

WORLD TRAVELLER CARE

WORLD TRAVELLER CARE POLICY

This Policy is issued in consideration of the payment of premium as specified in the Policy Schedule and pursuant to the answers given in Your Application Form (or when You applied for this insurance) and any other disclosures made by You between the time of submission of Your Application Form (or when you applied for this insurance) and the time this contract is entered into. The answers and any other disclosures given by You shall form part of this contract of insurance between You and Us. However, in the event of any pre-contractual misrepresentation made in relation to Your answers or in any disclosures given by You, only the remedies in Schedule 9 of the Financial Services Act 2013 will apply.

This Policy reflects the terms and conditions of the contract of insurance as agreed between You (Policy Holder) and Us (Etiqa General Insurance Berhad).

ELIGIBILITY

To be eligible for cover under this Policy, You as the Main Insured Person named in the Certificate of Insurance and/or Schedule must be at least eighteen (18) years of age and not more than seventy (70) years of age on the Effective Date of Insurance. Eligibility for Senior Citizen age shall be at least seventy one (71) years and not more than eighty (80) years of age on the Effective Date of Insurance.

Subject to You being covered and according to the coverage selected, there shall also be eligibility for cover of Your:

- a) Legal Spouse who is at least eighteen (18) years of age and not more than seventy (70) years of age on the Effective Date of Insurance; and
- b) Legal Child(ren) as per Policy General Definitions.

CASH BEFORE COVER

The premium due must be paid in full and received by Us before the Effective Date of Insurance or renewal of this Policy. If this condition is not complied with then this Policy shall not be effective and shall become void.

GEOGRAPHICAL AREA OF TRAVEL

Area 1 (Domestic)	Malaysia
Area 2 (Selected Asian Countries)	Bangladesh, Bhutan, Brunei, Cambodia, China, Hong Kong, India, Indonesia, Japan, Laos, Macau, Maldives, Myanmar, Nepal, Pakistan, Philippines, Sikkim, Singapore, South Korea, Sri Lanka, Taiwan, Thailand, Timor Leste and Vietnam
Area 3	Worldwide excluding USA and Canada
Area 4	Worldwide including USA and Canada

For multiple destinations including transit, the widest Geographical Area of travel will apply.

COMMENCEMENT OF COVER

1. Benefits under Section C1 (Trip Cancellation)

The coverage is effective upon the issuance of the Certificate of Insurance and/or Schedule and terminates on the commencement of the planned Trip.

2. Benefits under Other Sections

- a) **Travel Area within Area 1 (Domestic)** – The coverage commences from the Effective Date of Insurance at 12:01 am Malaysian time and terminates at the end of the journey as defined under Trip.
- b) **Travel Area under Area 2, 3 and 4 (International)** – The coverage commences six (6) hours prior to the departure time and date as stated on the travel ticket and terminates at the end of the journey as defined under Trip.

AUTOMATIC EXTENSION OF PERIOD OF INSURANCE

In the event that the Insured Person, as a ticket holding passenger on a scheduled Public Conveyance, is being prevented from completing the return leg of a planned Trip within the Period of Insurance, as a result of:

- a) The Insured Person's Serious Bodily Injury or Serious Illness; or
- b) The scheduled Public Conveyance in which the Insured Person is travelling is being unavoidably delayed due to strike or industrial action, adverse weather condition or mechanical breakdown or derangement of the Public Conveyance or due to grounding of aircraft as a result of mechanical or structural defect;

during the Trip, the Period of Insurance shall be automatically extended for up to seven (7) consecutive days without additional premium, subject to relevant documentary evidence of such event being provided to Us.

GENERAL DEFINITIONS

Unless indicated or defined otherwise, the definitions with interpretation as set out below, will apply to this Policy.

Accident/ Accidental means an event of violent, unplanned, unforeseen, external and visible nature, which shall independently of any other causes be the sole cause of Bodily Injury.

Benefit means the respective Benefit(s), as stated in the Policy, Certificate of Insurance, Schedule and/or Endorsement payable by Us under the terms, exclusions and conditions of this Policy in respect of each event or loss covered by this Policy.

Bodily Injury means bodily injury suffered by an Insured Person resulting solely and directly from Accident (including as the direct result of exposure to the elements) and does not include sickness, disease, parasite, bacterial or viral infection or any naturally occurring condition or degenerative process.

Cancellation Expenses means loss of deposits or charges for advance payments for travel or accommodation or other charges which have not been or shall not be used but which become forfeit or payable under contract.

Certificate of Insurance means the Certificate of Insurance which is incorporated and forms part of this Policy.

Claimant means the person who submits a claim for an incurred cost.

Critical Medical Condition means a medical condition suffered by the Insured Person as a result of Bodily Injury or Illness, which is determined to be life-threatening at the absolute discretion of a Medical Practitioner designated by Us.

Curtailment means abandonment by return to a place of residence in Malaysia of the planned Trip after arrival at the booked destination as shown on the booking invoice due to:

- a) Serious Bodily Injury or Serious Illness of the Insured Person;
- b) Death, Serious Bodily Injury or Serious Illness of a Family;
- c) Hijacking of the aircraft in which the Insured Person is on board as a passenger;
- d) Natural disasters which prevent the Insured Person from continuing with their planned Trip;
- e) Act of Terrorism; or
- f) A fire or natural disaster resulting in serious damage to Your place of residence in Malaysia.

A medical report must be obtained from the Medical Practitioner treating the Insured Person or the Family confirming the Serious Bodily Injury or Serious Illness.

Each Day of Hospital Confinement is defined as a day of which the Hospital makes a charge for room and board to the Insured Person for admission as an in-patient for a minimum period of twenty-four (24) hours on the recommendation of a Medical Practitioner.

Effective Date of Insurance means the effective date on the Certificate of Insurance and/or Schedule.

Family means an Insured Person's Legal Spouse, parent, parent-in-law, grandparent, Legal Child(ren), brother or sister, who are residing in Malaysia.

Hijack means unlawful seizure and control of a Public Conveyance from the regular crew by use or threatened use of violent means.

Home means Your usual place of residence in Malaysia.

Hospital means a registered institution under supervision of physicians, established for the purpose of providing treatment and care of bed-paying sick or injured patients, and has facilities for:

- a) Twenty-four (24) hours nursing services by registered and graduate nurses; and
- b) Diagnostic and major surgery.

A Hospital is not:

- a) Primarily a clinic;
- b) A convalescent, nursing or rest home;
- c) A rehabilitation centre for alcoholics or drugs addicts; or
- d) A home for the elderly or infirmed.

