteria which can include sales performance.

You may ask each of us for more information about our remuneration within a reasonable time after you receive this FSG and before your policy is issued.

IF YOU HAVE A COMPLAINT

If you have a complaint about the services provided to you, contact Cerberus which has an internal dispute resolution process designed to resolve any complaints or disputes that may arise. You may call Cerberus or you may send your claim to Cerberus in writing at the address shown below.

If you are still dissatisfied after discussing your complaint with Cerberus, you should refer the matter to Lloyd's General Representative in Australia for consideration (for contact details please refer to the policy wording).

If your complaint is still not resolved to your satisfaction, you may contact the Financial Ombudsman Service Limited (FOS), which is an independent external dispute resolution body. For more information or on this process, please refer to "Important Matters, Dispute Resolution Process" in the Product Disclosure Statement.

HOW TO CONTACT US

Camp Counselors USA Pty Limited	Cerberus Special Risks Pty Limited
Phone: +61 (0)2 9223 3366	Phone: 1300 625 229
Website: http://www.ccusa.com.au	Fax: (02) 8263 0494
Post: Level 7, 428 George St, Sydney NSW 2000	Website: http://www.cerberusspecialrisks.com.au/
	Post: PO Box A975, Sydney NSW 1235

DATE PREPARED

This FSG was prepared on 27 October 2011. Its distribution has been authorised by Cerberus.

Product Disclosure Statement

ABOUT THIS DOCUMENT

A Product Disclosure Statement (PDS) is a document required by the Corporations Act 2001 (Cth) and contains information designed to help **you** decide whether to buy the policy.

This PDS sets out the cover available and the terms and conditions which apply. **You** need to read it carefully to make sure **you** understand it and that it meets **your** needs.

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

UNDERSTANDING THIS PDS AND ITS IMPORTANT TERMS AND CONDITIONS

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

- About the available cover and benefits in the "Schedule of Benefits" and the relevant Sections of the PDS applicable to the cover **you** choose (remember certain words have special meanings - see "Definitions");
- The Exclusions under each Policy Section are applicable to the cover **you** choose and "General Exclusions Applicable to all Sections" (this restricts the cover and benefits);
- "Claims Conditions" and "Claims" (these set out certain obligations that **you** and **we** have. If **you** do not meet them **we** may be able to refuse or reduce payment of a claim); and
- "Important Matters" (this contains important information on **your** Duty of Disclosure, how the Duty applies to **you** and what happens if **you** breach the Duty, **your** cooling off period, claims queries/lodgements and **our** claims service guarantee, **our** privacy policy and **our** dispute resolution process, extension of **your** policy, **your** excess and when **you** should contact **us** concerning 24 hour medical assistance, **overseas** hospitalisation or medical evacuation).

APPLYING FOR COVER

When **you** apply for the policy by completing **our** application, **we** will confirm with **you** things such as the period of insurance, **your** premium and what cover options and **excesses** will apply.

These details are recorded in the Certificate of Insurance **we** issue to **you**.

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

If **you** have any queries or want further information about the policy, please contact Camp Counselors USA Pty Limited.

ABOUT YOUR PREMIUM

You will be told the premium payable for the policy when **you** apply. It is based on a number of factors such as **your** destination(s), length of **trip**, and the number of persons covered.

Your premium also includes amounts that take into account **our** obligation to pay any relevant compulsory government charges, taxes or levies (e.g. Stamp Duty and GST) in relation to **your** policy. These amounts will be set out separately in **your** Certificate of Insurance as part of the total premium.

ABOUT US AND THE INSURERS

Cerberus Special Risks Pty Ltd (Cerberus) ABN 81 115 932 173 is an Australian Financial Services Licensee (no. 308461) authorised to deal in and provide general advice on insurance products.

This insurance is underwritten by certain underwriters at Lloyd's (the insurers). Cerberus, a Lloyd's coverholder, has been authorised by the insurers to act on their behalf in arranging, issuing, varying and cancelling insurance products, and handle and settle claims.

COOLING-OFF PERIOD

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

UPDATING THE PDS

We may need to update this PDS from time to time if certain changes occur where required and permitted by law. **We** will issue **you** with a new PDS to update the relevant information except in limited cases. Where the information is not something that would be materially adverse from the point of view of a reasonable person considering whether to buy this product, **we** may issue **you** with notice of this information in other forms or keep an internal record of such changes (**you** can get a paper copy free of charge by calling us).

DATE PREPARED

This PDS is effective 27 October 2011.

SUMMARY OF BENEFITS

This is only a summary of benefits. Please read the policy wording for the full terms and conditions of the coverage offered, including any applicable exclusions, conditions and limitations to cover.

MEDICAL EXPENSES INCURRED OVERSEAS

Medical, emergency dental, hospital and ambulance costs when agreed by **us**. Includes funeral expenses incurred **overseas** or repatriation of mortal remains.

CANCELLATION COSTS

Financial loss due to unforeseen cancellation of prepaid travel and accommodation arrangements due to an insured event. Includes course fees not refunded as well as travel agency cancellation fees charged.

MEDICAL EVACUATION AND ADDITIONAL EXPENSES

Medical evacuation **home** or to the nearest appropriate medical facility. Cover is also provided for reasonable additional travelling expenses (Economy Class) incurred by **you** for returning to **your home** earlier than planned due to accidental **injury**, **serious illness**, death of **you**, any person with whom **you** are intending to travel, or of an immediate **relative** of **yours**.

LOSS OF TRAVEL DOCUMENTS

Additional travel and accommodation costs if **you** lose **your** passport and **you** need to travel to the nearest passport issuing office.

STANDARD LUGGAGE AND PERSONAL EFFECTS

Accidental loss, damage or theft of **your luggage and personal effects**. Includes emergency expenses if **your** luggage is delayed.

PERSONAL LIABILITY

Protection for **you** being legally liable for injuring other people or causing damage to their property, including legal defence costs.

SCHEDULE OF BENEFITS

All amounts mentioned in this policy are in Australian dollars (AUD\$).

Section	Benefit	Economy	Premium	Excess
Section 1:	Medical Expenses Incurred Overseas	\$500,000	\$5,000,000	\$100
	Emergency Dental	\$250	\$500	\$100
Section 2:	Cancellation Costs	\$5,000	\$10,000	\$100
Section 3:	Medical Evacuation and Additional Expenses	\$500,000	\$500,000	\$100
Section 4:	Loss of Travel Documents	\$1,000	\$1,000	Not Applicable
Section 5:	Standard Luggage and Personal Effects	No cover	\$2,500	\$100
	Per Item Limit	No cover	\$250	
	Delayed Luggage	No cover	\$200	Nil
Section 6:	Personal Liability	\$2,500,000	\$5,000,000	\$100

Policy Wording

ABOUT THIS POLICY DOCUMENT

This is **your** policy wording. It sets out the cover available and the standard terms and conditions which apply. **You** need to read it carefully to make sure **you** understand it and that it meets **your** needs.

IMPORTANT MATTERS

Under **your** policy there are rights and responsibilities which **you** and **we** have. **You** must read this PDS in full for more details.

WHO CAN PURCHASE THIS POLICY

This policy is available to citizens or residents of Australia.

COOLING OFF PERIOD

If **you** decide that **you** do not want this policy, **you** may cancel it within 14 days after **you** are issued **your** Certificate of Insurance and PDS and **you** will be given a full refund of the premium **you** paid, provided **you** have not started **your** trip or **you** do not want to make a claim or to exercise any other right under the policy.

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

CONFIRMATION OF COVER

Your cover is confirmed by paying the premium as quoted by Camp Counselors USA Pty Limited and a Confirmation of Insurance being issued to **you**.

YOUR DUTY OF DISCLOSURE

Before **you** enter into this policy, the Insurance Contracts Act 1984 (Cth) requires **you** to provide **us** with the information **we** need to enable **us** to decide whether and on what terms **your** proposal for insurance is acceptable and to calculate how much premium is required for **your** policy. **You** will be asked various questions when **you** first apply for **you** policy.

When **you** answer these questions, **you** must:

- give **us** honest and complete answers;
- tell **us** everything **you** know; and
- tell **us** everything that a reasonable person in the circumstances could be expected to tell **us**.

If **you** vary, extend, reinstate or replace the policy **your** duty is to tell **us** before that time, every matter known to **you** which:

- **you** know or a reasonable person in the circumstances could be expected to know, is relevant to **our** decision whether to insure **you** and whether any special conditions need to apply to **your** policy.

You do not need to tell **us** about any matter that:

- diminishes **our** risk;
- is of common knowledge;
- **we** know or should know as an insurer; or
- **we** tell **you** **we** do not need to know.

WHO DOES THE DUTY APPLY TO?

Everyone who is insured under the policy must comply with the duty of disclosure. When answering **our** duty of disclosure questions, the information must be provided for everyone who is to be insured under the policy.

WHAT HAPPENS IF YOU OR THEY BREACH THE DUTY?

If **you** or they do not comply with the relevant duty, **we** may cancel the policy or reduce the amount **we** pay if **you** make a claim. If fraud is involved, **we** may treat the policy as if it never existed and pay nothing.

GENERAL INSURANCE CODE OF PRACTICE

The Insurance Council of Australia Limited has developed the General Insurance Code of Practice (the Code), which is a self-regulatory code for insurers to adopt. Cerberus proudly supports the Code and embraces its objectives of raising the standards of practice and service in the insurance industry. **You** can obtain a copy of the Code from www.codeofpractice.com.au

DISPUTE RESOLUTION PROCESS

Should **you** have a complaint or dispute arising out of this insurance, or **our** employees, authorised representatives or service providers, please contact Cerberus on 1300 625 229. **We** will respond to **your** complaint within 15 business days, provided **we** receive all necessary information and have completed any investigation required. If **we** need more time, **we** will inform **you** and agree on a reasonable alternative timeframe.

If **we** were unable to resolve **your** concern through **our** internal dispute resolution process, **you** may refer **your** case to Lloyd's General Representative in Australia for consideration. If **you** are still not satisfied with the outcome and **you** purchased a policy in Australia, **you** may then request the

matter be reviewed by the Financial Ombudsman Service Ltd (FOS): an independent body that operates nationally in Australia and aims to resolve certain insurance disputes. This service is free of charge to customers. Please note that **you** must register **your** dispute with the FOS within 2 years of receiving a decision from our internal dispute resolution team.

Lloyd's General Representative in Australia	Financial Ombudsman Service Ltd
Suite 2, Level 21, Angel Pl, 123 Pitt St Sydney NSW 2000	GPO Box 3, Melbourne VIC 3001
Phone: (02) 9223 1433	Phone: 1300 780 808 (National Toll Free)
	Fax: (03) 9613 6399
	Email: info@fos.org.au
	Website: www.fos.org.au

The Underwriters accepting this Insurance agree that:

- i. if a dispute arises under this Insurance, this Insurance will be subject to Australian law and practice and the Underwriters will submit to the jurisdiction of any competent Court in the Commonwealth of Australia;
- ii. any summons notice or process to be served upon the Underwriters may be served upon:
Lloyd's Underwriters' General Representative in Australia
Suite 2, Level 21
Angel Place
123 Pitt Street
Sydney NSW 2000
who has authority to accept service and to appear on the Underwriters' behalf;
- iii. if a suit is instituted against any of the Underwriters, all Underwriters participating in this Insurance will abide by the final decision of such Court or any competent Appellate Court.