Hospital Confinement means an admission of the Insured Person to a Hospital as a registered in-patient for treatment for Accident or Illness upon recommendation of a Medical Practitioner. The Insured Person must be required to physically stay in the Hospital for the duration of Hospital Confinement.

Illness means physical condition marked by a pathological deviation from the normal healthy state as verified by a Medical Practitioner.

Insured Person means You and/or Your Legal Spouse and/or Your Legal Child(ren) depending on the coverage which You have selected for under this Policy.

Legal Child(ren) means legal child(ren) including stepchild(ren) and/or legally adopted child(ren):

- a) Who is/are at least forty-five (45) days of age and not more than eighteen (18) years of age (or not more than twenty three (23) years of age if studying full-time in a recognized tertiary institution) on the Effective Date of Insurance;
- b) Wholly dependent on You or Your Legal Spouse for financial support; and
- c) Unmarried.

Legal Spouse means Your legally married spouse. For the purpose of this Policy, a common Law marriage is not considered a legal marriage except as solemnised according to the provisions of the Law Reform (Marriage and Divorce) Act 1976.

Loss of Limb means total functional disablement or loss by complete and permanent physical severance of a limb between the wrist and shoulder, or between the ankle and hip.

Loss of Sight means the entire and permanent loss of all sight in an eye rendering the Insured Person absolutely blind in that eye and beyond remedy by surgical or other treatment.

Loss of Speech and Hearing means total and irrecoverable loss of speech and hearing which is beyond remedy by surgical or other treatment.

Main Insured Person means You (the Policyholder) as stated in the Certificate of Insurance and/or Schedule.

Medical Practitioner means a doctor, consultant physician, surgeon, or specialist, who is registered to practice western medicine, who in rendering such treatment, is practicing within the scope of his licensing and training in the geographical area of practice where the treatment is provided, and who is not an Insured Person.

Period of Insurance means the period during which the coverage under this Policy is effective, as stated in the Certificate of Insurance and/or Schedule.

Permanent Total Disablement means that the Insured Person is incapable of performing any work, occupation or profession for wages, compensation or profit, solely due to Accident, with no chances of recovery based on current medical knowledge and technology.

Personal Data means any information that relates directly or indirectly to You and extends to any individual whose personal data has been provided by You, who is identified or identifiable from that information or from that and other information in Our possession, including any sensitive personal data and expression of opinion about You and the individual. For clarity purposes, Your personal data may have otherwise been provided to Us by an authorised third party.

Plan(s)

- a) **Individual & Spouse Plan** means You and Your Legal Spouse only. Only one (1) Legal Spouse is eligible to be insured under this Policy.
- b) **Family Plan** means You, Your Legal Spouse and Your Legal Child(ren) only. Only one (1) Legal Spouse is eligible to be insured under this Policy. No restriction on the number of Legal Child(ren) to be insured under this Policy.

Pre-existing Condition means an Illness about which the Insured Person is considered to have a reasonable knowledge, based on any of the following occurring before the Effective Date of Insurance:

- a) The Insured Person had received or is receiving treatment;
- b) Medical advice, diagnosis, care or treatment has been recommended;
- c) Clear and distinct symptoms are or were evident; or
- d) The condition would have been apparent to a reasonable person in such circumstances.

Public Conveyance means any land, inland waterways, sea or air conveyance operated under a license for the transportation of fare paying passengers and which has fixed and established routes only. It does not include taxis, helicopters and limousine services. Motorcycling as a mode of transport is excluded for a Trip or journey within Travel Area 1 (Domestic).

RM shall mean Ringgit Malaysia, the currency of Malaysia.

Serious Bodily Injury or **Serious Illness** whenever applied to the Insured Person, is one which requires treatment by a Medical Practitioner and which results in the Insured Person being certified by that Medical Practitioner as unfit to travel or continue with the planned Trip. When applied to the Family, it shall mean Bodily Injury or Illness certified by a Medical Practitioner as being dangerous to the life of the Family and which results in the discontinuation or cancellation of the planned Trip.

Specified Cause means:

- a) The Insured Person dying or becoming ill or sustaining Bodily Injury rendering them unfit to travel in the opinion of a Medical Practitioner;
- b) The death of Family or Bodily Injury or Illness of Family necessitating a Hospital Confinement;
- c) Compulsory quarantine, jury service, subpoena or kidnapping of the Insured Person;
- d) Cancellation of scheduled Public Conveyance services consequent upon strike, riot or civil commotion;
- e) Following the advice and/or warning of the Malaysian government, or the government of the destination country, declaring unsafe conditions for travel, through or by general mass media;
- f) Natural disasters which prevent the Insured Person from continuing with their planned Trip; or
- g) The Insured Person's residence becoming uninhabitable following fire, storm, or flood occurrence such that the Insured Person's presence is required on the premises on the scheduled departure date as stated on the travel ticket,

where, for paragraphs (a) to (f), the events mentioned occur within thirty (30) days before the scheduled departure date as stated on the travel ticket, and for paragraph (g) the event occurs within seven (7) days before the scheduled departure date as stated on the travel ticket.

Terrorism means an act or acts, of any person or group(s) of person, committed for political, religious, ideological or similar purposes with the intention to influence any government and/or to put the public, or any section of the public, in fear. Terrorism can include, but not be limited to, the actual use of force or violence and/or the threat of such use. Furthermore the perpetrators of Terrorism can either be acting alone, or on behalf of, or in connection with any organisation(s) or government(s). Act of Terrorism shall also include any act which is verified or recognised by the (relevant) government as an act of Terrorism.

Trip means:

1. International (to Area of Travel under Area 2, 3 or 4)
Journey commencing six (6) hours prior to the booked departure time for a direct journey to the place of embarkation in Malaysia and ceases on whichever of the following occurs first:
 - a) Six (6) hours after booked arrival time at the final destination in Malaysia;
 - b) Immediate upon arrival at Your Home of residence in Malaysia; or
 - c) The expiry of the Period of Insurance specified in the Policy.
2. Domestic (Area of Travel within Malaysia)
Journey commencing from the Effective Date of Insurance at 12:01 am Malaysian time and ceases on whichever of the following occurs first:
 - a) Immediate upon arrival at Your Home of residence in Malaysia; or
 - b) The expiry of the Period of Insurance at 23:59 pm Malaysian time, on the date specified under the Policy.

The duration under "Per Trip" shall not exceed:

- a) Thirty (30) consecutive days for travelling within Area of Travel under Area 1; or
 - b) Ninety (90) consecutive days for travelling to and within Area of Travel under other than Area 1;
- from the commencement date of such Trip.