PRIVACY NOTICE

To arrange and manage **your** travel insurance, **we** (in this Privacy Notice "**we**", "**our**" and "**us**" includes Cerberus Special Risks Pty Ltd and Camp Counselors USA Pty Limited) collect personal information from **you** and others (including those authorised by **you** such as **your** doctors, hospitals and persons whom **we** consider necessary). Any personal information **you** provide is used by **us** to evaluate and arrange **your** travel insurance. **We** also use it to administer and provide the insurance services and manage **your** and **our** rights and obligations in relation to the insurance services, including managing, processing and investigating claims. **We** may also collect, use and disclose it

for product development, marketing, research, IT systems maintenance and development, recovery against third party and for any other purposes with **your** consent.

This personal information may be disclosed to (and received from) third parties in Australia or **overseas** involved in the above process, such as travel consultants, travel insurance providers and intermediaries, authorised representatives, reinsurers, claims handlers and investigators, cost containment providers, medical and health service providers, legal and other professional advisers, **your** agents and **our** related companies. The use and disclosure of such personal information will be provided to third parties for the primary purposes stated above. The personal information (but not sensitive information) may also be used for a secondary purpose, but only if **you** would reasonably expect **us** to use that information for such secondary purpose.

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

- that **you** will or may provide their information to **us**;
- the types of third parties to whom the information may be provided;
- the relevant purposes **we** and the third parties will disclose it to, will use it for, and how they can access it.

We rely on **you** to have obtained their consent on these matters. If **you** have not done or will not do either of these things, **you** must tell **us** or **our** agents before **you** provide the relevant information.

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

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

EXCESS

We will not pay the first \$100 (the **excess**) for any one event unless specified otherwise. **We** do not offer the option to remove or buy-out the **excess**, even for an additional premium.

24 HOUR WORLDWIDE EMERGENCY ASSISTANCE

For emergency assistance anywhere in the world at any time, Specialty Assist is only a telephone call away. The team will help with medical problems, locating nearest medical facilities, **your**

evacuation home, locating nearest embassies and consulates as well as keeping you in touch with your family in an emergency.

Specialty Assist will direct you to the appropriate hospital or health care facility. Subject to medical advice, you must take our advice as to where you can be treated to ensure you receive quality medical care. We also have the option of returning you to Australia or evacuating you to another country, if the cost of your overseas medical expenses could exceed the cost of returning you to Australia.

If you are injured or become ill and need to be hospitalised, you, or a member of your travelling party, MUST contact Specialty Assist immediately.

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

If you do not contact Specialty Assist immediately, we will not pay for these expenses or for any evacuation or airfares that have not been approved or arranged by us (see Sections 1 and 3).

In the event of an emergency call +44 (0) 20 7902 7405 (while overseas) or 1800 611 210 (while in Australia) to contact Specialty Assist.

JURISDICTION AND CHOICE OF LAW

This policy is governed by and construed in accordance with the law of New South Wales, Australia and you agree to submit to the exclusive jurisdiction of the courts of New South Wales. You agree that it is your intention that this "Jurisdiction and Choice of Law" clause applies.

PERIOD OF COVER

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

However:

1. The cover for Cancellation Costs begins from the time the policy is issued.
2. Cover for all other Sections begins on the date of departure as stated on the Certificate of Insurance. Cover ends on the date of return set out on your Certificate of Insurance.
3. If cover is taken out after you have left home to commence your trip, there is a waiting period of 3 days before the insurance takes effect. In the event of serious injury in connection with an accident, you will be covered from the date cover commenced subject to the accident being witnessed and verified by an independent third party.

4. If **you** want to return **home** during **your trip** for any reason that does not give rise to a claim under this policy, and **you** then wish to recommence **your trip**, you can do so under the same policy. **All cover is suspended under this policy while you are in Australia.**

EXTENSION OF YOUR POLICY

You may extend your policy if you find that your return to Australia has been delayed because of one or more of the following:

1. If a bus line, airline, shipping line or rail authority **you** are travelling on, or that has accepted **your** fare or luggage, is delayed; or
2. If the delay is due to a reason for which **you** can claim under this policy, cover will be extended free of charge subject to **our** approval. To contact us for approval: **+61 2 8263 0400**;
3. If the delay is for any other reason, **you** must request the extension at least 7 days before **your** original policy expires and **we** must agree to this.

You may extend your policy if you decide to continue your journey by contacting CCUSA.

An extension of cover is not available for:

- conditions **you** suffered during the term of **your** original policy, OR
- if **you** are 66 years of age or over at the time of the extension, OR
- where **we** have not been advised of any circumstances that have or may give rise to a claim under **your** original policy.

You may not extend your policy if your policy has expired.

You may not extend your policy or purchase a new policy if you have a finalised personal effects claim of \$2,500.

PRE-EXISTING MEDICAL CONDITIONS COVER

This policy provides cover for unforeseen medical events only. No **pre-existing medical conditions** are covered. **You** are not covered for any claim that **you** make that relates to a **pre-existing medical condition**.

A Pre-existing Medical Condition means:

1. An ongoing medical or dental condition of which **you** are aware, or related complication **you** have, or the symptoms of which **you** are aware;
2. A medical or dental condition that is currently being, or has been investigated, or treated by a health professional (including dentist or chiropractor);
3. Any condition for which **you** take prescribed medicine;
4. Any condition for which **you** have had surgery;

5. Any condition for which **you** see a medical specialist; or
6. Pregnancy.

Please note: This definition applies to **you**, **your** travelling companion, a **relative** or any other person.

SAFEGUARDING YOUR LUGGAGE AND PERSONAL EFFECTS

You must take all reasonable precautions to safeguard **your luggage and personal effects**. If **you** leave **your luggage and personal effects unsupervised** in a **public place** we will not pay **your** claim. (For an explanation of what **we** mean by "**luggage and personal effects**", "**unsupervised**" and "**public place**" see our "Definitions" below).