One Way Trip is not allowed.

We (Our, Us, the Company) means Etiqa General Insurance Berhad and 24 Hours Travel and Medical Assistance Service provider appointed by Etiqa General Insurance Berhad.

You (Your) means you as the Policyholder/Main Insured Person.

COVERAGES & BENEFITS

The amount of Your Benefits is determined by the plan that You have selected which is stated in the Schedule of this Policy.

Sections / Benefits, Per Trip	Benefit Amount (RM)			
	Domestic	International		
		Silver	Gold	Platinum
Section A – Death or Permanent Disablement arising from any one Accident/incident				
<p>A1. Accidental Death or Permanent Disablement If, during the Period of Insurance, whilst the Insured Person is on a planned Trip, the Insured Person sustains Bodily Injury which results in Death or Permanent Disablement, within fifty-two (52) weeks after the date of the Accident, We shall pay a proportion of the relevant Benefit Amount as specified below:</p> <ol style="list-style-type: none"> 1. Per Adult; 2. Per Child 3. Per Senior Citizen; or 4. Per Family – maximum payable for any one Accident under Family plan. <p>Proportion of Benefit Amount Paid</p> <ol style="list-style-type: none"> 1. Accidental Death 2. Permanent Total Disablement 3. Total and Permanent Loss of Speech and Hearing 4. Loss of sight in both Eyes 5. Loss of use of Two (2) Limbs 6. Loss of use of One (1) Limb 7. Loss of sight in One (1) Eye 8. Total and Permanent Loss of Speech 9. Total and Permanent Loss of Hearing in: <ol style="list-style-type: none"> a) Both Ears; or b) One (1) Ear. <p>Conditions applicable to Section A The occurrence of any specific loss for which indemnity is payable under Section A1(1) to A1(5) shall at once terminate all cover under the Policy, but such termination shall be without prejudice to any other claim originating from the same Accident causing such loss.</p> <p>The maximum Benefit paid under Section A is restricted to 100% of the Benefit Amount and a Benefit on partial disablement is not payable.</p>	50,000 10,000 50,000 150,000	50,000 10,000 50,000 150,000	100,000 20,000 100,000 300,000	500,000 100,000 500,000 1,500,000
Section B – Reimbursement of expenses in respect of medical treatment per any one Accident/incident				
<p>B1. Medical Related Expenses Reimbursement of medical, Hospital and treatment expenses (including cost of emergency dental treatment for the alleviation of sudden pain but excluding replacement of dentures), necessarily incurred, by the Insured Person, during the Trip.</p> <p>Any out-patient medical expenses claims for an amount not exceeding Ringgit Malaysia Three Thousand (RM3,000) for any one Accident/incident will be on a reimbursement basis.</p>	Up to 50,000	Up to 300,000	Up to 500,000	Up to 1,000,000
<p>B2. Follow-up Treatment Reimbursement for the necessary follow-up medical, Hospital and treatment expenses (including the cost of a private ambulance or professional home-nursing fees) incurred by the Insured Person in Malaysia within three (3) months after their return from the Trip.</p>	Up to 5,000	Up to 5,000	Up to 10,000	Up to 30,000
<p>B3. Alternative Treatment Reimbursement of reasonable alternative treatment expenses, having resulted from Accident or Illness of the Insured Person during the Trip, incurred by the Insured Person in Malaysia within three (3) months after returning from the Trip.</p> <p>The treatment must be carried out by a registered traditional medicine practitioner, osteopath, physiotherapist and/or chiropractor, provided treatment is sought from a Medical Practitioner in the first instance. This Benefit excludes treatment prescribed by someone who is the Insured Person himself/herself or his/her Family.</p>	Not Covered	Not Covered	Not Covered	Up to 1,000
<p>B4. Compassionate Care Reimbursement for reasonable additional accommodation, communication, round trip economy class air ticket, travel expenses between Malaysia and the place of loss, and meals incurred by one (1) person who is:</p> <ol style="list-style-type: none"> a) Required to travel due to Your Hospitalisation at the medical advice of the treating physician; or b) Required to travel as a result of Your death during the Trip, provided no adult member of Your Family is present during the Trip. 	Not Covered	Not Covered	Not Covered	Up to 5,000

Sections / Benefits, Per Trip	Benefit Amount (RM)			
	Domestic	International		
		Silver	Gold	Platinum
<p>B5. Child Care / Guard and Return of Child(ren) Reimbursement for reasonable additional accommodation, communication, round trip economy class air ticket, travel expenses between Malaysia and the place of loss, and meals incurred by one (1) person to take care of and/or accompany Your Child(ren), below eighteen (18) years old, back to Malaysia due to Your Hospitalization, where no adult member of Your Family is present during the Trip.</p>	Not Covered	Not Covered	Not Covered	Up to 5,000
<p>B6. Daily Hospital Income / Hospital Confinement Allowance In the event the Insured Person, whilst on a Trip, is subject to Hospital Confinement, We will pay a daily Hospital Income for every complete day of Hospital Confinement provided a valid claim is payable under Section B1. Payment for such Benefit should not exceed twenty (20) days of such Hospital Confinement.</p> <p>Subject to maximum per Trip</p> <p>Exclusions applicable to Section B We shall not pay for claims in respect of:</p> <ol style="list-style-type: none"> 1. Experimental, elective or investigative procedures or non-emergency medical check-ups, vaccinations and their complications; 2. Cosmetic or plastic surgery apart from reconstructive surgery required by a covered Accident; 3. Cures (including follow up) of any kind not resulting from an Accident or Illness, psychoanalytical treatment, rest cures, physiotherapy and detoxification; 4. Ophthalmological care, eye glasses, contact lenses, eye examinations, refractive surgery, hearing aids, prostheses, dental care, dental treatment, oral surgery and dentures, unless prescribed by a Medical Practitioner for the treatment of Bodily Injury; 5. Any congenital condition which includes any medical or physical abnormalities existing at the time of birth, as well as neo-natal physical abnormalities developing within six (6) months from the time of birth; 6. Any communicable diseases which require quarantine by law; 7. Treatments for weight reduction or gain; 8. Any investigation and treatment of sleep and snoring disorders and hormone replacement therapy; 9. Any circumcision or expenses incurred for sex change; 10. Any donation of any body organ including costs of acquisition and donation; 11. Any external prosthetic appliances or devices such as artificial limbs, hearing aids, implanted pacemakers, contact lenses, lenses, glasses and prescription thereof; 12. Any costs and expenses which are of non-medical nature; 13. Private nursing, rest cures, sanatoria care or detoxification; 14. Any medical expenses incurred overseas after We are of the opinion that You are fit for return to Malaysia but You have refused; 15. Any medical expenses incurred overseas which We are of the opinion can be delayed for treatment upon return to Malaysia; 16. When You are not fit to travel or are travelling against the advice of a Medical Practitioner or for the purpose of seeking medical attention; and 17. The first Ringgit Malaysia One Hundred (RM100) for any claim made. 	<p>Each Insured Person 150 per day</p> <p>Each Insured Person 3,000</p>	<p>Each Insured Person 150 per day</p> <p>Each Insured Person 3,000</p>	<p>Each Insured Person 250 per day</p> <p>Each Insured Person 5,000</p>	<p>Each Insured Person 350 per day</p> <p>Each Insured Person 7,000</p>
Section C – Inconveniences per any one Accident/incident				
<p>C1. Trip Cancellation If, during the Period of Insurance, an Insured Person is forced to cancel any part of a planned Trip prior to the commencement of that Trip as a direct and necessary result of the Specified Cause, We shall reimburse the Insured Person in respect of Cancellation Expenses incurred. Provided always that this coverage is effective only if this Policy is purchased before the Insured Person becomes aware of any circumstances which could lead to the disruption of their Trip.</p> <p>You can only claim under either Section C1 or Section C2 arising out of the same event.</p>	Not Covered	Not Covered	Up to 20,000	Up to 50,000
<p>C2. Trip Curtailment We shall reimburse the Insured Person for the proportional return of the irrecoverable prepaid cost of the planned Trip in respect of travelling expenses only as shown on the booking invoice, calculated on a pro rata basis for each complete day of the planned Trip lost, including reasonable additional hotel and repatriation costs to Malaysia necessarily and unavoidably incurred, due to the necessary and unavoidable Curtailment. This coverage is effective only if the Policy is purchased before the Insured Person becomes aware of any circumstances which could lead to the disruption of the planned Trip.</p> <p>You can only claim under either Section C2 or Section C1 arising out of the same event.</p>	Not Covered	Not Covered	Up to 20,000	Up to 50,000

Sections / Benefits, Per Trip	Benefit Amount (RM)			
	Domestic	International		
		Silver	Gold	Platinum
<p>Exclusions applicable to Section C2 We shall not pay for claims arising directly or indirectly from, in respect of, or due to Government regulation or Statute, delay or amendment of the booked Trip (including error, omission or default) by the provider of any service forming part of the booked Trip as well as the agent or tour operator through whom the Trip was booked, or failure to obtain the necessary documents to travel.</p>				
<p>C3. Travel Delay We will pay cash Benefit for each completed eight (8) consecutive hours period if a disruption to Your journey arises from strike or industrial action, adverse weather conditions, mechanical breakdown or derangement or structural defect of the Public Conveyance You were scheduled to travel in, subject to written confirmation from the Public Conveyance or their handling agents of the number of hours of delay. If the Public Conveyance provides alternative means of transportation, at no additional cost, which will influence and assist continuing the scheduled journey, the alternative schedule must be accepted and any consequential cost would not constitute a claim.</p>	Not Covered	Not Covered	250 each completed eight (8) hours delay up to maximum 2,000	250 each completed eight (8) hours delay up to maximum 5,000
<p>C4. Baggage Delay We shall reimburse the Insured Person for emergency purchases of essential items of clothing, or requisites consequent upon temporary deprivation of baggage, for at least eight (8) hours from time of arrival at destination abroad due to misdirection in delivery as confirmed by the airline or shipping line. You can only claim under either Section C4 or Section D1 arising out of the same event and of the same item.</p> <p>Exclusions applicable to Section C4 This Benefit is not payable if the delivery of baggage is delayed upon the Insured Person's returning to Malaysia.</p>	Each Insured Person up to 500	Each Insured Person up to 500	Each Insured Person up to 1,000	Each Insured Person up to 2,000
<p>C5. Hijacking Inconvenience If, during the Period of Insurance, whilst the Insured Person is on a Trip overseas, the Public Conveyance that he is travelling in is Hijacked, We shall pay a cash Benefit for each full twenty four (24) hours period that the Hijack continues. Any claims under this Section must be accompanied by a police report or a report issued by the Public Conveyance, confirming that the Insured Person was a victim of Hijack and the duration of such Hijack.</p>	Not Covered	Not Covered	250 each completed twenty four (24) hours delay up to maximum 500	250 each completed twenty four (24) hours delay up to maximum 1,000
Section D – Reimbursement of Losses or Damages to baggage, personal effects, personal money and/or travel documents of the Insured Persons				
<p>D1. Losses or Damages to Baggage and/or Personal Effects (sum insured/limit aggregated for the Trip period) We shall reimburse the Insured Person for loss of or damage to baggage and personal effects on a Trip, which are taken, or purchased on a Trip and owned by the Insured Person. Personal effects being articles of a personal use designed to be worn or carried, belonging to the Insured including clothing, trunks, suitcases and the like.</p> <p>Conditions applicable to Section D1</p> <p>a) We shall not pay more than Ringgit Malaysia Five Hundred (RM500) for any one article or a pair or a set of articles;</p> <p>b) In respect of articles more than one year old, We may make payment subject to due allowance for wear and tear and depreciation, or at Our option, to reinstate or repair such articles;</p> <p>c) Jewellery, electronic items and watches must be worn or kept in personally attended baggage at all times except when in a hotel safe;</p> <p>d) The loss or damage must be reported to the police or relevant authority, having jurisdiction where the loss or damage occurred within twenty four (24) hours from the incident. Any claims for indemnity under this Section must be accompanied by a copy of a police report or a report issued by the relevant authority evidencing such loss or damage;</p> <p>e) The submission of a claim under this Section shall preclude any claim from being made under Section C4 arising out of the same event and of the same item; and</p> <p>f) In the event the Insured Person is entitled to a refund or reimbursement of all or part of such expenses from any other source, or if there is in place any other insurance against the events covered under this Section, We shall only be liable for the excess of the amount recoverable from such other source or insurance/Takaful.</p>	Up to 1,000	Up to 1,000	Up to 3,000	Up to 5,000