DEFINITIONS

Some words in this PDS and policy wording that have special meanings are defined here.

Acceptable proof of ownership means a certified copy of an original receipt from the supplier, if the item was a gift, a letter from the donor confirming the purchase details, bank or credit card statements relating to the purchase, instruction booklets or official guarantee certificates, photographs that may show items (in conjunction with the aforementioned).

Accident means an unexpected, unintended, unforeseeable event causing **injury**. The **accident** must happen while **you** are on a **trip** and covered under the policy.

Amount payable means the total **amount payable** for the policy in accordance with the rates set out in the Schedule of Benefits. It includes administration fees payable to the agent, stamp duty, policy issue fee, GST if applicable and the premium payable to the insurer.

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

Cash or cash equivalent means cash, any legal currency, travellers' cheques, cheques, postal and money orders and passport held by **you** for social domestic and/or pleasure purposes.

Change of mind means being unwilling or reluctant or no longer inclined

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

Expert witness means a person who testifies in a court of law because they have specialist knowledge in a particular field or area of expertise, entitling that person to testify about their opinion on the meaning of facts.

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

Home means **your** country of permanent residence, being **Australia**.

Injury means a bodily injury caused solely and directly by violent, accidental, visible and external means, during **your** period of cover and which does not result from any illness, sickness or disease.

Insolvency means bankruptcy, provisional liquidation, liquidation, appointment of a receiver or administrator, entry into a scheme of arrangement, statutory protection, stopping the payment of debts or the happening of anything of a similar nature under the laws of any jurisdiction.

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

Medical practitioner means a registered practising member of the medical profession who is not travelling with **you**, who is not related to **you** or to any person with whom **you** are travelling or intending to stay with.

Overseas means in any country other than **Australia**.

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

Pre-existing Medical Condition means:

1. An ongoing medical or dental condition of which **you** are aware, or related complication **you** have, or the symptoms of which **you** are aware;
2. A medical or dental condition that is currently being, or has been investigated, or treated by a health professional (including dentist or chiropractor);
3. Any condition for which **you** take prescribed medicine;
4. Any condition for which **you** have had surgery;
5. Any condition for which **you** see a medical specialist; or
6. Pregnancy.

This definition applies to you, your travelling party, a relative or any other person.

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

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

Reasonable care means the care that a reasonable person would exercise under the circumstances. Failure to use **reasonable care** may result in **your** claim being reduced or not covered by this policy.

Redundancy means any person being declared redundant, who is under the normal retiring age for someone holding that person's position, and who has been employed for at least 2 continuous years with the same employer at the time of being made redundant.

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

Sudden Illness or Serious Injury means a condition which first occurs during **your** period of cover and which necessitates treatment by a legally qualified **medical practitioner** and which results in **you** or any other person to whom this insurance applies being certified by that **medical practitioner** at the time as being unfit to travel or continue with **your original trip**.

Travelling Party means **you** and any travelling companion who has made arrangements to accompany **you** for at least 50% of the **trip**.

Trip means the period of travel stated in the Certificate of Insurance. It begins on the date of departure as stated in the Certificate of Insurance and ends when **you** return to Australia.

Unsupervised means:

- leaving **your** luggage with a person **you** did not know prior to commencing **your trip**.
- leaving it in any position where it can be taken without **your** knowledge.
- leaving it at such a distance from **you** that **you** are unable to prevent it being taken.

We, Our, Us, means certain underwriters at Lloyd's who will deal with **you** through their agent, Cerberus Special Risks Pty Ltd.

Work means any **work**, including **work** placements, incidental **work** and **work** experience, paid or unpaid.

You, Your or Yourself means the person listed as covered in the Certificate of Insurance at the date of policy issue.

GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS

We will not pay for any of the following claims or losses:

1. Any losses incurred within Australia unless otherwise stated.
2. A loss which is recoverable by compensation under any workers compensation act or transport accident laws or by any Government sponsored fund, plan, or medical benefit scheme, or any other similar type of legislation required to be effected by or under a law.
3. A loss arising from the failure of any travel agent, tour operator, accommodation provider, airline or other carrier, car rental agency or any other travel or tourism services provider to provide services or accommodation due to their insolvency or the insolvency of any person, company or organisation they deal with.
4. Consequential loss of any nature including loss of enjoyment.
5. A loss resulting from a criminal or dishonest act by **you** or by a person with whom **you** are in collusion or if **you** have not been honest and frank with all answers, statements and submissions made in connection with **your** insurance application or claim.
6. A loss that arises from any act of war (whether war is declared or not) or from any rebellion, revolution, insurrection or taking of power by the military.
7. A loss that arises from a nuclear reaction or contamination from nuclear weapons or radioactivity.
8. A loss that arises from biological and/or chemical materials, substances, compounds or the like used directly or indirectly for the purpose to harm or to destroy human life and/or create public fear.
9. **Your** claim arises from errors or omissions in any booking arrangements or failure to obtain relevant visa, passport or travel documents.
10. **Your** claim arises because **you** did not follow advice in the mass media of a government or other official body's warning:
 - against travel to a particular country or parts of a country;
 - of a strike, riot, bad weather, civil commotion or contagious disease;
 - of a likely or actual epidemic or pandemic (such as H5N1 Avian influenza);