Sections / Benefits, Per Trip	Benefit Amount (RM)			
	Domestic	International		
		Silver	Gold	Platinum
<p>Exclusions applicable to Section D1 We shall not pay for the costs of replacement, repair, or otherwise related to the loss or damage due to/to:</p> <ol style="list-style-type: none"> 1. Wear and tear, gradual deterioration, moths, vermin, inherent vice, mechanical or electrical breakdown or derangement or damage sustained due to any process initiated by the Insured Person to repair, clean or alter; 2. The Insured Person's failure to take due and reasonable care and precautions to safeguard and secure the baggage and personal effects; 3. Loss of data recorded on tapes, cards, drives and discs or otherwise including the cost of reproducing the data; 4. Motorized conveyances; 5. Sports items or equipments; 6. Perishable and consumable items; 7. Antiques, artifacts, paintings, objects of art or any object with intrinsic value; 8. Manuscripts, financial securities or instruments of any kind currency notes or travellers cheques; 9. Stamps, travel documents, credit cards, title deeds, driving license and identity cards; 10. External prosthetic appliances or devices which includes but is not limited to artificial limbs, hearing aids, implanted pacemakers, contact lenses, lenses, glasses, artificial teeth and dental bridges; 11. Musical instruments; 12. Fragile items; 13. Hired or leased equipment; 14. Loss to baggage sent in advance, mailed or shipped separately; 15. Loss of business goods or samples or equipment of any kind; 16. Loss in respect of shortage due to error, omission, exchange transactions or depreciation in value; 17. Electronic items, laptop or jewellery that is checked-in with the Public Conveyance; 18. Mysterious disappearance; and 19. The first Ringgit Malaysia One Hundred (RM100) for any claim made. 				
Section D – Reimbursement of Losses or Damages to baggage, personal effects, personal money and/or travel documents of the Insured Persons				
<p>D2. Personal Money and Travel Documents We shall indemnify the Insured Person for any loss of:</p> <ol style="list-style-type: none"> a) Personal Money (coins, bank notes, postal money orders or travellers' cheques); and b) Travel Documents (passport, visas or travel tickets), sustained whilst on a Trip due to theft or by force, violence, or threat of violence. <p>Conditions applicable to Section D2 The loss must be reported to the police or relevant authority having jurisdiction where the loss occurred within twenty-four (24) hours after the incident. Any claim must be accompanied by a copy of a police report, or a report issued by the relevant authority evidencing such loss.</p> <p>In the event the Insured Person becomes entitled to a refund or reimbursement of all or part of such expenses from any other source, or if there is in place any other insurance/Takaful against the events covered under this Section, We shall only be liable for the excess of the amount recoverable from such other source or insurance/Takaful.</p> <p>The Insured Person must take every possible safeguard to ensure the security of their Personal Money and Travel Documents.</p> <p>Exclusions applicable to Section D2 We shall not pay for claims in respect of:</p> <ol style="list-style-type: none"> 1. Loss due to confiscation or detention by customs or any other authority; 2. Loss of postal money orders or travellers' cheques not immediately reported to the local branch or agent of the issuing authority; 3. Devaluation of currency or shortage due to errors or omissions during any transactions involving money; and 4. The first Ringgit Malaysia One Hundred (RM100) for any claim made. 	Not Covered	Not Covered	Up to 500	Up to 1,000
	Not Covered	Not Covered	Up to 3,000	Up to 5,000
Section E – Reimbursement of personal liability claims against the Insured Persons				
<p>E1. Personal Liability We shall indemnify the Insured Person in respect of legal liability occurring during the Period of Insurance as a result of Bodily Injury (including Death) to, or Accidental loss of or damage to property of any third party, including third party costs and expenses recoverable from the Insured Person and costs and expenses incurred, with Our prior written consent.</p> <p>Conditions applicable to Section E1 a) Except with Our written consent no Insured person is entitled to admit liability or to give any representation or other undertaking binding upon</p>	Up to 200,000	Up to 200,000	Up to 1,000,000	Up to 2,000,000

Sections / Benefits, Per Trip	Benefit Amount (RM)			
	Domestic	International		
		Silver	Gold	Platinum
<p>him/her; and</p> <p>b) We shall be entitled to conduct all proceedings arising out of or in connection with claims in the name of the Insured Person and to instruct solicitors of Our own choice for this purpose.</p> <p>Exclusions applicable to Section E1 We shall not pay for claims arising out of, in respect of, or consequent upon:</p> <ol style="list-style-type: none"> 1. Liability to any person who is a member of Your Family or employer or deemed by law to be Your employee; 2. Accidental loss or damage to property belonging to, held in trust or in the custody or control of You or any of Your employees or any of Your Family or household; 3. Pursuit of trade, business or profession; 4. Ownership or occupation of land or buildings (other than occupation only of any temporary residence); 5. Ownership, possession or use of vehicles, aircraft or watercraft or any other conveyance; 6. Legal costs resulting from any criminal proceedings; 7. Liability attaching under an express term of a contract, unless liability would attach whether the express term existed or not; 8. Liability arising directly or indirectly by or through or in connection with any loss or damage to property due to act of animals belonging to, held in trust or in the custody or control of You or any of their employees or any of Your Family or household; 9. Sexual molestation, physical or mental abuse; 10. Any punitive, aggravated or exemplary damages awarded by any courts; 11. Any non-pecuniary losses; and 12. Liability for which payment should be more specifically claimed under any other contract of insurance/Takaful in Your name. 				
Section F – Reimbursement of the costs of emergency services for all the Insured Persons	Due to Accident only	Due to Accident or Illness		
<p>F1. Emergency Medical Evacuation Medically necessary expenses for emergency transportation and medical care en route, to move an Insured Person who has a Critical Medical Condition to the nearest Hospital where appropriate care and facilities are available.</p> <p>In the event of such an emergency, the 24 Hours Travel and Medical Assistance Helpline must be contacted immediately to approve emergency transportation. In dire emergencies in remote or primitive areas, where the 24 Hours Travel and Medical Assistance Helpline cannot be contacted in advance, the emergency transportation must be reported as soon as possible.</p> <p>We retain the right to decide the place to which the Insured Person shall be transported. We shall pay the reasonable transportation costs only of one other person accompanying the Insured Person, for emergency transportation when this is deemed necessary by Us, and We reserve the right to reimburse the reasonable and customary costs as determined by Us.</p> <p>This Benefit will only be applicable if the relevant Benefit under Section A or Section B is payable.</p>	Up to 500,000	Up to 500,000	Up to 1,000,000	Up to 1,500,000
<p>F2. Repatriation, Burial & Cremation of Mortal Remains Reasonable charges in the event of Death for burial or cremation of the Insured Person in the locality where death occurs including the reasonable cost of transport of body or ashes to or within Malaysia.</p> <p>This Benefit will only be applicable if the relevant Benefit under Section A is payable.</p>	Up to 500,000	Up to 500,000	Up to 1,000,000	Up to 1,500,000

24 HOURS TRAVEL AND MEDICAL ASSISTANCE SERVICES

24 Hours Travel and Medical Assistance Helpline Number

+603 2161 0270

The Insured Person can contact Our 24 Hours Travel and Medical Assistance Helpline Number for any travel assistance or medical emergency during the planned Trip. The services provided under this Section are on referral or arrangement basis only and We shall not be responsible for any expenses incurred or borne by You. The provision of financial guarantee by Us, if any, will be subject to Our prior agreement and/or first securing payment from You through Your credit card and/or from funds provided by You. We will use Our best efforts to provide any information and referral services to the Insured Person in a timely and accurate manner and will exercise due care and diligence in selecting the medical service providers. However, We cannot guarantee the quality of the medical service providers and the final selection of the medical service providers will be the responsibility of the Insured Person.

We will not be responsible for any consequential loss to the Insured Person resulting from the usage of such medical service providers or any delay in communicating any information or message.

The services provided are as follows:

1. Travel Assistance

- a) Airline regulations;
- b) Contact details of consulate & embassy;
- c) Emergency cash advance up to sum insured / limit of cover;
- d) Emergency message transmission;
- e) Flight schedules or information and reservation or ticketing assistance;
- f) Foreign currency exchange rate information and services;
- g) Inoculation and visa information or requirement;
- h) Interpreter or translation referral;
- i) Legal firm referral;
- j) Loss luggage assistance;
- k) Loss passport or documents assistance;
- l) Pre-travel advice;
- m) Weather information assistance;

2. Medical Assistance

- a) 24 hours medical referral, information & advice;
- b) Air ambulance services;
- c) Arrangement and upfront payment for compassionate visit;
- d) Arrangement and upfront payment for return of dependent child(ren);
- e) Arrangement and upfront payment of emergency medical evacuation;
- f) Arrangement and upfront payment of emergency medical repatriation;
- g) Arrangement and upfront payment of repatriation and transportation of mortal remains;
- h) Arrangement for appointment with local doctor for treatment;
- i) Arrangement of ground transportation and accommodation;
- j) Arrangement of Hospital admission;
- k) Compassionate return Home due to death of relative;
- l) Dispatch of essential medication;
- m) Hotel or car rental reservations;
- n) Emergency message transmission;
- o) Medical service provider referral;
- p) Monitoring of medical condition when hospitalized;
- q) Pre-travel medical advice;
- r) Return Trip for travelling companion in case of medical emergency; and
- s) Second medical opinion.

CLAUSES

DISAPPEARANCE CLAUSE

If the Insured Person is travelling and the means of transportation disappears, sinks, crashes, or is wrecked and the Insured Person has not been found within one (1) year from the disappearance, sinking, crash, or wreckage, We shall presume that the Insured Person has died as a result of Bodily Injury and shall pay the Benefit accordingly. If at any time after payment of the Benefit has been made by Us, the Insured Person is found to be alive, such payment shall be immediately refunded to Us.

AGGREGATE LIMIT OF LIABILITY CLAUSE

The Aggregate Limit of Liability to be borne by Us shall be Ringgit Malaysia Five Million (RM5 million) per Policy. We shall not liable for any amount in excess of the stated Aggregate Limit of Liability.

If the Aggregate amount of all Benefits payable under this Policy exceeds the Aggregate Limit, the Benefit payable to each Insured Person shall be proportionally reduced until the total of all Benefits does not exceed the Aggregate Limit of Liability.

SANCTION LIMITATION AND EXCLUSION CLAUSE

This insurance policy shall not provide cover and We shall not be liable to pay any claim or provide any Benefit hereunder to the extent that the provision of such cover, payment of such claim, or provision of such Benefit would expose Us to any Sanction, prohibition or restriction under the United Nations resolutions or trade or economic sanctions, laws or regulations of the European Union, United Kingdom or United States of America.

JURISDICTION CLAUSE

The indemnity provided herein shall not apply to:

1. Compensation for damages in respect of judgements delivered or obtained in the first instance otherwise than by a court of competent jurisdiction within Malaysia; or
2. Costs and expenses of litigation recovered by any Claimant from the Insured which are not incurred in and recoverable in Malaysia.

GENERAL EXCLUSIONS

We shall not pay under any Section of this Policy for Benefit, loss, expense or liability directly or indirectly, caused by, a consequence of, arising in connection with or is contributed to by:

1. Any Pre-existing Condition(s) of the Insured Person;
2. Self-inflicted injuries or suicide or attempted suicide, while sane or insane;
3. Pregnancy, childbirth including surgical delivery, abortion, miscarriage and all related complication except miscarriage due to Bodily Injury as a direct result of an Accident;
4. Consumption of alcohol, non-prescribed or illegal drugs or narcotics;
5. Any condition, which is or results from or is a complication of infection with Human Immunodeficiency Virus (HIV), including Acquired Immune Deficiency Syndrome (AIDS), and any opportunistic infections and/or malignant neoplasm (tumour) found in the presence of HIV;
6. Provoked homicide or assault;
7. Psychiatric, mental or nervous medical conditions, including but not limited to, any neuroses and their physiological or psychosomatic manifestations;

8. Sexually transmitted diseases or disorders, and conditions arising from these diseases or disorders;
9. Any consequential loss, economic or otherwise, loss of enjoyment or other loss not mentioned in this Policy, whether financial or non-financial, including but not limited to any legal or other professional costs and/or travel expenses arising directly or indirectly out of any claim made by You under this Policy;
10. You engaging in law enforcement, emergency services, civil defense, naval, military or air force service, or operation or testing of any kind of conveyance or being employed as a manual worker or whilst engaging in offshore activities like diving, oil-rigging, mining or aerial photography or handling of explosive or loss of or damage to hired or leased equipment;
11. Air travel other than as a fare paying passenger on a regular scheduled airline or licensed chartered aircraft;
12. You participating in any illegal activities, or loss resulting directly or indirectly from action taken by the government authorities including confiscation, seizure, destruction and restriction;
13. War, invasion, act of foreign enemy, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection, military or usurped power or confiscation or nationalization or requisition or destruction of or damage to property under the order of any government or public or local authority;
14. Loss, destruction or damage to any property whatsoever or any loss or expense whatsoever arising therefrom or any consequential loss directly or indirectly caused or contributed to by or arising from ionizing radiations or contamination by radio-activity from any nuclear fuel, nuclear weapons or from any nuclear waste from the combustion of nuclear fuel;
15. You participating in hazardous sports and activities, including, but not limited to:
 - a) Any speed contest or racing (other than on foot);
 - b) Any professional competition or sports;
 - c) Extreme sports, racing, motor rallies, horse riding and competitions;
 - d) Mountaineering (reasonably requiring the use of ropes and guides), rock climbing, caving, pot-holing, hiking/trekking in remote areas unless with licensed guides;
 - e) Any activity involving the Insured Person being airborne (whether suspended or not) not limiting to parachuting, ballooning, hand gliding, bungee jumping, sky diving or high diving;
 - f) Any underwater activities involving the use of underwater breathing apparatus, water sports, private white water rafting grade 4 or above, ocean yachting;
 - g) Winter sports (excluding curling and skating);
 - h) Association or rugby football;
 - i) Motorcycling (unless licensed in the country where the Accident took place and whilst wearing a helmet);
 - j) Expeditions; or
 - k) Hunting trips;
16. Travel in, to or through countries or regions which are subject to war, conflict, or quarantine for contagious disease, including: Afghanistan, Africa (other than Botswana, Kenya, Lesotho, Madagascar, Malawi, Mauritius, Mozambique, Namibia, Seychelles, South Africa, Swaziland, Tanzania, Zambia and Zimbabwe), Iraq, Iran, North Korea, Palestine, Syria or Ukraine.