- of a threat of an **epidemic** or **pandemic** (such as H5N1 Avian influenza) that requires the closure of a country's borders; or
 - of an **epidemic** or **pandemic** that results in **you** being quarantined and **you** did not take the appropriate action to avoid or minimise any potential claim under **your** policy (including delay of travel referred to in the warning). Please refer to www.who.int for further information.
11. A loss that arises from parachuting, sky diving, hang gliding, parapenting or travel in an air supported device other than as a passenger in a licensed passenger aircraft operated by an airline or charter company. This does not apply to hot air ballooning or parasailing.
 12. Ongoing payments under Section 1 (Medical Expenses Incurred Overseas) if **we** decide on the advice of a doctor appointed by **us** that **you** are capable of being repatriated to Australia.
 13. A loss, or theft of, or damage to:
 - a. **cash or cash equivalents** including cheques or any other negotiable instruments
 - b. **unsupervised luggage and personal effects**;
 - c. property that **you** leave **unsupervised** in a **public place** or loss that occurs because **you** do not take **reasonable care** to protect the property ;
 - d. **luggage and personal effects**, but only to the extent that **you** are entitled to compensation from the **carrier** responsible for the lost, theft or damage;
 - e. a video camera, mobile telephone, photographic equipment, personal computer or jewellery left **unsupervised** by **you** in a motor vehicle;
 - f. a video camera, mobile telephone, photographic equipment, personal computer or jewellery checked in to be held and transported in the cargo hold of any **carrier** (including any loss from the point of check-in until receipt of the said goods);
 - g. items from an **unsupervised** motor vehicle, unless taken from a locked boot or locked concealed luggage compartment of a sedan, station wagon, hatchback, van or motor home, between 9pm and 9am local time and there is evidence of damage or forced entry which is confirmed by a police report; or
 - h. **luggage and personal effects** which is fragile, brittle or an electronic component is broken or scratched - unless either:
 - i. it is the lens of spectacles, binoculars, photographic or video equipment; or
 - ii. the breakage or scratch was caused by a crash involving a vehicle in which **you** are travelling.
 14. For loss, theft or damage which is not reported and a written report is not obtained within 24 hours of discovery from the police or the appropriate authority such as - but not limited to - the airline, accommodation manager, transport provider, airport authority, tour operator or guide.
 15. **Your claim arises from pre-existing medical conditions.**
 16. **Your claim arises out of pregnancy, childbirth or related complications.**

17. Loss, wear and tear or depreciation of property or damage caused by the action of insects, vermin, mildew, rust or corrosion.
18. A loss arising from mechanical, electrical breakdown or a malfunction.
19. A loss arising from **your**, any of **your travelling party** or a **relative's** intentional exposure to a needless risk or lack of **reasonable care**, except in an attempt to save human life.
20. Delay, detention, seizure or confiscation by Customs or other officials.
21. The cost of medication in use at the time the **trip** began or for maintaining a course of treatment **you** were on prior to the **trip**.
22. Loss, theft or damage to anything shipped as freight or under a Bill of Lading.
23. If **your** claim arises directly or indirectly from a sexually transmitted disease.
24. If **your** claim arises from or is any way related to depression, anxiety, stress, mental or nervous conditions.

Nor will we pay any claim:

25. If **you**, a **relative** or a member of **your travelling party**:
 - a. commits suicide, attempts to commit suicide or deliberately injures himself or herself;
 - b. is under the influence of, or is addicted to, intoxicating liquor or a drug, except a drug taken in accordance with the advice of a registered **medical practitioner**;
 - c. takes part in a riot or civil commotion;
 - d. acts maliciously;
 - e. races (except on foot); mountaineers - or rock climbs - using support ropes; or takes part in a professional sporting activity;
 - f. rides a motor cycle (except as a pillion passenger) without a licence that is valid in the relevant country; or
 - g. dives underwater using an artificial breathing apparatus unless **you** hold an open water diving licence or **you** were diving under licensed instruction.
26. For any costs or expenses incurred outside the period of the **trip** except as described under Section 2: Cancellation Costs.

CLAIMS CONDITIONS

1. In the event of a claim **you** must:
 - a. contact Specialty Assist on the +44 (0) 20 7902 7405 (while overseas) or 1800 611 210 (while in Australia) as soon as **you** are admitted to hospital or **you** anticipate **your** medical expenses are likely to exceed \$2,000;
 - b. collect a written medical report/summary from a treating doctor which explains the diagnosis provided, medical tests requested and treatment given.

- c. give **us** written notice immediately of an event that may result in a [claim](#);
 - d. **you** must give **us**, if requested by **us**, any information **we** ask for to support **your** claim, in such form as advised by **us** including police reports, valuations, medical reports/certificates, original receipts or proof of ownership;
 - e. give **us your** Certificate of Insurance and any information that **we** reasonably ask for;
 - f. not make any promise or offer of payment, or admit fault to anyone, or become involved in any litigation, without **our** consent; and
 - g. **you** must take all reasonable steps to prevent or minimise a claim.
2. Once the Certificate of Insurance has been issued **you** are not entitled to a refund of any part of the **amount payable** except as provided for under the Cooling-Off Period section.

YOUR POLICY COVER

SECTION 1 MEDICAL EXPENSES INCURRED OVERSEAS

NOTE: This is not a private health insurance policy. It only covers **you** if there is a sudden and unexpected **accident** or if **you** become ill during **your trip**.

If **you** are admitted to hospital as an in-patient or require on-going outpatient treatment **overseas**, Specialty Assist must be notified immediately.

If cover is confirmed, they will deal direct with the hospital and arrange the payment of any bills. Repatriation will be available where deemed medically necessary and approved by Specialty Assist.

You must maintain contact with Specialty Assist until **your return home** or until **you** no longer require treatment or assistance.

If **you** receive out-patient treatment (no hospital admission) and the costs are likely to exceed \$2,000 **you** must refer to Specialty Assist for authorisation.

Where your out-patient costs are less than \$2,000, it may be easier to pay any bills yourself. Keep all receipts and submit a claim when **you** return **home**. If **you** are in any doubt, call Specialty Assist for help.

24 hour Emergency Medical Assistance telephone number: **+44 (0)20 7902 7405** (while overseas) or **1800 611 210** (while in Australia).