GENERAL CONDITIONS

1. **Entire Contract – Changes in Policy**
No change in this Policy, Certificate Of Insurance, Schedule and/or Endorsements shall be valid unless approved by Us and evidenced by Endorsement.
2. **Alterations and Changes**
 - a) **By Us** – We reserve the right to amend the terms and provisions of this Policy by giving thirty (30) days prior notice in writing by ordinary post to Your last known address in Our records, and such amendment will be applicable from the next renewal of this Policy.
 - b) **By You** – You shall give written notice to Us immediately of any changes in Your contact details.

No alteration to this Policy shall be valid unless authorised by Us and such approval is endorsed thereon.
3. **Reasonable Care**
The Insured Person shall act in a prudent manner to prevent loss, damage, Accident, Bodily Injury or Illness and exercise reasonable care for the safety and supervision of their property as if uninsured.
4. **Family Travel**
Legal Spouse and/or Legal Child(ren) named under the Policy must travel together and be accompanied by the You throughout the duration of the Trip.
5. **Misrepresentation**
This Policy shall be cancelled in the event of any misrepresentation, misdescription, non-disclosure or concealment of any circumstances by the Insured Person, which is material to or connected with their insurance/Takaful record, including previous refusals to grant insurance/Takaful coverage and claim history.
6. **Fraud**
If any claim under this Policy shall be in any respect fraudulent or if any fraudulent means or devices shall be used by any person to obtain a Benefit under this Policy, We shall not have liability in respect of such claim and We shall be entitled to terminate this Policy with immediate effect.
7. **Misstatement of Age**
If the age of the Insured Person has been misstated and the premium paid as a result thereof is insufficient, any claim payable under this Policy shall be prorated based on the ratio of the actual premium paid to the correct premium which should have been charged for the year. Any excess premium, which may have been paid as a result of such misstatement of age, shall be refunded without interest.
8. **Termination of Policy**
 - a) **Termination by You**
If You give official notice in writing to Us to terminate this Insurance, or terminate coverage for any Insured Person, such termination shall become effective on the date the notice is received or on the date specified in such notice, whichever is the later.
 - b) **Automatic Termination**
This Insurance shall be terminated:
 - i) Upon the death of the Insured Person;

- ii) If the Insured Person ceases to be eligible on the grounds of age; or
- iii) Upon payment of Benefit Amount under Section A1(1) to A1(5).

c) Termination by Us

We may give notice of termination hereof by registered post to You at Your last known address. Such termination shall become effective after thirty (30) days following the date of such notice.

d) Non-Payment of Premium

If the premium charged to Your account is not paid, this Policy shall be deemed to be void from inception.

e) Premium Position Upon Termination

Per Trip Plan: If the effective date of termination is prior to the commencement of the Trip, You would be entitled to full refund of premium. If the effective date of termination is after the commencement of the Trip, no refund of premium would be allowed.

Annual Plan: In the event of premium having been paid for any period beyond the date of termination of this Policy, the relevant proportion thereof shall be refunded to You. If premium has not been paid for any period up to the date of termination, then You shall be liable for the payment of such premium.

Refund of premium subject that no claim has been made during the Period of Insurance.

f) Effective Time of Termination

This Policy shall terminate at 12:01am Malaysian Time on the relevant date specified in the occurrence date of any events specified herein, Schedule or Endorsement.

9. Payment of Benefit

- a) You are required to provide Us with proof of age (i.e. a birth certificate or identity card) before We can make any payment of Benefits to You under this Policy.
- b) In the event of Your death, We shall pay the claims proceeds to Your named nominee(s) (if applicable) or to your estate. Upon payment We will be fully discharged of our obligations under this Policy.

10. Claims Notification

- a) All claims must be notified to Us as soon as possible but not later than thirty (30) days after any event which may entitle You to claim under this Policy.
- b) In case of hospitalization or medical emergency, You, a person travelling with You or treating medical authority or institution must immediately contact Our 24 Hours Travel and Medical Assistance Helpline to verify coverage and arrange the appropriate medical care.
- c) Send to Us immediately any writ, summons, letters or other documents.
- d) Any documents or evidence required by Us to verify the claim shall be provided by You at Your own expense. Any medical examination required by Us to verify the claim shall be at Our expense.
- e) Reimbursement claims are subject to original receipts being provided.

11. Subrogation

If We shall become liable for any payment under this Insurance, We shall be subrogated to the extent of such payment to all the rights and remedies of the Insured Person against any party and shall be entitled at its own expense to sue in the name of the Insured Person. The Insured Person shall give or cause to be given to Us all such assistance in his/her power as We shall require to secure the rights and remedies and at Our request shall execute or cause to be executed all documents necessary to enable Us to effectively to bring suit in the name of the Insured Person.

12. Other Insurances/Takaful

No person shall be covered under more than one World Traveller Care Policy/Takaful Certificate issued by Us. In the event the Insured Person is covered under more than one such Policy/Certificate, We shall consider that person to be covered under the Policy/Certificate, which provides the greatest amount of Benefit. If at the time of any loss, damage or liability arising under the Policy there is any other insurance/Takaful covering the same loss, damage or liability, We shall pay only Our ratable proportion.

13. Interest and Currency

No amount payable under this Policy shall be subject to any interest. Premium and Benefits payable under this Policy shall be in Ringgit Malaysia.

14. Governing Law

This Policy shall be governed by and interpreted in accordance with the Laws of Malaysia.