COVERED

You are covered up to the limit as shown on the Schedule of Benefits for costs incurred outside Australia for:

1. emergency medical and surgical treatment and hospital charges;

2. emergency dental treatment, to relieve pain only to sound and natural teeth, limited to the amount shown on the Schedule of Benefits;
3. **reasonable** and necessary additional accommodation (room only) and travelling expenses to Australia (Economy Class), including those of one **relative** or friend if **you** have to be accompanied to Australia on the advice of the attending **medical practitioner** or if **you** are a child and require an escort to **Australia**;
4. in the event of death, reasonable cost for the conveyance of **your** body or ashes to Australia (the cost of burial or cremation is not included), or local funeral expenses incurred **overseas** limited to \$12,000.

NOT COVERED

1. the policy **excess** shown on the Schedule of Benefits. This applies to each person making a claim;
2. any sums which can be recovered from another source or which are covered under any reciprocal health arrangement;
3. any expenses or fees, for in-patient treatment or returning **home** early, which have not been reported to and authorised by Specialty Assist;
4. costs of more than \$2,000 which have not been agreed upon and authorised by Specialty Assist beforehand;
5. any expenses incurred for illness, **injury** or treatment required as a consequence of:
 - a. surgery or medical treatment which in the opinion of the attending **medical practitioner** and Specialty Assist can be reasonably delayed until **your** return **home**;
 - b. medication and or treatment which at the time of departure or date of purchase of **your** policy, whichever is the later, is known to be required or to be continued during **your** trip;
 - c. undertaking an activity against the advice of a **medical practitioner**;
 - d. any **pre-existing medical condition**;
6. the cost of any routine or elective (non-emergency) treatment or surgery, including specialist review or referral, exploratory tests, treatment or surgery which are not directly related to the **injury**, which necessitated **your** admittance to hospital;
7. claims that are not confirmed as medically necessary by the attending **medical practitioner** or Specialty Assist;
8. any additional hospital costs arising from single or private room accommodation unless medically necessary;
9. treatment or services provided by a health spa, convalescent or nursing home or any rehabilitation centre;
10. any costs incurred within Australia or after **you** have returned **home**.
11. further costs **you** incur if **we** wish to bring **you** back to Australia early but **you** refuse (where in the opinion of the treating **medical practitioner** and Specialty Assist **you** are fit to travel);
12. anything mentioned in the General Exclusions.

The total limit of cover for this benefit is \$500,000 on an Economy policy

The total limit of cover for this benefit is \$5,000,000 on a Premium policy

SECTION 2 CANCELLATION COSTS

COVERED

You are covered up to the limits as shown on the Schedule of Benefits for loss of travel, accommodation expenses and tuition/course fees, which were cancelled before **you** were due to leave **your home** for which **you** have paid or are contracted to pay, providing the cancellation is necessary and unavoidable (and is not as a result of a **change of mind** to begin **your trip** as arranged) due to any cause listed below occurring during the period of insurance:

1. **injury**, serious illness, death of **you**, any person with whom **you** are intending to travel or stay, or of an **immediate relative** or close business associate of **yours**;
2. **you** being called for jury service, attending court as a witness (but not as an **expert witness**), or **redundancy** (for **you** or for any person with whom **you** had arranged to travel);
3. **your home** or place of business being made uninhabitable, within 14 days of travel, or the police asking to see **you** after theft from **your home** which occurred within 14 days of travel.

NOT COVERED

1. the policy **excess** shown on the Schedule of Benefits of any incident. This applies to each person making a claim;
2. medically related claims where a certificate has not been obtained from a **medical practitioner**, confirming that cancellation of the **trip** is medically necessary;
3. additional costs as a result of not immediately telling the travel agent, tour operator or provider of transport or accommodation that **you** need to cancel the **trip**. **We** will only pay the cancellation charges that would have applied at the time **you** knew it was necessary to cancel **your trip**, if a valid claim exists;
4. any costs recoverable from another source;
5. anything caused directly or indirectly by prohibitive regulations by the Government of any country;
6. any **pre-existing medical condition**;
7. any costs incurred on behalf of other **travelling party** members who are not specified on the Certificate of Insurance;
8. delays, rescheduling or cancellation of scheduled transport services caused by the **carrier**;
9. a loss that arises directly or indirectly from an act or threat of terrorism. This exclusion only relates to Section 2 Cancellation Costs
10. anything mentioned in the General Exclusions.

The total limit of cover for this benefit is \$5,000 on an Economy policy

The total limit of cover for this benefit is \$10,000 on a Premium policy

SECTION 3 MEDICAL EVACUATION AND ADDITIONAL EXPENSES

This section includes the services of Specialty Assist, who must be contacted immediately in the event of a **serious injury**, illness or hospitalisation, or where repatriation has to be considered.

The 24 hour Emergency Medical Assistance telephone number is: **+44 (0)20 7902 7405** or **1800 611 210** (while in Australia).

COVERED

You are covered up to the limits as shown on the Schedule of Benefits for the value of the portion of **your** travel, accommodation expenses and tuition/course fees, calculated from the date of **your** return to **your home**, which have not been used and which were paid before **your** departure from **your home**.

You are also covered for **reasonable** additional travelling expenses (Economy Class) incurred by **you** for returning to **your home** earlier than planned due to accidental **injury**, **serious illness**, death of **you**, any person with whom **you** are intending to travel, or of a **relative of yours**.

If **you** want to return **home** during **your trip** for any reason that does not give rise to a claim under this policy, and **you** then wish to recommence **your trip**, **you** can do so under the same policy. All cover under the policy is suspended while **you** are in **Australia**.