15. Third parties

Nothing in this policy is intended to grant to any third party any right to enforce any term of this policy or to confer any third party any benefits under this policy.

16. Arbitration

All differences arising out of the Policy shall be referred to the decision of an Arbitrator to be appointed in writing by the parties in difference or if they cannot agree upon a single Arbitrator to the decision of two Arbitrators, one to be appointed in writing by each of the parties or, in the case the Arbitrators do not agree, of an Umpire appointed in writing by the Arbitrators before entering upon the reference. The Umpire shall sit with the Arbitrators and preside at their meetings. The costs of the reference and of the award shall be at the discretion of the Arbitrator, Arbitrators or Umpire making the award. It is hereby expressly stipulated and declared that it shall be condition precedent to any right of action or suit upon this Policy that the award by such Arbitrator, Arbitrators or Umpire of the amount of Benefit if disputed, shall be first obtained.

17. Legal Proceedings

No action at law or in equity shall be brought to recover on the Policy prior to expiration of sixty (60) days after written proof of loss has been furnished in accordance with the requirements of this Policy. If the Insured shall fail to supply the requisite proof of loss as stipulated by the terms, provisions and conditions of this Policy, the Insured may, within a grace period of one calendar year from the time that the written proof of loss to be furnished, submit the relevant proof of loss to Us with cogent reason(s) for the failure to comply with the Policy terms, provisions and conditions. The acceptance of such proof of loss shall be at Our sole and entire discretion. After such grace period has expired, We will not accept, for any reason whatsoever, such written proof of loss.

18. Data Protection Notice

You irrevocably consent and agree that:

- a) We shall be able to collect, use, maintain and disclose Your Personal Data to:

- i) Etiqa General Insurance Berhad , Etiqa Takaful Berhad, Etiqa Life International (L) Ltd or Etiqa Offshore Insurance (L) Ltd, as the context may require;
 - ii) Other entities within Maybank Group;
 - iii) Our authorised agents and service providers with whom We have contractual agreements for some of Our functions, services and activities;
 - iv) Other insurance / Takaful and distribution parties (e.g. banks, Islamic banks, insurance brokers, Takaful brokers, reinsurance companies, Retakaful companies, as the context may require);
 - v) Industry trade associations such as Life Insurance Association of Malaysia (LIAM), Persatuan Insurans Am Malaysia (PIAM) and Malaysian Takaful Association (MTA);
 - vi) Our merchants and strategic partners;
 - vii) Any parties authorised by You (from time to time); or
 - viii) Enforcement regulatory and governmental agencies as permitted or required by law, authorised by any order of court or to meet obligations to regulatory authorities;
- b) You will keep Us updated in respect of all such Personal Data as soon as practicable; and
- c) We shall not be liable for any direct or indirect loss or damage due to any inaccuracy or incompleteness in the Personal Data provided to Us.

We may from time to time request You to provide other Personal Data required for the purposes of this Policy.

For the detailed privacy notice on how We collect, use, process, protect and disclose Your Personal Data, You may refer to Our website at www.etiqa.com.my, visit Our branches or contact Etiqa Online at 1300 13 8888. Prior to providing Us with any individual's Personal Data, You must inform the individual of Our privacy notice. The terms of Our notice would also apply to such individual.

POLICY INFORMATION STATEMENT

1. In case of any changes to Your address, please inform Us immediately.
2. If You have any enquiries other than claims, please contact Us at:
Etiqua General Insurance Berhad
Level 13, Tower B, Dataran Maybank
No. 1, Jalan Maarof
59000 Kuala Lumpur, Malaysia
Telephone Number: +603 2297 3888
Facsimile Number: +603 2297 3800
Etiqua Online: 1300 13 8888
E-mail: info@etiqua.com.my
Homepage: www.etiqua.com.my
3. In the event of claims under the Policy, please call Our Claims Assist at 1300 88 1007.

COMPLAINT PROCEDURES

If You feel that Our service to You needs improvement, please let Us have Your feedback by contacting Us by post at:

Complaint Management Unit
Etiqua General Insurance Berhad
Level 5, Tower B, Dataran Maybank
No. 1, Jalan Maarof
59000 Kuala Lumpur, Malaysia;

Or by telephone number 1300 13 8888 or +603 2780 4500 (Overseas)
Facsimile Number: +603 2785 3093
E-mail: cmu@etiqua.com.my

We assure You that Your feedback will be looked into.

The Ombudsman for Financial Services (OFS) and Bank Negara Malaysia's Customer Services Bureau (CSB) provide alternative avenues for members of the public to seek redress against unfair market practices.

PROCEDURE FOR COMPLAINT TO OFS

The Ombudsman for Financial Services (OFS) may be contacted by the Claimant or Policy Holder, in the event that the Claimant or Policy Holder is dissatisfied with the decision of Etiqua General Insurance Berhad to a dispute, or Etiqua General Insurance Berhad's failure to respond to a complaint within sixty (60) days. The OFS contact details are as follows:

Email: enquiry@ofs.org.my
or
Facsimile Number: +603-2272 1577
or
Postal address:

Chief Executive Officer
Ombudsman for Financial Services
(Formerly known as Financial Mediation Bureau)
Level 14, Main Block
Menara Takaful Malaysia
No.4, Jalan Sultan Sulaiman
50000, Kuala Lumpur

Alternatively, the Claimant or Policy Holder may file the dispute in person at the OFS office.

The OFS must be contacted within six (6) months from the date of the final decision from Etiqua General Insurance Berhad to the dispute of the Claimant or Policy Holder.

For further details on the OFS, please obtain the information pamphlets from Etiqua General Insurance Berhad or visit the OFS website at www.ofs.org.my.

Engagement of the OFS is subject to the terms of reference pursuant to Section 126 of the Financial Services Act 2013. Contacting the OFS does not affect the Claimant's or Insured Person's right to take legal action against Etiqua General Insurance Berhad should they be dissatisfied with the outcome by the OFS.

PROCEDURE FOR COMPLAINT TO CSB

Any Insured Person or Claimant who is not satisfied with the conduct of the Insurance Company may write to CSB, giving details of the complaint, the name of the Insurance Company and the Policy number or the claim number.

Copies of the correspondence (if any) between the Insured Person or the Claimant and the Insurance Company may be sent to facilitate tracing the case file kept by the Insurance Company.

The contact details are as follows:

Director, Jabatan LINK dan Pejabat Wilayah
Bank Negara Malaysia
Jalan Dato' Onn
50480 Kuala Lumpur, Malaysia
Telephone Number: 1300 88 5465
Facsimile Number: +603 2174 1515
E-mail: bnmtelelink@bnm.gov.my