CONDITIONS

1. **you** must contact Specialty Assist for assistance/advice if **you** need to cut short **your trip** for an insured reason.
2. **you** must use or revalidate **your** original ticket for **your** early return. If this is not possible **you** must provide evidence that additional costs were necessary. Any refunds due on unused original tickets will be deducted from **your** claim. If **you** do not have an original return ticket, **you** will not be reimbursed for costs incurred for **your** early return.
3. if **you** require Specialty Assist to pay for arrangements, they may first need to contact the relevant **medical practitioner** to confirm **your** claim falls within the terms of **our** cover.
4. if **you** make **your** own arrangements **you** must supply all necessary documentation to substantiate that **your** claim falls within the terms of cover.
5. this policy does not provide compensation for loss of holiday/enjoyment.

NOT COVERED

1. the policy **excess** shown on the Schedule of Benefits . This applies to each person making a claim;

2. claims that are not confirmed as medically necessary by Specialty Assist, and where a medical certificate has not been obtained from the attending **medical practitioner overseas** confirming it necessary to interrupt the **trip**;
3. additional travelling expenses incurred which are not authorised by Specialty Assist;
4. unused prepaid travel tickets where repatriation has been arranged by Specialty Assist;
5. any **pre-existing medical condition**;
6. any costs incurred more than 12 months after the **trip** was interrupted;
7. anything mentioned in the General Exclusions.

NOTE: It is a requirement of this insurance that **you** contact Specialty Assist immediately if **you** wish to return **home** for any of the reasons listed above or by any method other than as originally planned. Failure to do so may result in the reduction or refusal of any claim.

The total limit of cover for this benefit is \$500,000 on an Economy policy

The total limit of cover for this benefit is \$500,000 on a Premium policy

SECTION 4 LOSS OF TRAVEL DOCUMENTS

COVERED

You are covered up to the limit as shown on the Schedule of Benefits for **reasonable** additional travel or accommodation expenses **you** have to pay whilst **overseas**, over and above any payment which **you** would normally have made during the **trip** if no loss had been incurred, as a result of **you** needing to replace a lost or stolen passport/travel documents.

You are covered for the equivalent value of the remaining period of **your** passport if it is lost or stolen on **your trip**.

CONDITIONS

You must provide receipts for all costs incurred.

You must take **reasonable care** in supervision of **your** travel documents.

NOT COVERED

1. the policy **excess** shown on the Schedule of Benefits of any incident. This applies to each insured person involved in the incident causing the claim;
2. any costs that **you** would have incurred had **you** not lost **your** passport or travel documents;
3. if **you** do not exercise **reasonable care** for the safety or supervision of **your** passport/travel documents;
4. **your** passport / travel documents left **unsupervised** at any time (including in a vehicle or in the custody of carriers) unless they are with **you** on **your** person or locked in a safe or safety deposit box;

5. if **you** do not obtain a written police report within 24 hours of the loss;
6. loss, destruction or damage arising from confiscation or detention by customs or other officials or authorities;
7. Anything mentioned in the General Exclusions.

The total limit of cover for this benefit is \$1,000 on an Economy policy

The total limit of cover for this benefit is \$1,000 on a Premium policy

SECTION 5 STANDARD LUGGAGE AND PERSONAL EFFECTS

COVERED (PREMIUM POLICY ONLY)

1. Luggage and Personal Effects

You are covered up to the limit on the Schedule of Benefits for the value or repair to any of **your luggage and personal effects** (not hired, loaned or entrusted to **you**), which is lost, stolen, damaged or destroyed (after making proper allowance for wear and tear and depreciation) limited to:

- a. the single item limit as shown on **your** Schedule of Benefits for any one item, pair or set of items (for example, but not limited to: a camera, lenses attached or not, tripod and accessories or a matching pair of earrings are considered as only one item for this purpose) unless items are specifically shown on **your** Certificate of Insurance;
- b. the limit as shown on **your** Schedule of Benefits for all **items** in total unless items are specifically shown on **your** Certificate of Insurance.

2. Delayed Luggage

You are covered up to the limit on the Schedule of Benefits for the cost of buying replacement necessities if **your** personal luggage is delayed in reaching **you** on **your** outward journey for at least 12 hours and **you** have a written report from the **carrier** (e.g. airline, shipping company etc) or tour representative. Receipts will be necessary in the event of a claim. No **excess** is payable for this benefit.

CONDITIONS

1. any amount **we** pay **you** under a Delayed Luggage claim will be deducted from the final claim settlement if **your** luggage is permanently lost.
2. **you** must obtain written proof of the incident from the police, **your** accommodation management, tour operator or **carrier**, within 24 hours of the discovery in the event of

loss, burglary or theft of the luggage. Failure to do so may result in **your** claim being declined.

3. in the event of a claim for damaged items, proof of the damage must be supplied.
4. in the event of a claim for a pair or set of items, **we** shall be liable only for the value of that part of the pair or set which is lost, stolen, damaged or destroyed.
5. if the repair cost is more than the value of an item, **we** will assess the claim as if the item has been lost.

The total per item limit is \$250 with an overall benefit limit of \$2,500.

There is no cover under this section if **you** chose an Economy policy.

NOT COVERED

1. the policy **excess** shown on the Schedule of Benefits. This applies to each person making a claim, per incident;
2. if **you** do not exercise **reasonable care** for the safety and supervision of **your** personal luggage;
3. any item, pair or set of items with a value of over \$100, if an original receipt, valuation report or other **acceptable proof of ownership** and value cannot be supplied to support **your** claim;
4. in the event of a claim for damaged items, proof of the damage must be supplied. The damaged articles must be retained by **you** and if requested, submitted to the claims handlers so as to substantiate a claim. Failure to do so may result in a claim being declined.
5. if **your luggage and personal effects** are lost, damaged or delayed in transit and **you** do not:
 - a. notify the **carrier** (i.e. airline, shipping company etc.) immediately and obtain a written **carrier's report** (or Property Irregularity Report in the case of an airline); or
 - b. follow up in writing within 7 days to obtain a written carrier's report (or Property Irregularity Report in the case of an airline) if **you** are unable to obtain one immediately.
6. loss, destruction, damage or theft of the following property:
 - a. contact or corneal lenses, hearing aids, dentures and false body parts or other prostheses;
 - b. antiques, precious stones that are not set in jewellery, glass or china, pictures, musical instruments;
 - c. pedal cycles, dinghies, boats and/or ancillary equipment, vehicles or vehicle accessories (other than wheelchairs and pushchairs);
 - d. tools of trade;
 - e. perishable items such as food;
 - f. items specifically shown on **your** Certificate of Insurance left **unsupervised** at any time (including in a vehicle or in the custody of **carriers**) unless they are with **you** or locked in a safe or safety deposit box;

NOT COVERED

1. the policy **excess** shown on the Schedule of Benefits of any incident. This applies to each person making a claim;
2. fines imposed by a Court of Law or other relevant bodies;
3. anything caused directly or indirectly by:
 - a. liability which **you** incur as a result of an agreement that **you** made which would not apply in the absence of that agreement;
 - b. **injury**, loss or damage arising from:
 - i. ownership or use of aircraft, horse-drawn or mechanical/motorised vehicles, bicycles, vessels (other than rowing boats, punts or canoes), animals (other than horses) or firearms or any weapons
 - ii. the occupation (except temporarily for the purpose of the **trip**) or ownership of any land or buildings
 - iii. the carrying out of any **work**, trade or profession
 - iv. racing of any kind
 - v. any deliberate act
 - vi. suicide, attempted suicide, self inflicted **injury**, alcohol or drug abuse, alcoholism, drug addiction, solvent abuse, wilful exposure to exceptional risk (unless **you** are trying to save someone's life);
 - vii. anxiety, depression or any psychotic mental illness;
4. liability covered under any other insurance.
5. anything mentioned in the General Exclusions.

The total limit of cover for this benefit is \$2,500,000 on an Economy policy

The total limit of cover for this benefit is \$5,000,000 on a Premium policy

CLAIMS

HOW TO MAKE A CLAIM

You must give us notice of your claim immediately by completing the claim form. In the event of a claim, notice should be provided immediately to:

Cerberus Insurance Claims

PO Box A975, Sydney NSW 1235 Australia

Phone: 1300 625 229 while in Australia or +61 2 8263 0487 while overseas

Your claim will be processed within 10 business days of us receiving a completed claim form and all necessary documentation. If we need additional information, a written request will be sent to you within 10 business days.

If the claim form is not fully completed by **you**, **we** cannot process **your** claim.

If **you** do not advise us promptly of the full details of **your** claim, **we** can reduce **your** claim by the amount of prejudice **we** have suffered because of the delay.

You must give **us** any information **we** reasonably ask for to support **your** claim at **your** expense, such as but not limited to police reports, valuations, medical reports, original receipts or proof of ownership.

You must co-operate with **us** at all times in relation to the provision of supporting evidence and such other information as **we** may reasonably require.

1. For medical, hospital or dental claims, contact Specialty Assist immediately.
2. For damage or permanent loss of **your luggage and personal effects**, report it immediately to the police and obtain a written notice of **your** report.
3. For damage or misplacement of **your luggage and personal effects**, caused by the airline or any other operator or accommodation provider, report the damage or misplacement to an appropriate official and obtain a written report, including any offer of settlement that they may make.
4. Submit full details of any claim in writing within 30 days of **your** return.

CLAIMS ARE PAYABLE IN AUSTRALIAN DOLLARS TO YOU

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

YOU MUST NOT ADMIT FAULT OR LIABILITY

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

YOU MUST HELP US TO RECOVER ANY MONEY WE HAVE PAID

We may, at **our** discretion undertake in **your** name and on **your** behalf, control and settlement of proceedings for **our** own benefit in **your** name to recover compensation or secure indemnity from any party in respect of anything covered by this policy. **You** are to assist and permit to be done, all acts and things as required by **us** for the purpose of recovering compensation or securing indemnity from other parties to which **we** may become entitled or subrogated, upon **us** paying **your** claim under this policy regardless of whether **we** have yet paid **your** claim and whether or not the

amount we pay you is less than full compensation for your loss. These rights exist regardless of whether your claim is paid under a non-indemnity or an indemnity clause of this policy.

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

If any loss, damage or liability covered under this policy is covered by another insurance policy, you must give us details. If you make a claim under one insurance policy and you are paid the full amount of your claim, you cannot make a claim under the other policy. If you make a claim under another insurance policy and you are not paid the full amount of your claim, we will make up the difference. We may seek contribution from your other insurer. You must give us any information we reasonably ask for to help us make a claim from your other insurer.

RECOVERY

We will apply any money we recover from someone else under a right of subrogation in the following order:

1. To us, our administration and legal costs arising from the recovery.
2. To us, an amount equal to the amount that we paid to you under the policy.
3. To you, your uninsured loss (less your excess).
4. To you, your excess.

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

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

DEPRECIATION

Depreciation will be applied to claims for luggage and personal effects at such rates as reasonably determined by Cerberus.

BUSINESS TRAVELLERS - HOW GST AFFECTS YOUR CLAIM

If you are entitled to claim an input tax credit in respect of a cost for which a claim is made, or would be entitled to an input tax credit if you were to incur the relevant cost (i.e. in replacing a lost or stolen item), the amount we would otherwise pay will be reduced by the amount of that input tax credit.

FRAUD

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

can help by reporting insurance fraud. All information will be treated as confidential and protected to the full extent under law. Report insurance fraud by calling Cerberus on 1300 625 229.

IN CASE OF EMERGENCY

EMERGENCY TELEPHONE NUMBER

For emergency assistance from anywhere in the world, simply dial the following number reverse charge (collect) via the local operator: **+44 (0)20 7902 7405** (while overseas) or **1800 611 210** (while in Australia).